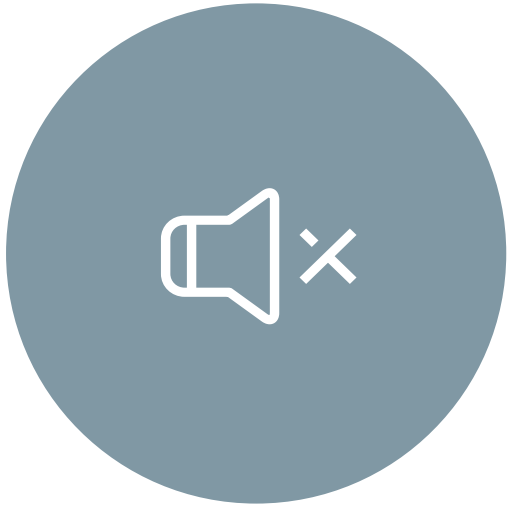
AIRA
AMERICAN IMMUNIZATION REGISTRY ASSOCIATION

Discovery Session:
How to Build Resiliency and Prevent Burnout While Preparing for the Next Pandemic

AIRA Discovery Session
April 24, 2023
4 PM EST

AIRA Discovery Session

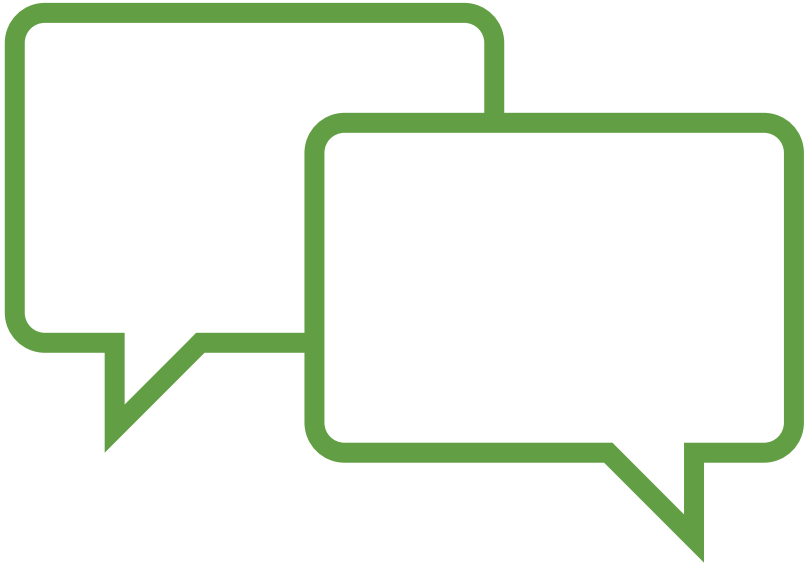
This meeting is being recorded and will be posted in the AIRA repository



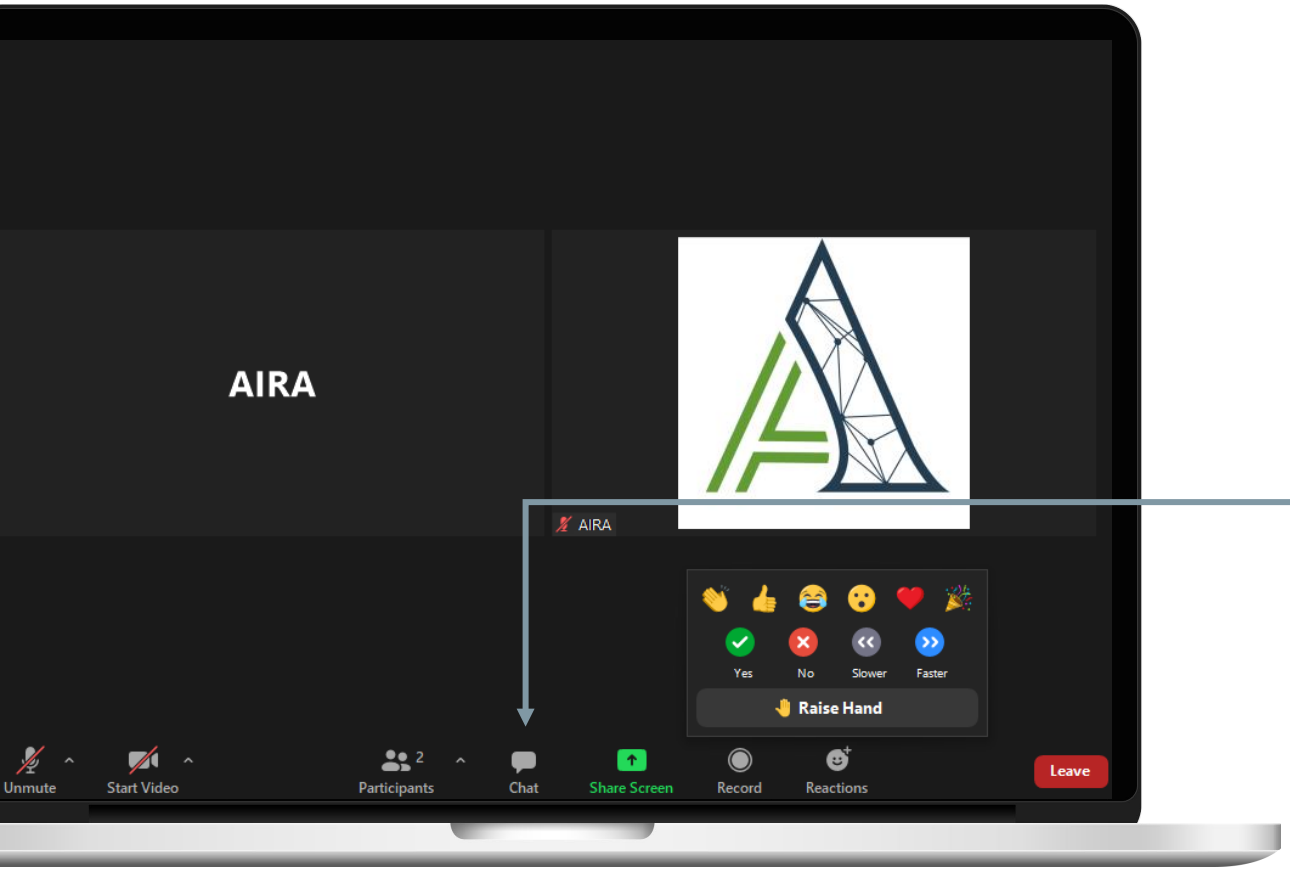
All phone lines are muted

Technical Support

If you experience any technical issues during the meeting, please contact Kim Rutland via direct message in the Chat.



