
Nurses as Vaccine Advocates: Effective Strategies for Overcoming Vaccine Hesitancy In the Pediatric Population

Washeila E. Suhod¹, Joel John A. Dela Merced²

<https://orcid.org/0009-0000-4554-1642>¹

<https://orcid.org/0000-0002-1459-5274>²

St. Bernadette of Lourdes College^{1,2}

wsuhod@sblc.edu.ph¹, jdelamerced@sblc.edu.ph²

ABSTRACT

This study explored the role of nurses as vaccine advocates in addressing vaccine hesitancy among parents and guardians of pediatric patients. A qualitative descriptive phenomenological design was employed. Data were collected from nine registered nurses assigned to pediatric and immunization units through semi-structured interviews and were analyzed using Colaizzi's phenomenological method. Findings revealed that vaccine hesitancy was influenced by fear of side effects, misinformation from social media, low health literacy, and cultural beliefs. Nurses served as health educators, counselors, advocates, and trust builders in promoting vaccine acceptance. Effective strategies included health education, empathetic communication, simple language, and trust-building techniques. Nurse-led interventions improved parental understanding and increased vaccine acceptance. However, challenges such as time constraints, parental resistance, communication barriers, and mistrust were encountered. The study concluded that nurses played a vital role in overcoming vaccine hesitancy and improving immunization outcomes. Continuous training, educational resources, and institutional support were recommended to strengthen nurses' effectiveness in promoting childhood vaccination.

Keywords: Advocacy, Communication, Education, hesitancy, Immunization, Nurses, pediatrics, Strategies, vaccination

Introductions

Vaccine hesitancy remained a significant public health concern affecting childhood immunization programs worldwide. Despite the availability of safe and effective vaccines, many parents hesitated to vaccinate their children because of misinformation, fear, and limited trust in healthcare information sources. Studies have indicated that low health literacy, misinformation on social media, and ineffective communication contribute to parental doubts about vaccine safety and effectiveness. Nurses frequently interacted with parents during pediatric consultations and immunization activities, placing them in a strategic position to address concerns, correct misconceptions, and promote informed decision-making.

Statement of the problem

This study sought to explore how nurses served as vaccine advocates to overcome vaccine hesitancy among parents or guardians of pediatric patients.

Specifically, it sought to answer the following questions:

1. What factors contributed to vaccine hesitancy among parents or guardians?
2. What roles did nurses play in promoting vaccine acceptance?
3. What strategies were used by nurses to address vaccine hesitancy?
4. How effective were nurse-led interventions in increasing vaccine acceptance?
5. What challenges were encountered by nurses in vaccine advocacy?

Scope and limitations

This study explored the lived experiences of nine registered nurses assigned to the pediatric and immunization units of Cotabato Provincial Hospital. It examined their roles, communication approaches, strategies, challenges, and support needs in addressing vaccine hesitancy among parents or guardians of pediatric patients. A qualitative descriptive phenomenological design was utilized, and data were gathered through semi-structured online interviews and analyzed using Colaizzi's method.

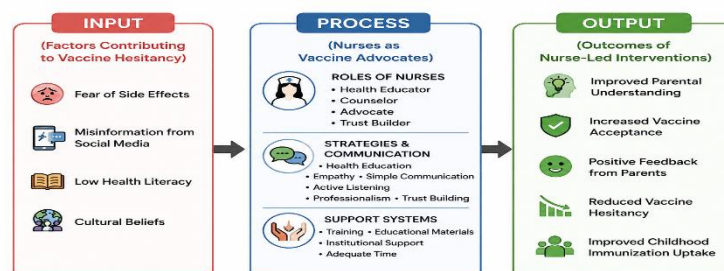
Review related literature

Parental health literacy and exposure to misinformation were identified as key factors influencing vaccine hesitancy, as parents with limited understanding of immunization often relied on inaccurate or incomplete information when making decisions about their children's health (Zhang et al., 2023; Loomba et al., 2021). Studies have shown that social media and other online platforms spread misinformation, further increasing doubts about vaccine safety and effectiveness among parents (Li et al., 2022). In addition, parental concerns about side effects and vaccine safety contributed to delayed or refused immunization, especially when clear and reliable information was lacking (Honcoop et al., 2023).

