National Center for Emerging Zoonotic and Infectious Disease

CDC's Vaccine Safety Communications

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Outline

- CDC's vaccine safety communications
- Communicating vaccine safety during the COVID-19 Public Health Emergency
- Lessons learned

Overview of CDC Vaccine Safety Communications

Vaccine Safety Communications

Objective:

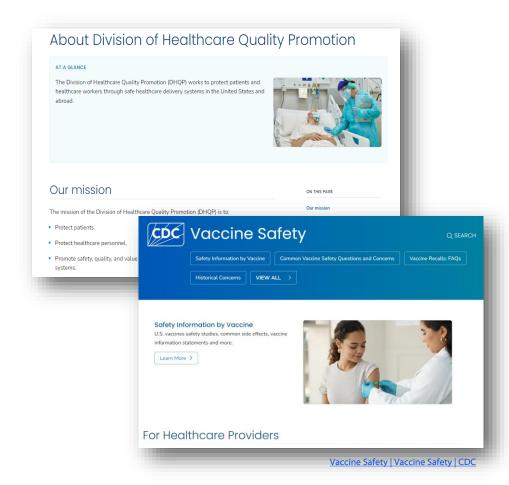
- To provide clear, consistent, and evidence-based information about the safety of post authorization and post licensure vaccines to educate all audiences and build trust in vaccine safety programs and systems in the United States.
- By using established communication principles to deliver accurate, credible, and timely vaccine safety communication.

Vaccine Safety Communications Efforts

- Vaccine safety communication efforts are deliberate approaches designed to effectively share accurate, evidence-based information about vaccine safety while addressing concerns and building trust. This includes
 - Transparency
 - Proactive engagement
 - Audience-specific messages
 - Collaboration with trusted messengers
 - Consistent messaging that aligns with risk communication research and best practices
 - Combatting misinformation

Vaccine Safety at CDC

- Located within the Division of Healthcare Quality Promotion in the National Center for Zoonotic and Emerging Infectious Diseases
 - Immunization Safety Office (ISO)
 - 50 FTEs
 - 33 Contractors
 - ISO Health communications team
 - 2 FTEs
 - 5 Contractors



Vaccine Safety Communication at CDC is Cross-Cutting

Vaccine Information Statement (VIS) Advisory Committees (e.g.,ACIP) Global healthcare provider & partner training

Vaccine guidance for healthcare providers

Emergency response

Support to state and local health departments

Responses to public inquiries

Travelers' vaccine guidance

Immigrant and refugee health guidance

Domestic healthcare provider & partner training

Resources for specific populations (e.g., older adults)

Vaccine Safety Communication with Partners



Partner Network **Digest**



This newsletter is developed for organizations that receive funding through CDC's Immunization Services Division. The Partner Network Digest provides our funded partners with important updates, tools, and resources.

Early Safety Findings Among Persons Aged ≥60 Years Who Received a Respiratory Syncytial Virus Vaccine

Respiratory Virus Season Resources

CDC Vaccine Safety Monitoring Updates — CDC continues to get questions about COVID-19 date, almost 700 million doses of COVID-19 vaccines have been given in the United States, and monitoring in multiple safety systems continues to show they are safe. Some common COVID-19 concerns are addressed below.

Safety Monitoring, CDC's vaccine safety monitoring systems are designed to be sensitive
and assessment of potential safety signals and the communication of safety information to
how the vaccine safety monitoring process is working successfully.