Questions



How do I ask a question?
There will be time allotted for Q&A following the presentations.

If you think of a question during the presentations:

Select the chat icon and type your question into the chat box.

Today's Speaker

- **Anne Schuchat, MD,** former Principal Deputy Director and Acting Director, Centers for Disease Control and Prevention (CDC); former Director, National Center for Immunization and Respiratory Diseases (NCIRD), CDC

Today's Goals 

- To learn about approaches for building resiliency and preventing staff burnout in the IIS community
- To understand the power of story, community, and people coming together to create change
- To practice resilience by engaging in self-care

AIRA DISCOVERY SESSION
APRIL 24, 2023

Anne Schuchat, MD

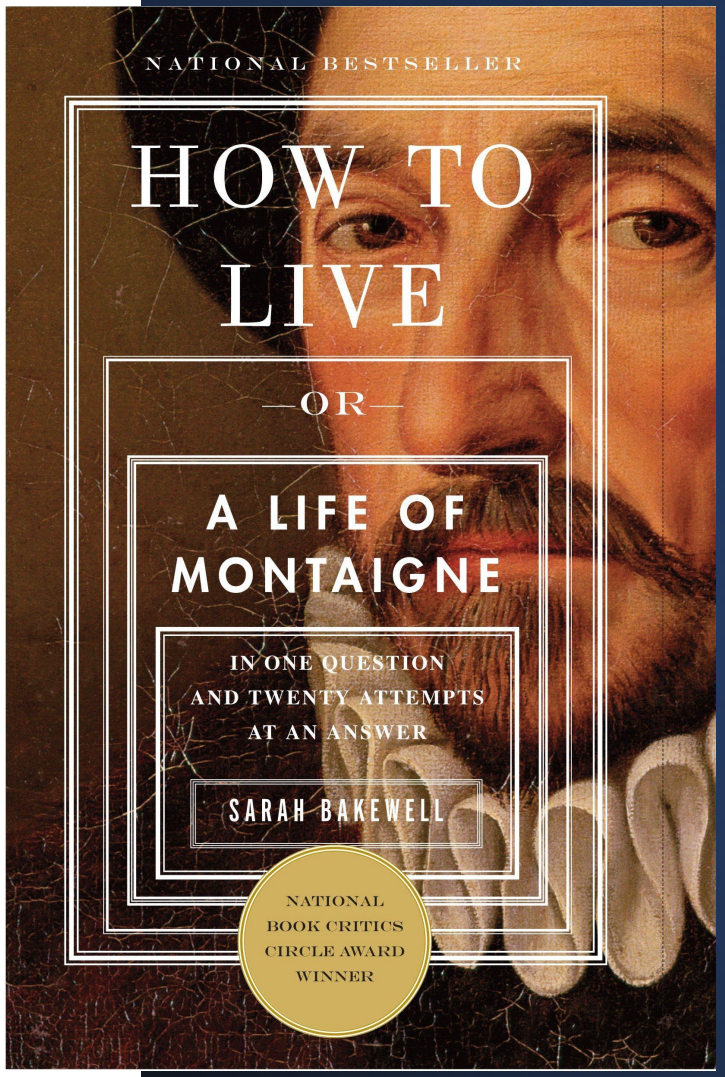
Former Principal Deputy Director

Centers for Disease Control and Prevention

Rear Admiral (Ret.), US Public Health Service

Michele de Montaigne (1533 – 1592)

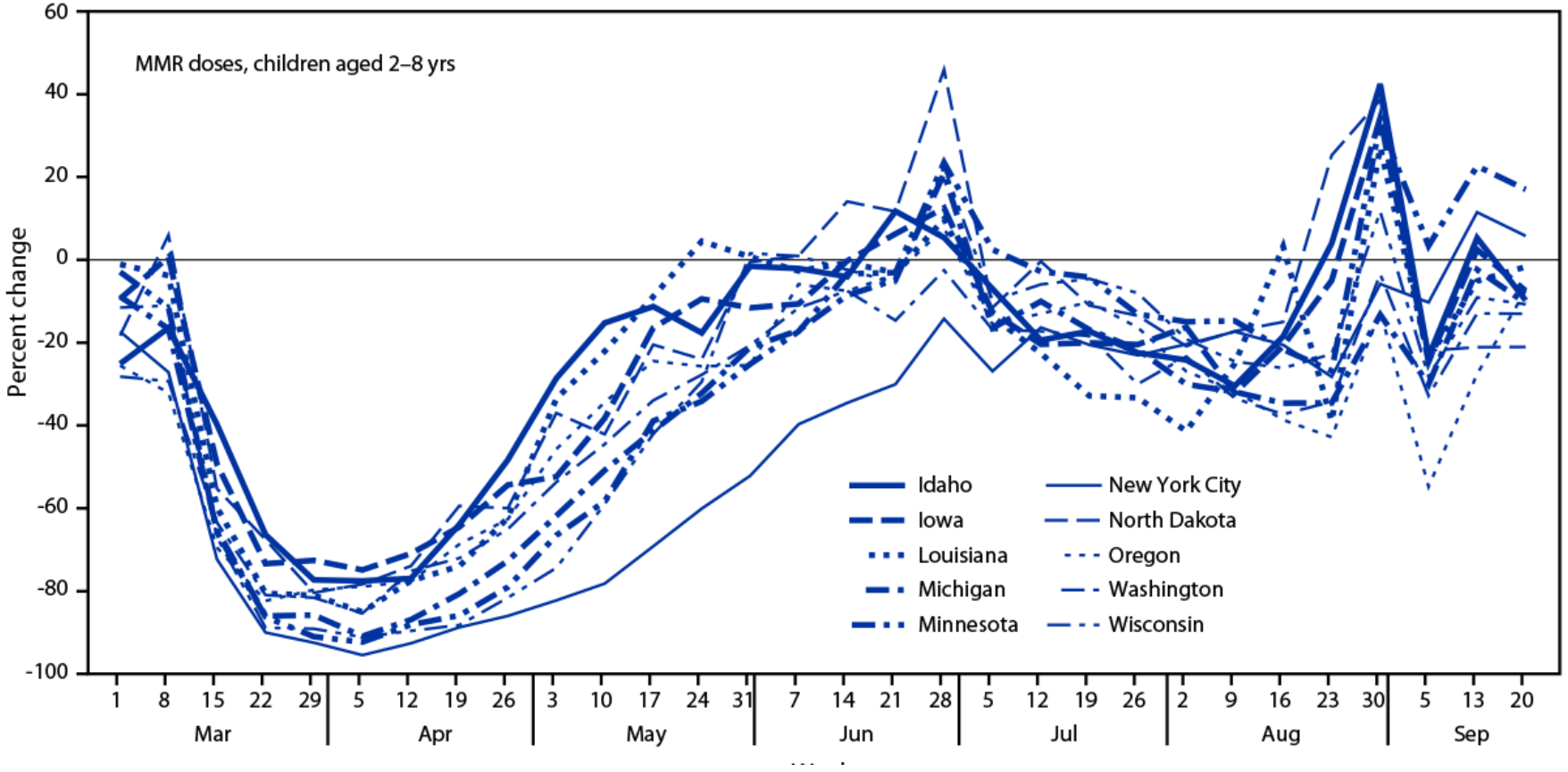
- Lived surrounded by plague, civil and religious war
- Transitioned from public office to private reflection
- Created *“Essaies”*