Theoretical Framework

This study is anchored on the Health Belief Model (Rosenstock, 1974) and Peplau's Interpersonal Relations Theory (Peplau, 1952), which together provide a strong framework for understanding how nurses function as vaccine advocates in addressing parental vaccine hesitancy in pediatric settings.

Conceptual Framework This framework illustrates the relationship between the factors contributing to vaccine hesitancy (input), the roles and strategies employed by nurses as vaccine advocates (process), and the outcomes of nurse-led interventions in improving vaccine acceptance among parents or guardians of pediatric patients (output).



Methodology

This study employed a qualitative research methodology to explore the lived experiences of nurses as vaccine advocates in addressing vaccine hesitancy among parents or

guardians of pediatric patients. It focused on understanding their roles, communication practices, strategies, and challenges in real clinical settings.

Research Design

The study used a qualitative descriptive phenomenological research design to capture and interpret the lived experiences of nurses in vaccine advocacy. This design was appropriate for understanding how nurses make sense of their interactions with vaccine-hesitant parents in actual healthcare settings (Moustakas, 1994).

Research Steps

The research process began with obtaining ethical approval and institutional permission before identifying eligible participants. Nurses were then selected, oriented, and provided informed consent prior to participation in online interviews. After data collection, transcripts were prepared and analyzed systematically using a structured phenomenological approach. Finally, findings were validated and organized for interpretation and reporting.

Data Collection and Sample Selection

Data were collected from nine registered nurses working in pediatric and immunization units at Provincial Hospital. Participants were selected using purposive sampling based on their direct experience with vaccine advocacy and parental communication. Semi-structured online interviews were conducted using open-ended questions to gather detailed narratives. Audio recordings and field notes were used to ensure accurate documentation of responses.

Data Analysis Methods

The study used thematic analysis guided by Colaizzi's phenomenological method (1978) to analyze the data. Transcripts were read repeatedly, and significant statements were extracted and interpreted to identify meanings. These meanings were then grouped into clusters of themes reflecting shared experiences. Member checking was conducted to ensure the credibility and accuracy of the findings.

Research Hypothesis and Validation

The study explored and understood the lived experiences of nurses as vaccine advocates in addressing vaccine hesitancy among parents or guardians of pediatric patients. To ensure the credibility and trustworthiness of the findings, member checking was conducted wherein participants reviewed and confirmed the accuracy of the interview data and interpretations.

Study Limitation and Ethical Considerations

The study was limited to a small group of nurses from a single hospital, which may affect the generalizability of the findings. It relied on self-reported experiences, which may be influenced by recall bias. Ethical considerations included obtaining informed consent, ensuring confidentiality, and securing approval from the Ethical Review Board and hospital administration. Participants were protected through anonymity, voluntary participation, and secure data handling throughout the study.

RESULTS AND DISCUSSION

RQ 1. How do nurses act as vaccine advocates in addressing vaccine hesitancy among parents or guardians in the pediatric population, particularly in terms of the factors influencing hesitancy, their roles and strategies, the effectiveness of their interventions, the challenges they encounter, the effectivity of their communication approaches, and the support or training needed to strengthen their advocacy?

Nurses act as vaccine advocates by addressing multiple factors that contribute to vaccine hesitancy among parents, including fear of side effects, misinformation from social media, low health literacy, and cultural beliefs. These factors strongly influence how parents perceive and decide about childhood immunization.

Summary

The study revealed that vaccine hesitancy among parents is influenced by fear of side effects, misinformation from social media, low health literacy, and cultural beliefs that shape their decision-making. Nurses were found to play multiple roles such as health educators, counselors, advocates, and trust builders in addressing these concerns. They used strategies including health education, empathy, simple communication, and trust-building to improve understanding and reduce hesitancy. Nurse-led interventions were effective in increasing vaccine acceptance, improving parental understanding, and generating positive feedback. However, nurses also faced challenges such as limited time, parental resistance, communication barriers, and mistrust in healthcare providers. The study further identified the need for training, resources, institutional support, and sufficient time to strengthen nursing advocacy in vaccination.