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CDC Clinician Outreach and Communication Activity

January 22, 2024

Information on Respiratory Syncytial Virus (RSV) Vaccine Administration Errors in Young Children and Pregnant People

Clinicians

errors are known to occur and are routinely monitored through the eporting System' (VAERS). Since approval of RSV vaccines and nirsevimab, the Centers for Disease Control and Prevention I Drug Administration (FDA) have received reports of the (Arexvy) RSV vaccines being administered in error to young have also received reports of the GSK RSV vaccine (Arexvy)

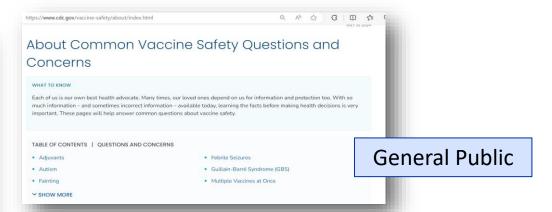
comp assummances of viror to pregnant people. As of January 17, 2024, the number of reports received by VAERS suggests that these types of errors are uncommon in young children less than 2 years of age (25 reports) and pregnant people (128 reports) relative to an estimated 1 million flants protected from RSV either through infant receipt of nirsewinab or through vaccination of pregnant people 2

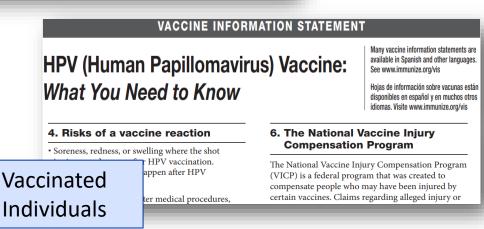
est the safety of the RSV seen in clinical trials amo her-than-expected numb

Immunization
Implementation
Partners

Vaccine Safety Communication with the Public







Key Vaccine Safety Interagency Partners





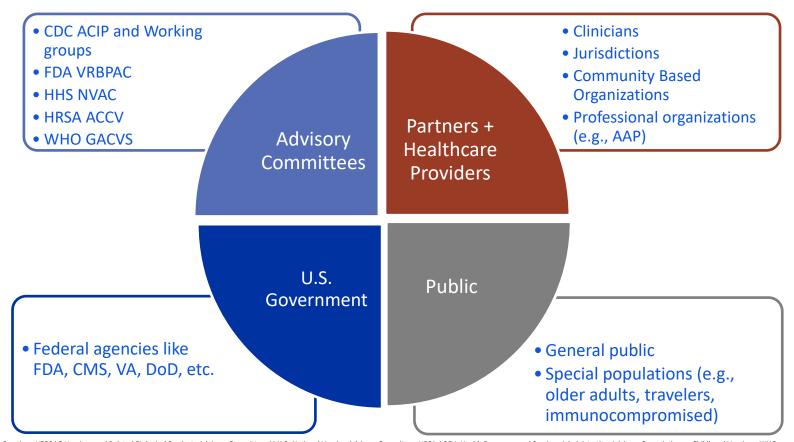








Communicating Vaccine Safety: Key Audiences



Communication from CDC on Vaccine Safety Information to Various Audiences

Federal Agencies

- Near daily contact about safety issues
- Formal briefings

Advisory Committees

- Work group meetings
- Presentations

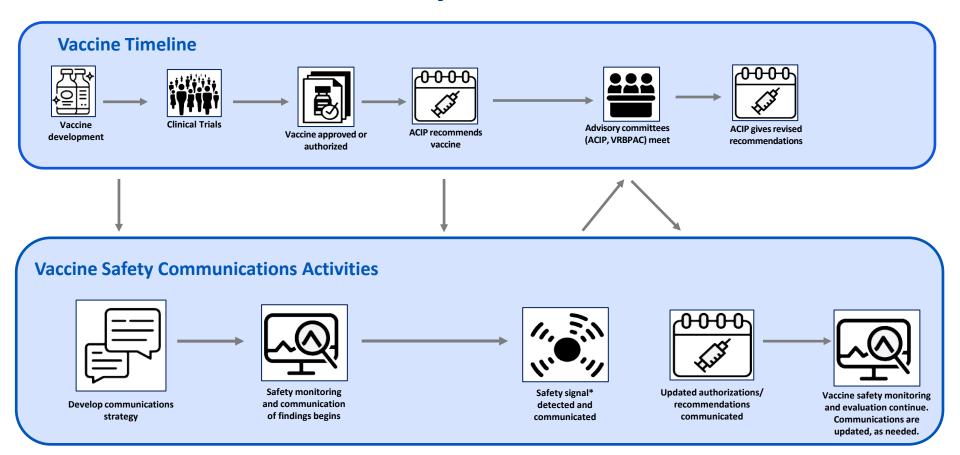
Partners (including healthcare providers)