Humility

Impact of the COVID-19 Pandemic on Administration of Selected Routine Childhood and Adolescent Vaccinations — 10 U.S. Jurisdictions, March–September 2020

Weekly / June 11, 2021 / 70(23);840–845



Risk for COVID-19 Infection, Hospitalization, and Death By Race/Ethnicity

Rate ratios compared to White, Non-Hispanic persons	American Indian or Alaska Native, Non-Hispanic persons	Asian, Non-Hispanic persons	Black or African American, Non-Hispanic persons	Hispanic or Latino persons
Cases[1]	1.7x	0.7x	1.1x	1.3x
Hospitalization[2]	3.7x	1.0x	2.9x	3.1x
Death[3]	2.4x	1.0x	1.9x	2.3x

Race and ethnicity are risk markers for other underlying conditions that affect health, including socioeconomic status, access to health care, and exposure to the virus related to occupation, e.g., among frontline, essential, and critical infrastructure workers.

How to Slow the Spread of COVID-19

Wear a mask

Stay 6 feet apart

Avoid crowds and poorly ventilated spaces

Wash your hands

References on back

cdc.gov/coronavirus

CS319360-A 03/10/2021

Measuring Real World Effectiveness of COVID-19 Vaccines

JAMA | Original Investigation

Association Between Vaccination With BNT162b2 and Incidence of Symptomatic and Asymptomatic SARS-CoV-2 Infections Among Health Care Workers

Published May 6, 2021

Symptomatic: **97% effective**
Asymptomatic: **86% effective**

Centers for Disease Control and Prevention
MMWR

Interim Estimates of Vaccine Effectiveness of BNT162b2 and mRNA-1273 COVID-19 Vaccines in Preventing SARS-CoV-2 Infection Among Health Care Personnel, First Responders, and Other Essential and Frontline Workers — Eight U.S. Locations, December 2020–March 2021

Published April 2, 2021

90% effective

Centers for Disease Control and Prevention
MMWR

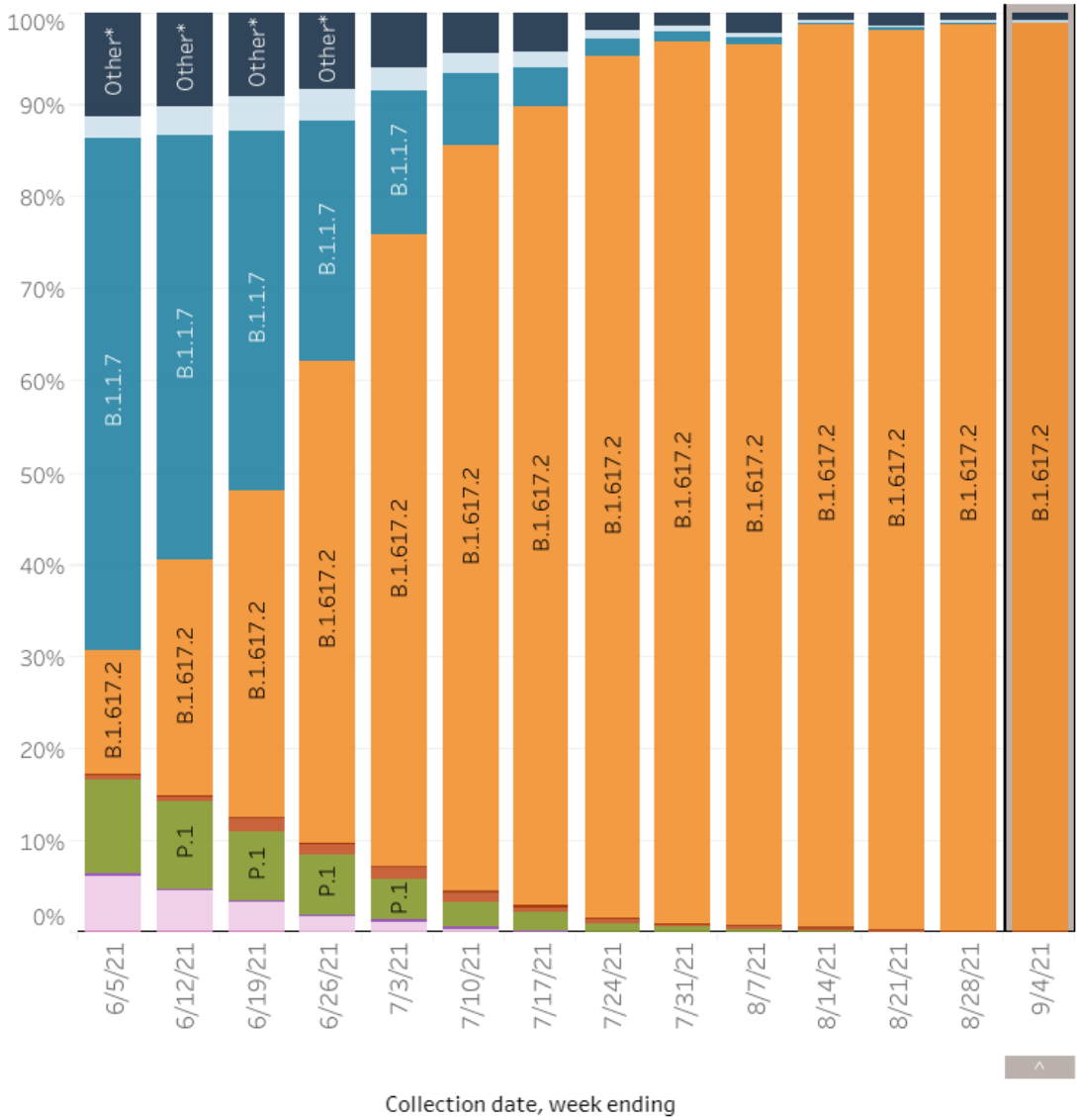
Effectiveness of Pfizer-BioNTech and Moderna Vaccines Against COVID-19 Among Hospitalized Adults Aged ≥65 Years — United States, January–March 2021

