

CONVERSATIONS TO CUT THROUGH VACCINE HESITANCY

Patients are more hesitant than ever to get vaccinated, but the risks remain.¹

Use this conversation guide to learn about different perspectives and strategies to elevate your voice, connect with patients, and make sure your patients are getting the vaccine education they need.

Vaccination is a whole health recommendation

Every conversation with your patients is an opportunity to help guide them through their vaccine hesitancy.



Lead with open-ended questions. It's important to gauge a patient's vaccine literacy and feelings toward vaccination to better understand the source of hesitancy.



"Can you tell me why you are hesitant to get vaccinated, or what is your concern? Tell me a little bit about your experience."



Meet misinformation with empathy. Maintaining an environment where patients' questions and concerns are heard will enable you to gain trust and help have productive conversations.



"Can you tell me more about why you think that? Can I share my experience and what the data show?"



You may want to consider leveraging seasonal disease prevalence to emphasize vaccination opportunities.



"The longer you wait, the more time you're going to leave yourself vulnerable to vaccine-preventable diseases [during respiratory illness season]. What questions do you have as you consider vaccination this year?"

RSV=respiratory syncytial virus.

PERSONALIZE THE VACCINE HESITANCY CONVERSATION

Vaccination conversations are not one-size-fits-all

These 3 strategies from a behavioral science perspective can help personalize your discussions and make patients feel as though you're understanding their vaccination concerns more deeply.

Frame the conversation in a way your patients will understand emotionally

Gain framing and **loss framing** can help make the vaccination conversation feel personal to their health.

Gain framing: *If you get vaccinated, this is what you have to gain.*

Loss framing: *If you don't get vaccinated, this is what you have to lose.*

Loss framing may be most impactful for patients who are younger than 65 with comorbid conditions.

Create a more human connection

Approach the conversation by sharing what you personally would do and what you would do for your family. This humanization helps build trust with your patients.

I recommended the RSV and flu vaccines to my parents this season.

My father has diabetes too, and I make sure he understands how respiratory illnesses can impact his health and why vaccination is important.²

Speak to your patients' comorbidities

Because you are close to the patient's health history, personalize the recommendation to focus on their specific comorbidities that may put them at increased risk.

Because you have COPD, RSV can exacerbate your condition.³

Your condition puts you at higher risk of hospitalization with this disease. Let's discuss vaccination options to help protect you.⁴

From a behavioral science perspective, personalization makes the recommendation more salient, addresses patients' concerns, and helps to reduce any fears they may have.⁵

COPD=chronic obstructive pulmonary disease.

References: **1.** Brumbaugh KQ, Gellert F, Mokdad AH. Understanding vaccine hesitancy: insights and improvement strategies drawn from a multi-study review. *Vaccines (Basel)*. 2025;13(10):1003. **2.** Respiratory syncytial virus infection (RSV). RSV vaccine guidance for adults. Centers for Disease Control and Prevention. Reviewed February 24, 2026. Accessed April 30, 2026. <https://www.cdc.gov/rsv/hcp/vaccine-clinical-guidance/adults.html> **3.** Ackerson B, Tseng HF, Sy LS, et al. Severe morbidity and mortality associated with respiratory syncytial virus versus influenza infection in hospitalized older adults. *Clin Infect Dis*. 2019;69(2):197-203. **4.** Branche AR, Saiman L, Walsh EE, et al. Incidence of respiratory syncytial virus infection among hospitalized adults, 2017-2020. *Clin Infect Dis*. 2022;74(6):1004-1011. **5.** Treacy J, Morrato EH, Horne R, et al. Behavioral science: enhancing our approach to the development of effective additional risk minimization strategies. *Drug Saf*. 2024;47(8):733-743.



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