- Partner newsletters
- Dear Provider letters
- COCA calls
- HCP-focused outlets (e.g., Medscape)
- Trainings
- Website
- Guidance/Interim Clinical Considerations/Recommendations

Public

- Website
- Vaccine Information Sheet (VIS)
- Social media
- Messages for specific populations (e.g., pregnancy)
- Videos
- Print materials
- •Through traditional media

Overview of Vaccine Safety Communication Activities



^{*}Signal: a statistical association found in vaccine safety monitoring; it does not mean there is a true association and requires investigation and evaluation.

When a Vaccine Safety Signal is Identified: General Communication Process

SIGNAL IDENTIFICATION



Signal identified

Discuss with other federal agencies, review other sources of data

INTERNAL COMMUNICATION



Division, Center, and CDC leadership + ACIP vaccine

WG leads

Notify

ACIP WG presentation to get feedback, additional perspectives

FINDING EXTERNALLY



ACIP presentation

Communication materials developed:

- Webpages
- Social Media
- Partner letters/calls
- Update to clinical considerations guidance

SIGNAL EVALUTION

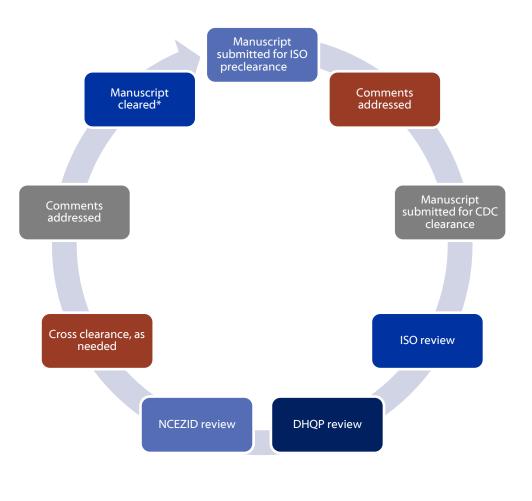


Signal evaluation

Communication updated as new information becomes available + scientific findings are published

Clearance Process for Manuscripts

- Clearance is required for all documents where CDC is engaged
- Level of clearance needed depends if CDC co-authors are included
- Average length in clearance:4-6 weeks
 - Urgent reports (e.g., MMWRs)
 can be expedited



Clearance Process for Communications Products

All products developed are reviewed and cleared

 Development of products with SMEs is an iterative process

 Level of clearance within CDC depends on the product

Development of product by Vaccine Safety Comms Team Office of Shared with ISO Communications, as SMEs for review needed Reviewed and Cross-clearance, as Cleared by ISO needed Leadership Reviewed and Reviewed and Cleared by NCEZID Cleared by Vaccine Safety Comms Lead **OD Comms** Reviewed and Cleared by DHQP ADC

Vaccine Safety Communications during the COVID-19 Public Health Emergency

COVID-19 Vaccine Safety Team

CDC's COVID-19 Vaccine Safety Team and COVID-19 Vaccine Communication Team were part of the COVID-19 Vaccine Task Force, which also handled vaccine distribution, pharmacy and long-term care logistics, jurisdictional support, and more.