Published April 28, 2021

94% effective

SARS-CoV-2 Variants Circulating in the United States
5/30/2021 – 9/4/2021

** **



USA

WHO label	Lineage #	Type	%Total	95%PI
Alpha	B.1.1.7	VOC	0.1%	0.0-0.2%
Beta	B.1.351	VOC	0.0%	0.0-0.2%
Gamma	P.1	VOC	0.0%	0.0-0.2%
Delta	B.1.617.2	VOC	98.9%	97.8-99.8%
	AY.2	VOC	0.1%	0.0-0.5%
	AY.1	VOC	0.1%	0.0-0.5%
Eta	B.1.525	VOI	0.0%	0.0-0.2%
Iota	B.1.526	VOI	0.0%	0.0-0.2%
Kappa	B.1.617.1	VOI	0.0%	0.0-0.2%
Mu	B.1.621		0.1%	0.0-0.5%
N/A	B.1.617.3	VOI	0.0%	0.0-0.2%
Other	Other*		0.7%	0.0-1.7%

* Enumerated lineages are VOI/VOC or are circulating >1% in at least one HHS region during at least one two week period; remaining lineages are aggregated as "Other".

** These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates

Sublineages of P.1 and B.1.351 are aggregated with the parent lineage and included in parent lineage's proportion. Q.1-Q.8 are aggregated with B.1.1.7. AY.3-AY.25 are aggregated with B.1.617.2.

Immunization information systems are essential to life as we know it

- Clinical decision support
- Reminder-recall options
- Population-level coverage levels
  - Areas in need of services, outreach
  - Provider and practice feedback (AFIX)
  - Disparities (population or by vaccines)
  - Temporal trends

Communicating about immunization isn't simple

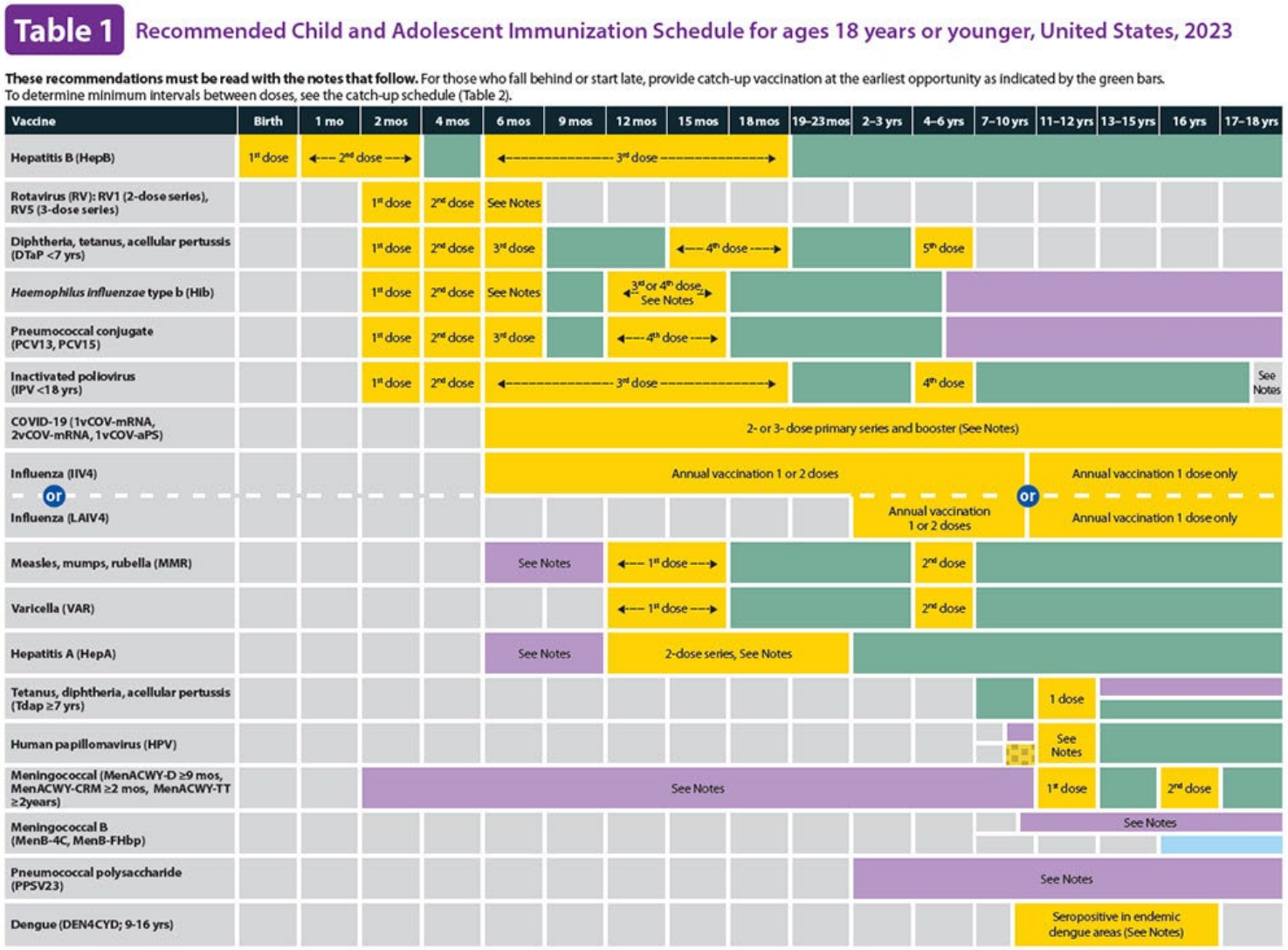


Table 1 Recommended Child and Adolescent Immunization Schedule for ages 18 years or younger, United States, 2023

These recommendations must be read with the notes that follow. For those who fall behind or start late, provide catch-up vaccination at the earliest opportunity as indicated by the green bars.
To determine minimum intervals between doses, see the catch-up schedule (Table 2).

