5.5: Specific Communication Approaches

There is no panacea to address vaccine hesitancy. Instead, health professionals need to access a variety of tools and approaches to best collaborate with their clients. Presumptive statements and motivational interviewing have been identified as effective tools for communicating about vaccines.

Presumptive Statements

Presumptive statements reinforce vaccination as a normative choice, without inadvertently suggesting that clients should be worried about vaccines. Healthcare professionals can use presumptive statements such as “your child’s next vaccine is due in two months…” or “I see your child is getting the one-year vaccines today.”

Motivational Interviewing

Motivational interviewing (MI) emerged in the 1980s as an approach to establish a safe and open environment for persons managing substance abuse. It is a client-centered approach that supports clients’ motivations to change and addresses internal ambivalence (Miller & Rollnick, 2013). MI was recently applied to vaccine hesitancy because of its appreciative-inquiry qualities. Appreciative-inquiry privileges strengths and motivations of clients, rather than focusing on the negativity of antivaccination. Health professionals should consider the principles of MI as a tool among other strategies. There are five principles of MI: 1) express empathy through reflection; 2) develop discrepancy between client goals, values, and behaviours; 3) avoid argument and direct confrontation; 4) adjust to client resistance rather than opposing it directly; 5) encourage self-efficacy and optimism (Miller & Rollnick, 1991, p. 51-52). This approach relies on health professionals collaborating with clients and actively encouraging their participation in decision making, see Table 5.2 for motivational interviewing tips.
**Table 5.2: Motivational Interviewing Tips**

<table>
<thead>
<tr>
<th>Motivational Interviewing Principle</th>
<th>Pointers</th>
<th>Talking Quotes</th>
</tr>
</thead>
</table>
| Express empathy through reflection  | • Convey respect for the client’s view.  
   • Avoid talking ‘at’ the client, as if a one-way stream of information.  
   • Convey nonjudgment and be mindful of body language and tone.  
   • Recognize that ambivalence is normal.  | • “I can understand that you want what is best for your child.”  
   • “Tell me more about your concern.”  
   • “Perhaps I can provide some information for you.”  |
| Develop discrepancy between client goals, values, and behaviours | • Explore awareness for consequences of not vaccinating (without engaging in scare tactics).  
   • Ask client to consider consequences of not vaccinating.  | • “Let’s talk about some of the risks of not vaccinating.”  |
| Avoid argument and direct confrontation | • Avoid defensiveness and do not take a response personally.  
   • Avoid the use of labels like “anti-vaxer.”  | • “Let me see if I am understanding you correctly …”  
   • “Let’s talk about your concerns some more.”  |
| Adjust to client resistance rather than opposing it directly | • Be hopeful for shifting perceptions.  
   • Recognize that the client is a valuable resource for finding a solution.  | • “I can appreciate your resourcefulness; let’s talk more about [a specific issue].”  |
| Encourage self-efficacy and optimism | • Recognize self-determination.  
   • Focus on positive shifts rather than negative outcomes.  | • “I think it is positive that you are seeking clarification.”  |

**Table 5.3** provides an overview of helpful strategies for providers to implement when communicating with someone who is vaccine hesitant compared to someone who has refused a (or multiple) vaccines. This is not suggest that these are mutual exclusive ways-of-being, but to highlight that your strategies may shift as a healthcare provider.

**Table 5.3: How to respond to vaccine hesitancy vs. vaccine refusal**

<table>
<thead>
<tr>
<th>Vaccine Refuser</th>
<th>Vaccine Hesitant</th>
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</thead>
</table>
• Do not dismiss
• Work on building trust
• Do not engage in a debate
• Avoid unidirectional information
• Ask questions

• Do not make assumptions
• Listen and understand
• Do not overestimate concerns
• Engage in active listening
• Tailor responses to specific concerns