COVID-19 Vaccine Safety Team (VST)

- ISO staff deployed to this team
- Relied on rotating deployers
 - > 200 deployers to the VST during the Response
 - Typically 6-8 week deployments
- Spring 2022: Response activities transition to program (ISO)

COVID-19 Vaccine Communications Team

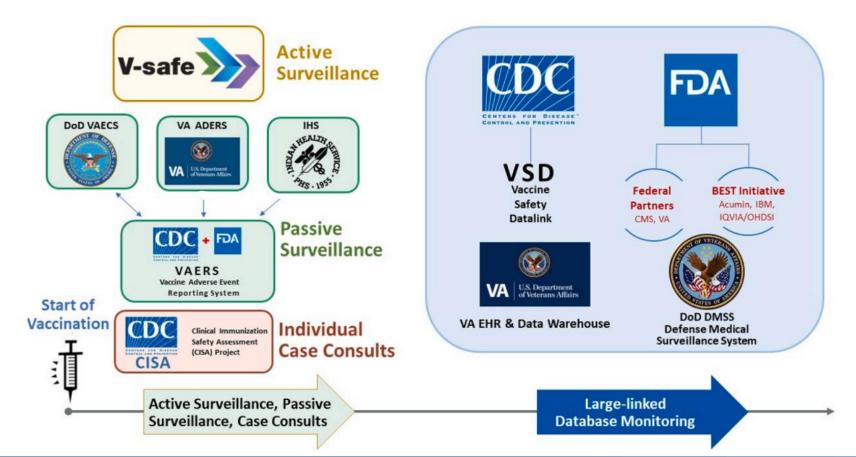
- Worked closely with COVID-19 Vaccine Safety
 Team on vaccine-related communications
- October 2020- Spring 2022: Deployment of health communication specialists within CDC
- Team size varied from 2-10 deployers
 - Typically 4-8 week deployments
- Summer 2021: Permanent FTE and DHQP contracted staff dedicated vaccine safety communications

CDC Joint Information Center (JIC)

- Central point of information coordination and emergency risk communication during major CDC responses
- Key functions:
 - Centralize response communications
 - Develop response communications strategy
 - Staffing
 - Engage with clinician and non-clinician partners
 - Response clearance
 - Research and evaluation



COVID-19 Vaccine Safety Monitoring Plan and Timeline

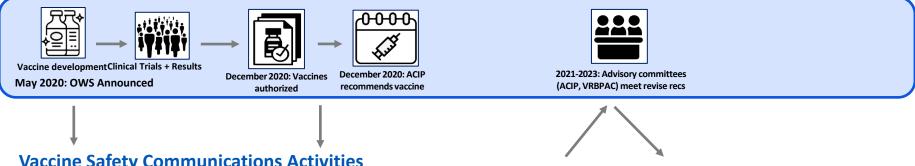


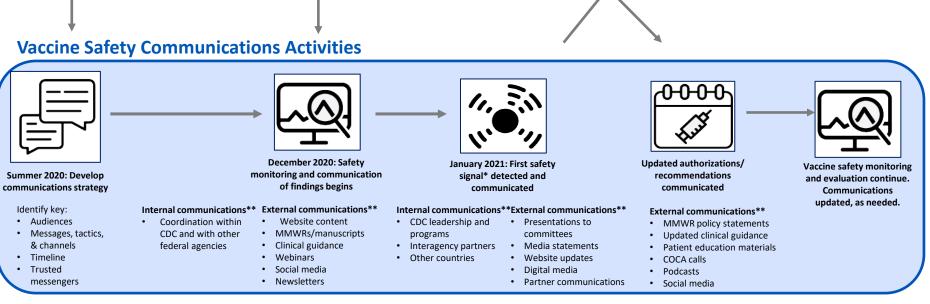
Development and Communication of a Vaccine Safety Monitoring Plan

- Interagency vaccine safety monitoring was coordinated with partners
 - Developing a common core list of Adverse Events of Special Interest for monitoring
 - Sharing information on safety monitoring plans, including methods
- Updates on the vaccine safety monitoring plan given to HHS/CDC leadership and Advisory Committees
 - Regular updates to ACIP Vaccine Safety Technical (VaST) Work Group
- COVID-19 vaccine safety webpages were kept updated
 - Description of federal safety monitoring systems and general vaccine monitoring activities
 - Posting of COVID-19 vaccine safety SOPs and protocols