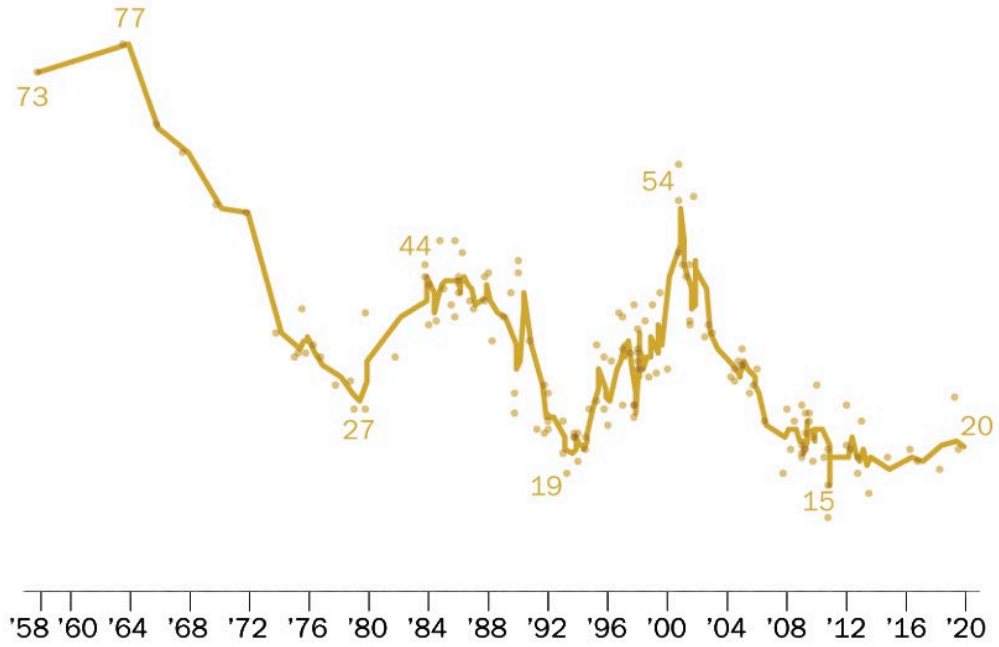
Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	9 mos	12 mos	15 mos	18 mos	19–23 mos	2–3 yrs	4–6 yrs	7–10 yrs	11–12 yrs	13–15 yrs	16 yrs	17–18 yrs
Hepatitis B (HepB)	1st dose	←— 2nd dose —→			←———— 3rd dose ————→												
Rotavirus (RV): RV1 (2-dose series), RV5 (3-dose series)			1st dose	2nd dose	See Notes												
Diphtheria, tetanus, acellular pertussis (DTaP <7 yrs)			1st dose	2nd dose	3rd dose			←— 4th dose —→				5th dose					
Haemophilus influenzae type b (Hib)			1st dose	2nd dose	See Notes		←— 3rd or 4th dose, See Notes —→										
Pneumococcal conjugate (PCV13, PCV15)			1st dose	2nd dose	3rd dose		←— 4th dose —→										
Inactivated poliovirus (IPV <18 yrs)			1st dose	2nd dose	←———— 3rd dose ————→							4th dose					See Notes
COVID-19 (1vCOV-mRNA, 2vCOV-mRNA, 1vCOV-aPS)					2- or 3- dose primary series and booster (See Notes)												
Influenza (IIV4)					Annual vaccination 1 or 2 doses									Annual vaccination 1 dose only			
or													or				
Influenza (LAIV4)											Annual vaccination 1 or 2 doses			Annual vaccination 1 dose only			
Measles, mumps, rubella (MMR)					See Notes		←— 1st dose —→					2nd dose					
Varicella (VAR)							←— 1st dose —→					2nd dose					
Hepatitis A (HepA)					See Notes		2-dose series, See Notes										
Tetanus, diphtheria, acellular pertussis (Tdap ≥7 yrs)														1 dose			
Human papillomavirus (HPV)														See Notes			
Meningococcal (MenACWY-D ≥9 mos, MenACWY-CRM ≥2 mos, MenACWY-TT ≥2years)			See Notes											1st dose		2nd dose	
Meningococcal B (MenB-4C, MenB-FHbp)														See Notes			
Pneumococcal polysaccharide (PPSV23)											See Notes						
Dengue (DEN4CYD; 9-16 yrs)														Seropositive in endemic dengue areas (See Notes)			

Crisis and Emergency Risk Communication

- Be first
- Be right
- Be credible
- Express empathy
- Promote action
- Show respect

Public trust in the federal government has been low for more than a decade

% who say they trust the federal government to do what is right just about always/most of the time



Note: From 1976-2020 the trend line represents a three-survey moving average.
Source: Survey of U.S. adults conducted July 27-Aug. 2, 2020.
Trend sources: Pew Research Center's American Trends Panel (2020), Pew Research Center phone surveys (2019 and earlier), National Election Studies, Gallup, ABC/Washington Post, CBS/New York Times, and CNN polls. See appendix for details.

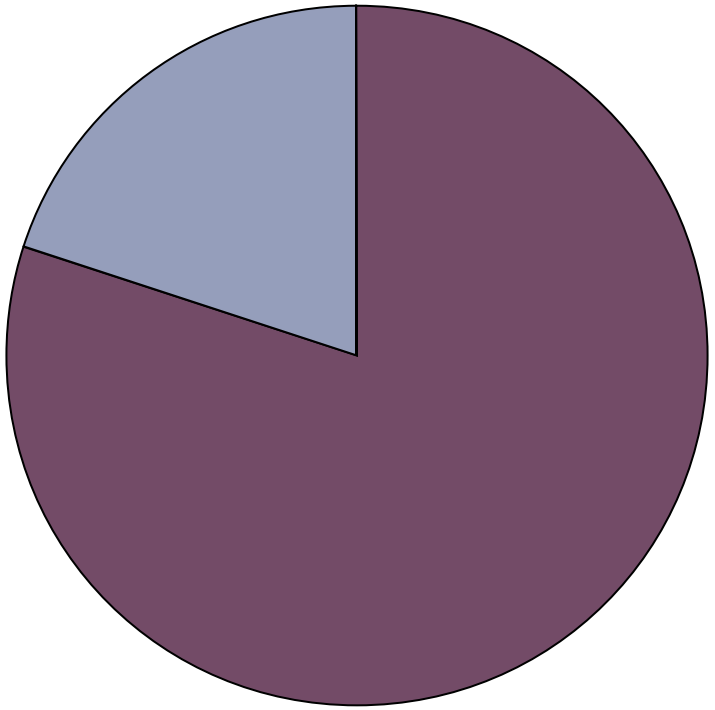
PEW RESEARCH CENTER

https://www.pewresearch.org/politics/2020/09/14/americans-views-of-government-low-trust-but-some-positive-performance-ratings/