Conclusions

The study concludes that vaccine hesitancy is a complex issue influenced by emotional, informational, and cultural factors that require comprehensive interventions. Nurses play a vital role in addressing this issue through education, communication, emotional support, and trust-building with parents. Their use of empathetic and clear communication strategies significantly contributes to improving parental understanding and vaccine acceptance. Nurse-led interventions are effective in reducing hesitancy by addressing both knowledge gaps and emotional concerns. However, their effectiveness is limited by challenges such as workload, resistance, communication barriers, and mistrust. Strengthening institutional and professional support is essential to maximize the impact of nurses in vaccine advocacy.

Recommendations

Nurses are encouraged to continuously improve their communication skills and participate in training focused on vaccine education and patient interaction. Healthcare institutions should provide adequate staffing, training, and educational materials. Policy makers should strengthen immunization policies and address misinformation, especially on digital platforms, to improve public trust in vaccines. Future researchers are advised to explore parental perspectives further to gain a deeper understanding of vaccine hesitancy factors. Community and public health programs should enhance collaboration with healthcare workers and local leaders to promote vaccine awareness and address cultural influences.

Acknowledgments

First and foremost, I give thanks to Almighty Allah for His strength, wisdom, and guidance throughout this journey and for sustaining me in times of doubt and difficulty. My deepest appreciation goes to my family, my husband Aljashim A. Yunus, and my four children, who have been my constant inspiration, strength, and motivation. To all respondents and everyone who supported this work in any way, I extend my heartfelt thanks and prayers, Jazakallah hu khairan.

AI Declarations Statement

I hereby declare that Artificial Intelligence (AI) tools were used only to assist in language editing, grammar checking, formatting, and improving the clarity of this manuscript. All research concepts, data collection, data analysis, interpretations, conclusions, and final decisions remained the sole responsibility of the researcher.

REFERENCES

- Biasio, L. R., Bonaccorsi, G., Lorini, C., & Pecorelli, S. (2020). Assessing COVID-19 vaccine literacy: A preliminary online survey. *Human Vaccines & Immunotherapeutics*, 17(5), 1304–1312. <https://doi.org/10.1080/21645515.2020.1829315>
- Edwards, K. M., & Hackell, J. M. (2020). Countering vaccine hesitancy. *Pediatrics*, 138(3), e20162146. <https://doi.org/10.1542/peds.2016-2146>
- Edwards, K. M., Hackell, J. M., & Committee on Infectious Diseases. (2021). Countering vaccine hesitancy. *Pediatrics*, 138(3), e20162146. <https://doi.org/10.1542/peds.2016-2146>
- Hekel, B. E., Dugger, J., Pullis, B. R., Cron, S., & Edwards, A. (2024). Vaccine hesitancy: Developing competency in nursing students through simulation. *Nurse Educator*, 49(2), E62–E67. <https://doi.org/10.1097/NNE.0000000000001505>
- Honcoop, A., Roberts, J. R., Davis, B., Pope, C., Dawley, E., & Darden, P. (2023). COVID-19 vaccine hesitancy among parents: A qualitative study. *Pediatrics*, 152(5), e2023062466. <https://doi.org/10.1542/peds.2023-062466>
- Kirui, J. C., Newberry, D. M., & Harsh, K. (2023). Strategies for working with parents with vaccination hesitancy. *Neonatal Network*, 42(5), 254–263. <https://doi.org/10.1891/NN-2022-0055>
- Li, R., Singh, R., & Mazid, I. (2022). Understanding parental hesitancy toward children's COVID-19 vaccinations: The influence of government, media and interpersonal communication. *Frontiers in Communication*, 7, 1004139. <https://doi.org/10.3389/fcomm.2022.1004139>