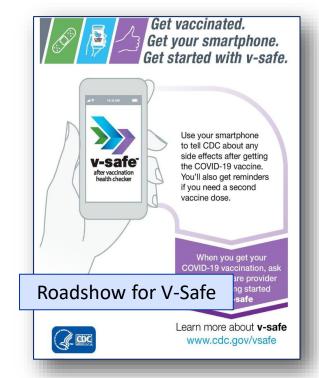
Preparing for the National COVID-19 Vaccination Program

Vaccine Timeline

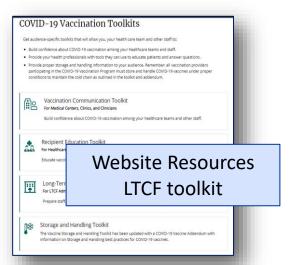




Education and Communication on U.S. COVID-19 Vaccine Safety Systems







To Request a COVID-19 CISA Clinical Consultation

Healthcare providers or health departments in the United States can request a consultation from CISA COVIDvax for a complex COVID-19 vaccine safety question that is (1) about an individual patient residing in the United States or vaccine safety issue and (2) not readily addressed by CDC or <u>Advisory Committee on Immunization Practices (ACIP)</u> guidelines.

This request can be made through $\mbox{CDC-INFO}$ by:

- Calling 800-CDC-INFO (800-232-4636), or
- Submitting a request via <u>CDC-INFO webform</u>

Dear Provider Letter

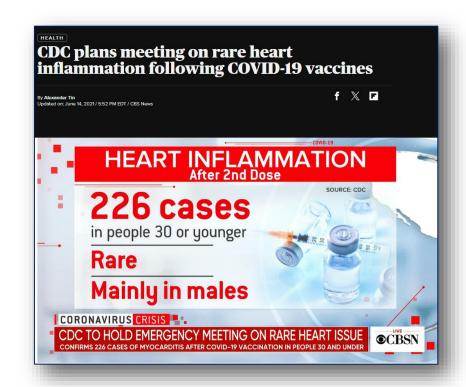
Continuous Updates to CDC's ACIP

Between December 2020-May 2023:

- 27 ACIP meetings on COVID-19 vaccines
 - 17 VaST assessments
 - 18 COVID-19 vaccine safety presentations from CDC systems

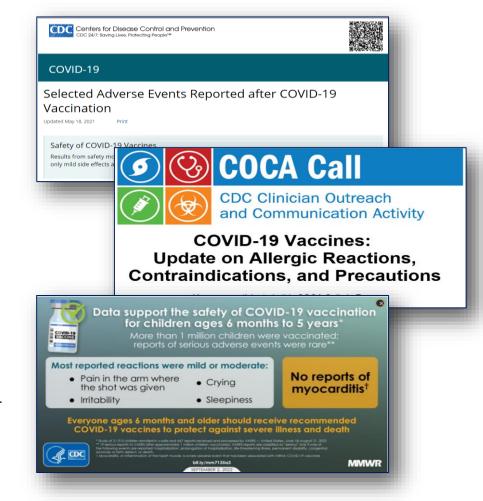
Associated communication activities

- Internal briefing documents
- Media interviews
- Prepared responses for CDC Info
- Webpage updates
- Interim clinical consideration updates
- Social media posts
- Communications with partners



Vaccine Safety Monitoring Findings

- Public presentations
- 106 Publications
 - Including 28 MMWRs
- Each presentation and publication had a communications plan
 - Key messages, planned outreach, media statement
- Website updates
 - Select Adverse Events Reported after COVID-19 Vaccination detailed adverse events like anaphylaxis, TTS, etc.



