Factors Influencing Women’s Decisions about Having the Pertussis-Containing (Tdap) Vaccine during Pregnancy

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Method

Self reported survey of post-partum women within the CDHB area; June to October 2013

Aim:
To explore the factors influencing women’s decisions regarding having the pertussis vaccine during pregnancy
Method (2)

A survey pack mailed to all birth notifications within the Canterbury District Health Board area:
• An information sheet
• Log-in details for an online survey option
• Hard copy of the survey
• Pre-paid envelope for return of surveys

A follow up phone call or text message reminder
• (2 weeks later)
Results

1883 surveys were mailed from June to October 2013
596 surveys returned (31.6% response rate)

Tdap vaccine uptake:
• 74.1% received Tdap during pregnancy (n=441)
• 25.9% declined Tdap during pregnancy (n=154)
• One person could not remember
Characteristics of participants - age

<table>
<thead>
<tr>
<th>Age (years)</th>
<th>Surveys sent</th>
<th>Surveys returned</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;25</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>26-29</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>30-33</td>
<td></td>
<td>30</td>
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<tr>
<td>34-37</td>
<td></td>
<td>10</td>
</tr>
<tr>
<td>&gt;38</td>
<td>20</td>
<td></td>
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</tbody>
</table>

Percentage
Characteristics of participants - ethnicity

- European
- Asian
- Maori
- Pacific Peoples
- MELAA
- Other
- Unknown ethnicity

Percentage of surveys sent and returned for each ethnicity category.
Factors associated with receiving Tdap

Women who accepted Tdap vaccine during pregnancy:
- Desire to protect their baby (96%)
- Recommended by a Health Professional (84%)
- The threat of pertussis in the community (50%)
- The vaccine was funded (43%)

Women who did not have the Tdap vaccine during pregnancy:
- They did not know the vaccine was available (73%)
- Fear of side effects (68%)
- Doubtful of the vaccine effectiveness (56%)
Participants indicated the all sources of “encouraging information” received
Discouraging Information Sources

Participants indicated the sources of “discouraging information” received.
Discouraging information from a GP vs receipt of Tdap vaccine

<table>
<thead>
<tr>
<th>No Tdap vaccine received by women who received discouraging information</th>
<th>Tdap vaccine received by women who received discouraging information</th>
</tr>
</thead>
<tbody>
<tr>
<td>60.1%</td>
<td>7.9%</td>
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</table>

P-Value 0.001  
95% CI= 0.3087 (0.2311-0.4126)
Women who did not receive Tdap

Those who responded were unaware the vaccine was available:

Q: “would you have considered having the pertussis vaccine if you had been offered it?”
Received Tdap - Comments

• “advice from health professionals”
  - Or “my midwife told me” (x25)

• “I believe I was doing something to help protect my new born baby” (x12)

• “I had whooping cough as a baby - remember mum telling me how awful it was” (x17)

• “awareness of its prevalence in Christchurch”
  - Or “poster at doctors/hospital” (x10)

• “conversation I had with friends” (x7)

• “recent local outbreaks effecting my community” (x5)
Did not receive Tdap - Comments

- “already immune from previous shot” (x16)
- “not enough research gone into long term side effects on baby”
  - Or “side-effects and effectiveness” (x13)
- anti-vaccines (x6)
- “just didn’t know it was available”
  - Or “did not know about it at all” (x6)
- “considered our family low risk” (x4)
- “I was unable to get to the practice” (x4)
- “baby came before appointment for injection” (x3)
Summary – influencing factors

Health professionals’ recommendations is strongly associated with vaccine uptake

The main influencing factors indicated that all health professionals need to provide

• relevant up to date information
• clear recommendation

NB: Canterbury introduced funded Tdap in April 2012; earlier than other DHBs.
Recommendations

• Improve awareness, promote maternal vaccination as routine in the provision of care

• Funded GP visit

• Increase access and promotion of key messages

• Further Research
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