WHAT DETERMINES CREDIBILITY? LOW CONCERN SETTINGS

All other factors

15-20%

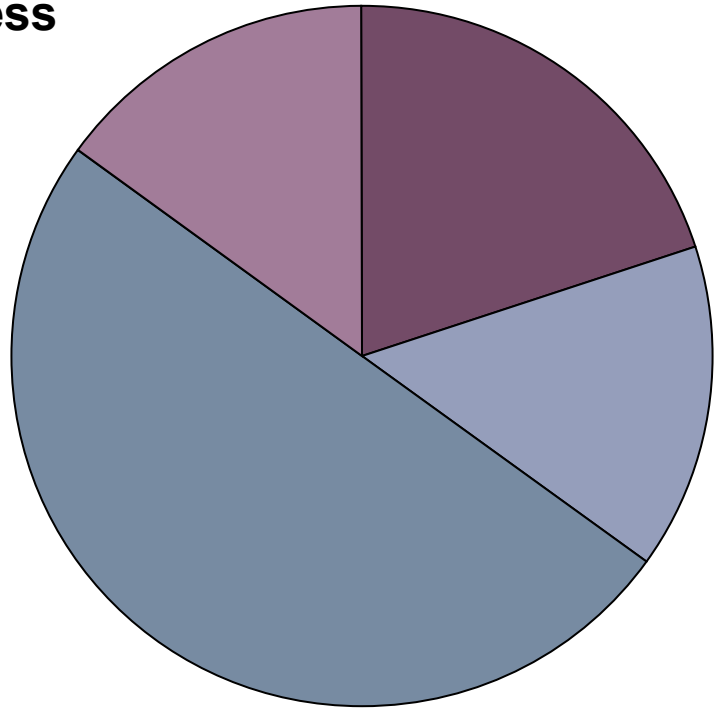


Competence/ Expertise

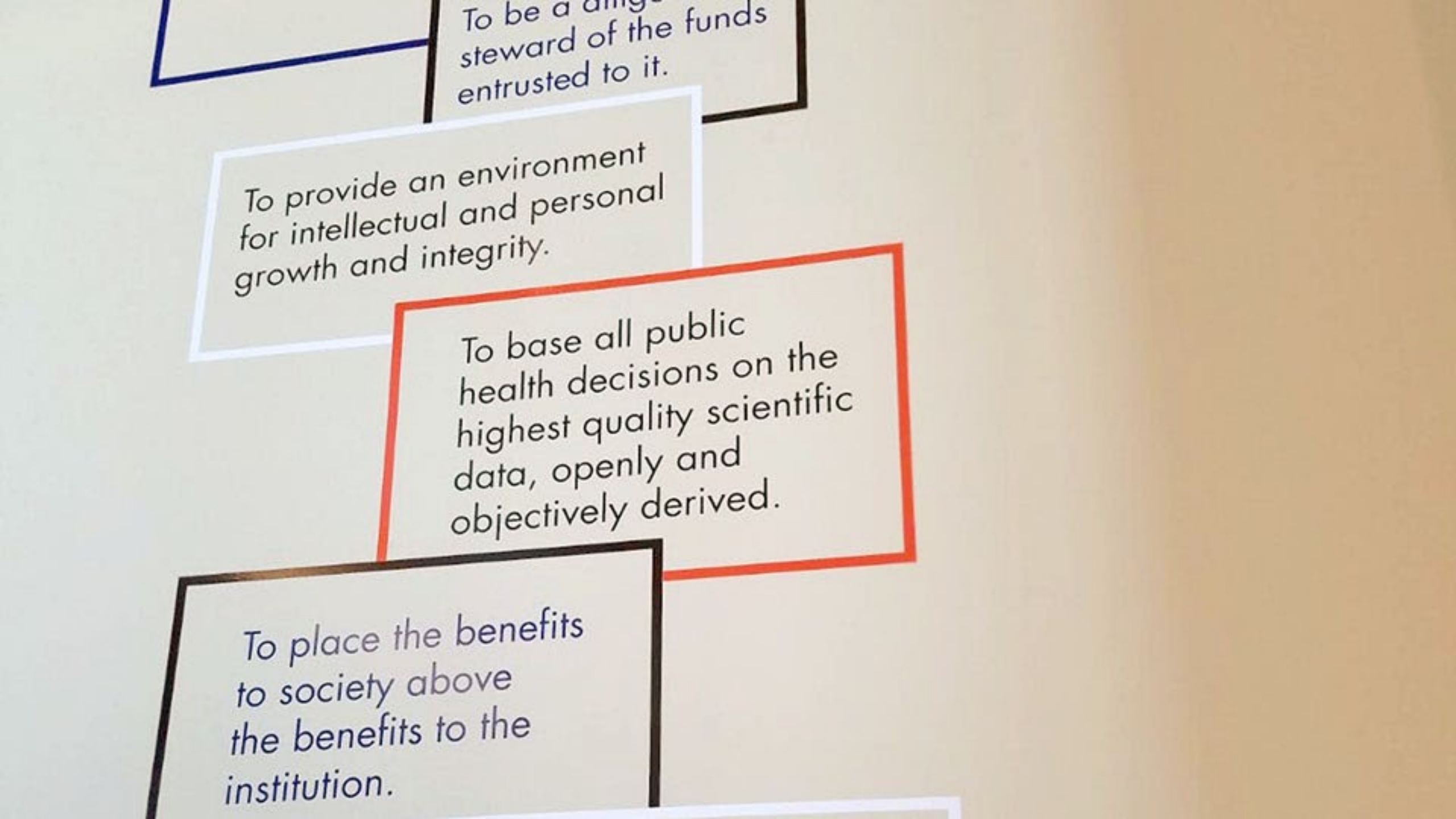
80-85%

Randall Hyer, National Information Conference, 2005

WHAT DETERMINES CREDIBILITY? HIGH CONCERN SETTINGS



Randall Hyer, NIC, 2005


To be a diligent steward of the funds entrusted to it.
To provide an environment for intellectual and personal growth and integrity.
To base all public health decisions on the highest quality scientific data, openly and objectively derived.
To place the benefits to society above the benefits to the institution.