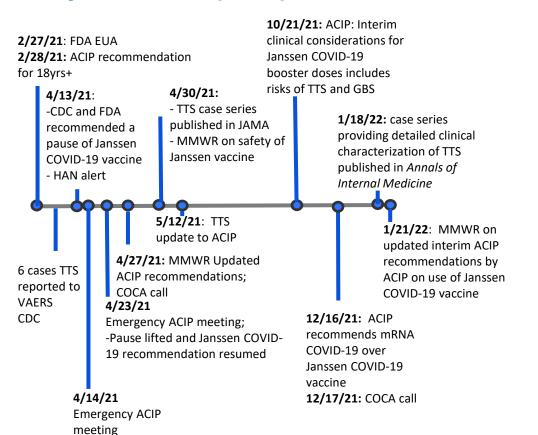
Promotion of Vaccine Safety Monitoring Systems







Experience with Thrombosis with Thrombocytopenia Syndrome (TTS) after Janssen COVID-19 Vaccine





Addressing Myths and Facts about COVID-19 Vaccines

- Social listening conducted that informed CDC about vaccine safety concerns
 - COVID-19 State of Vaccine Confidence Report
 - Posted on CDC's website
- Dedicated CDC webpage for COVID-19 myths and facts

COVID-19 vaccines do not contain microchips and they cannot make you magnetic.

FACT

Vaccines are developed to fight against disease.



Vaccines work by stimulating your immune system to produce antibodies. After getting vaccinated, you develop immunity to that disease, without having to get the disease first.

COVID-19 vaccines are not administered to track your movement. They are free from manufactured products such as microelectronics, electrodes, carbon nanotubes, and nanowire semiconductors.

COVID-19 vaccines are free from metals such as iron, nickel, cobalt, lithium, and rare earth alloys. They do not contain ingredients that can produce an electromagnetic field at the site of your injection.

Learn more about the ingredients in the COVID-19 vaccinations authorized for use in the United States.

Vaccine Safety: Getting Out the Message

- CDC's website
- Social media
 - General audiences: Instagram, Facebook, X (formerly Twitter)
 - Healthcare professional audiences: LinkedIn
- Healthcare provider outlets like Medscape and Doximity
- Partner calls and webinars
- Podcasts
- Videos

Rapid Dissemination of COVID-19 Vaccine Safety Information in Setting of Largest Vaccination Effort in U.S. History

From Dec 2020 to May 2023

17

VaST Work

Group Reports

25

Advisory
s meeting
presentations
(ACIP, VRBPAC)

43

Morbidity and Mortality Weekly Report (MMWR) publications ~1,700

Responses to inquiries from public health officials, healthcare providers, and public

~152K

Subscribers received CDC partner newsletters ~101M

Views across Instagram, X, Facebook, and LinkedIn

1B Vaccine doses distributed

1000

900

800

700

00

500

0

400

300

200

100

0

Lessons Learned from COVID-19 Public Health Emergency

Lessons Learned

- Importance of risk communication
 - Growing hesitancy, decreased confidence, and rumors emphasized the need to have clear, transparent, and timely vaccine safety messaging
 - Using new and non-traditional trusted messengers to relay vaccine safety information
 - Need to have a multi-pronged approach to sharing vaccine safety information
 - No one-size-fits-all approach
 - Vaccine safety concerns differ among populations
- Vaccine safety communications requires specialized understanding
 - Timely recruitment and hiring is essential
- Communication research is important to inform messaging

Current Communications Projects: Informing Future Vaccine Safety Messaging

Aiming to understand our audiences better:

- Knowledge and understanding of vaccine safety monitoring systems
- Perceptions of safety: vaccines compared to other health-related products
- Assessments of vaccine safety discussions between patient and provider
- Identification of new dissemination channels for vaccine safety messaging and materials to reach targeted populations

Expected outcomes:

- Refine vaccine safety messages
- Optimize other types of communications on vaccine safety

Recent Research Suggest More Nuanced Communication is Needed

- **Skepticism Towards Vaccines**: Unvaccinated adults largely doubt the health benefits of COVID-19 vaccines, fearing medium to high risks of side effects (Pew Communications Research, May 2023).
- **Critical Perceptions**: Vaccine-hesitant individuals reject absolute terms like "best" and "safest," and view vaccination calls-to-action as guilt-inducing (Johns Hopkins, May 2023).
- **Communication Challenges**: Phrases like "trust the science" alienate those skeptical of scientific authority; emphasis on evolving knowledge may enhance receptivity (CDCF contracted research, January 2024).

Results of Recent CDC Vaccine Safety Focus Groups with Current and Expecting Parents

- Respondents are sensitive to ambiguous language in vaccine communications, often
 dissecting claims and questioning their credibility. Language that lacks specificity, such as
 "routinely" or "generally," can provoke skepticism, especially among those who are
 already hesitant about vaccines.
 - There is considerable resistance to blanket, absolute statements like "safe and effective". Messaging that acknowledges the complexities of vaccines resonates more.
- Clear and definitive language like "transparent", "long-lasting" and "long-standing" is viewed positively by respondents. These terms are seen as providing detailed information and instilling confidence in the vaccine monitoring process.
- References to "talk to your healthcare provider" are often dismissed by vaccinehesitant respondents, who express skepticism about the advice of healthcare professionals.

Communicating Vaccine Safety

- Vaccines are the best protection we have against infectious diseases.
- The benefits of vaccines far outweigh the risks. As science continues to advance, we strive to develop safer vaccines and improve delivery to protect ourselves against disease more effectively.
- COVID-19 vaccines are the best way to protect your child from severe illness.
- Hundreds of millions of people in the U.S. have safely received COVID-19
 vaccines. COVID-19 vaccines are closely monitored by multiple U.S. vaccine safety
 systems.
- Rotavirus vaccines safely protect children from severe watery diarrhea, vomiting and hospitalizations.
- Did you know? The United States' long-standing vaccine safety systems ensure that the benefits of vaccination far outweigh the risks.

Conclusion

- CDC communicates evidence-based information about vaccine safety to various audiences
- Lessons learned from the COVID-19 response are guiding CDC to improve communication efforts



Backup slides

Developing COVID-19 vaccine safety communication products

- Similar process as nonemergency documents
 - Clearance chain differs
- Review ensures:
 - Documents align with CDC policies
 - Plain language
 - Clearly understandable
 - Considers equitable graphics

Development of product by Vaccine Safety Comms Staff Document approved Shared with Vaccine for external Safety SMEs for review dissemination Reviewed and Cleared Reviewed and Cleared through COVID-19 by Vaccine Safety Team Response ead Reviewed and Cleared Reviewed and Cleared by Vaccine Task Force by Vaccine Safety Comms Lead Comms Lead

Communicating Findings from ISO Vaccine Safety Studies

- Manuscript accepted for publication
- Communications rollout plan developed
 - May include talking points, social and other media plan, draft social media posts
- Updating federal partners
- Publication of manuscript
- Notification of partners through newsletters
- Depending on findings:
 - Website updates
 - Updates to interim clinical considerations guidance
 - Digital media (social, emails to vaccine safety distribution list)

Federal and International Advisory Committees



Advisory Committee on Immunization Practices (ACIP)

Including the COVID-19 Vaccine Safety Technical (VaST) Work Group (2020—2023)



Vaccines and Related Biological Products Committee (VRBPAC)



National Vaccine Advisory Committee



Advisory Commission on Childhood Vaccines



WHO's Global Advisory Committee on Vaccine Safety



National Immunization Technical Advisory Groups in other countries

Key Components of Communicating Vaccine Safety

- Data monitoring/evaluation and reporting
- Communication and collaboration with partners
- Public information dissemination
- Healthcare provider support
- Public awareness campaigns
- Crisis communication
- Public and healthcare provider responses
- Feedback and evaluation

Internal vaccine safety communications

- Coordinate with other federal agencies
- Provide updates to other programs
- Update leadership
 - DHQP, NCEZID, NCIRD, and CDC
- Present findings to ACIP Work Groups
- Work with NCIRD colleagues for updating ICC and VIS

Preparing for the National COVID-19 Vaccination Program

- CDC started developing a COVID-19 vaccine safety communications plan in summer 2020
- Plan included:
 - Goals and objectives
 - Situation analysis
 - Anticipated audiences
 - Pre-developed messages
 - Channels and tactics, including activities and products
 - Evaluation and metrics
 - Timeline