https://nyti.ms/33Rpc2H

Blair Braverman “What my sled dogs taught me about planning for the unknown”

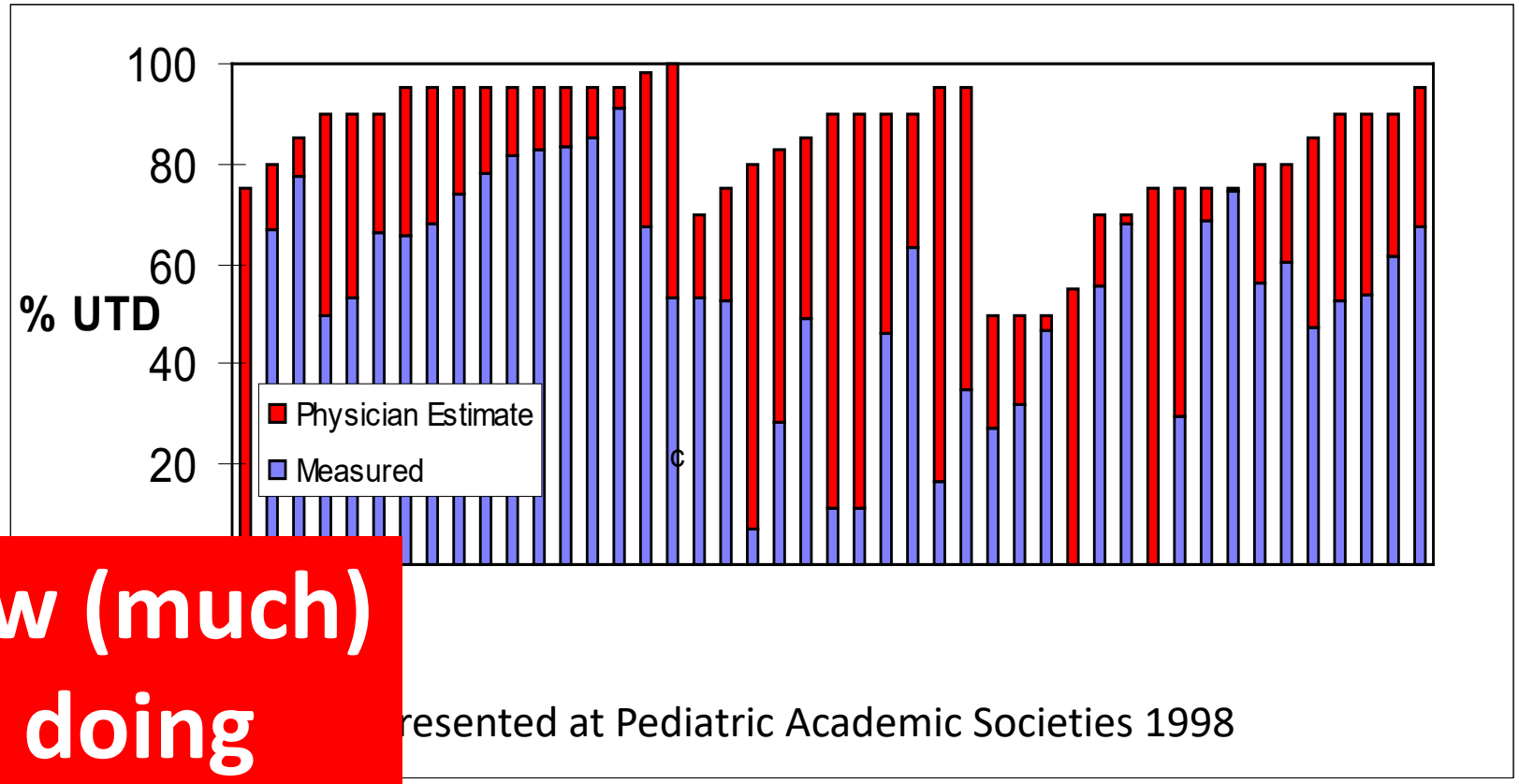
The Three Signs of Miserable Job

A fable for managers (and other employees)
by *Patrick Lencioni (Penguin Random House)*

- Immeasurability
- Irrelevance
- Anonymity

With thanks to RADM Michael Iademarco

Physician-Estimated vs Measured Immunization Performance of 45 Practices



Know how (much) you're doing

Vaccines for Children

20 years of protecting America's children

The Vaccines for Children program w
established in 1994 to make vaccines
to uninsured children. VFC has helped
disease and save lives...big time!

CDC estimates that vaccination of children
born between 1994 and 2013 will:

prevent **322 million** illnesses → more than the current population of the entire U.S.A.

help avoid **732,000** deaths → greater than the population of Boston, MA.

save nearly **$1.4 trillion** in total societal costs
(that includes $295 billion in direct costs) → or $4,473 for each A

MMWR: Benefits from Immunization During the Vaccines for Children Program Era — United States, 1994–2013

Know why your job matters

20 Years of Success
VFC
Vaccine for Children Program

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

www.cdc.gov/features/

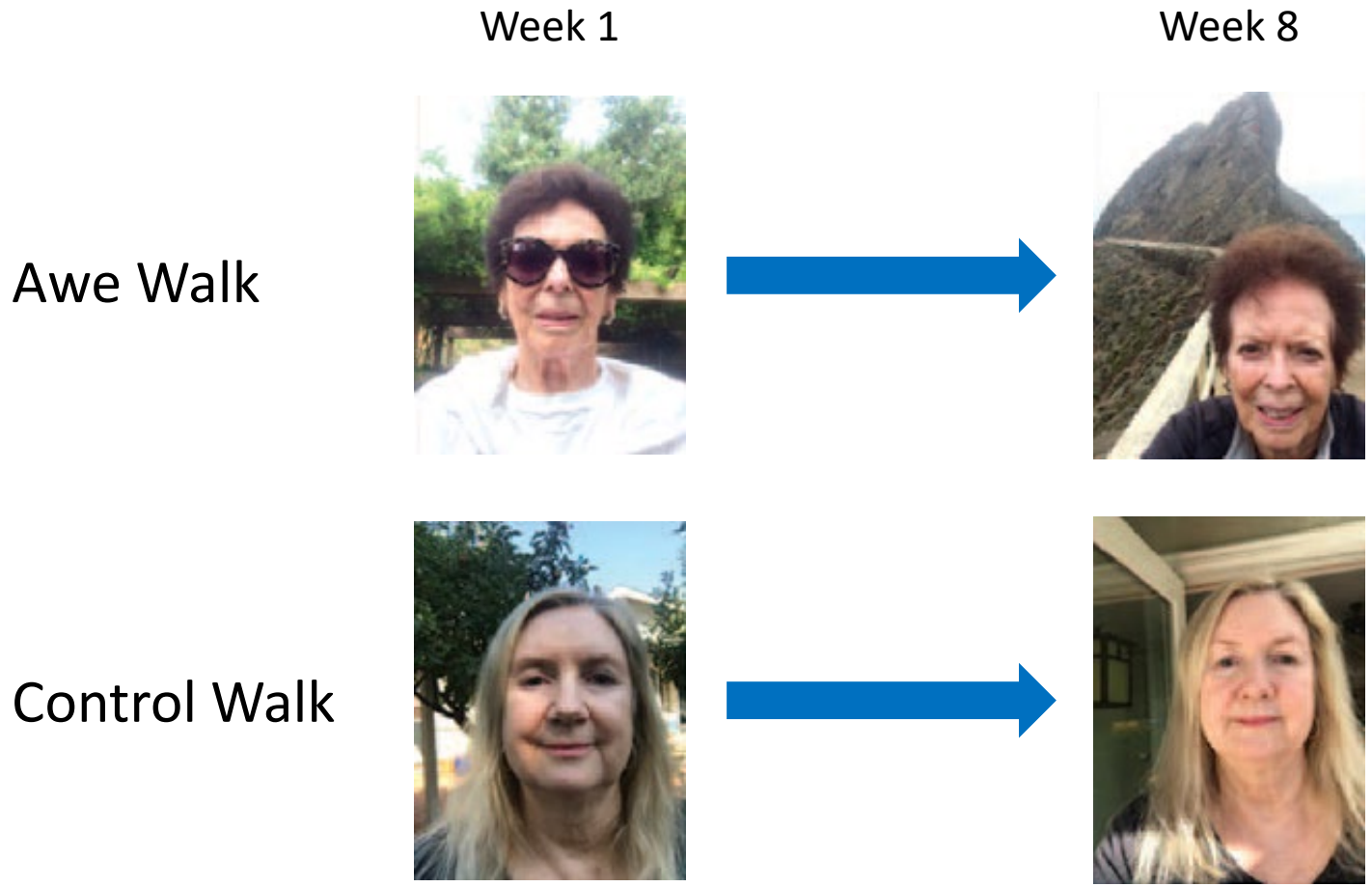

Know your people

Steve and Sybil Wolin's Model of Resiliencies

https://projectresilience.com/devdefs.htm

Big Smile, Small Self:

Awe Walks Promote Prosocial Positive Emotions in Older Adults



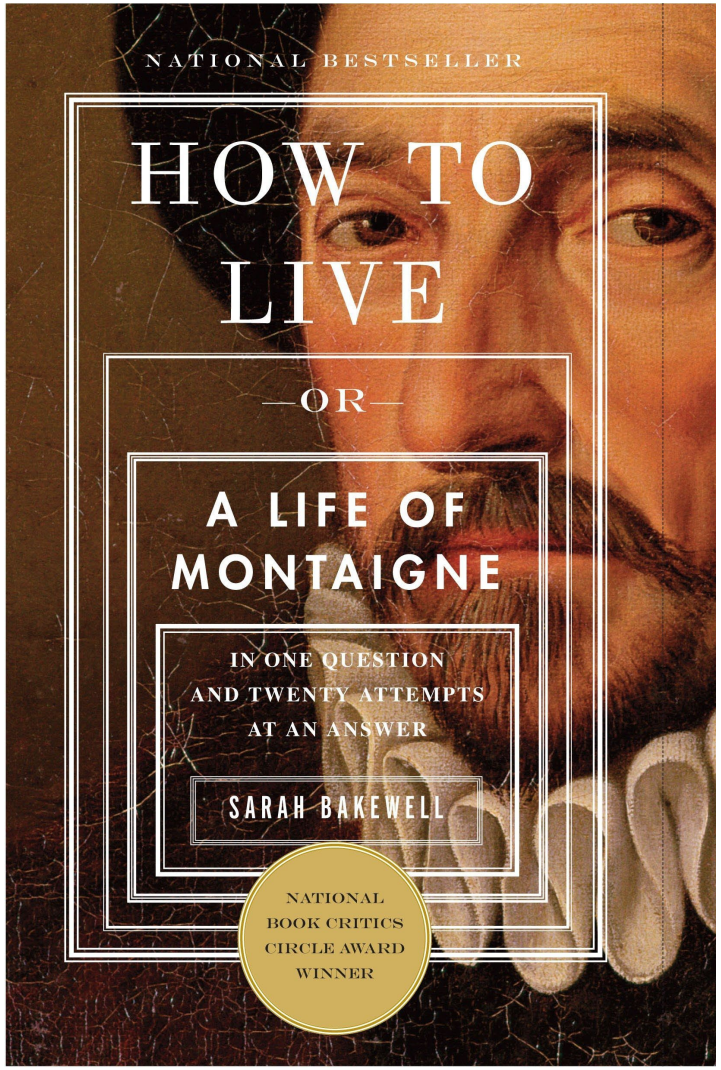
Sturm, V.E. et al. *Emotion*, Advance Online Publication Sept. 21, 2020.
http://dx.doi.org/10.1037/emo0000876

Concluding Thoughts on Public Health

- Learn from mistakes
- Exploit evolving tools
- Focus on next generation (technology and people)
- Good science and effective communication
- Support our teams

Beyond Montaigne

- We cannot retreat from the world
- We can go beyond skepticism and hopelessness
- We can seek deeper truths and catalyze actions
- We can nurture future leaders and support our colleagues



Question & Answer

How do I ask a question?

Select the unmute icon and ask your question verbally.

Select the chat icon and type your question into the chat box.

Select the reactions icon, select “Raise Hand,” and you will be called on.

Watch for Discovery Session announcements and registration links in the AIRA Weekly Update!

Thank you to our presenters, and thanks to all of you for joining us!

Please complete a brief evaluation survey.

The next Discovery Session
will be on May 22, 2023