## 2024 Area of Interest for Vaccination Confidence

## **Vaccination Confidence Areas of Interest**

Effective April 2024, Merck Investigator Studies Program Review Committee (MISP-RC) for Vaccination Confidence will accept protocol submissions within our current Areas of Interest (AoIs) up to 2024/7/16. This is a competitive process that will be conducted by the Vaccination Confidence MISP Review Committee. Decisions will be made on the basis of scientific merit and strategic fit within the AoIs. Please review the critical activities and abide by the timelines as outlined below. The program requests that investigators specify how they will support diversity in enrollment to include traditionally underrepresented minorities/ethnic groups.

## Focus Area 1: Resilient Immunization Programs

- a. Research on the role of community-based vaccination programs outside of the U.S. that are delivered in settings other than the physician's office.
- b. Research on the impact of vaccination on overall public health indicators (e.g., other morbidity and/or hospitalization) and economic well-being (e.g., Healthy Places Index and/or Social Vulnerability Index).
- c. Research on immunization program attributes (e.g., people, location, processes, trust in government & health system, etc.) that support uptake and or coverage for recommended vaccinations across the lifespan. For example, other attributes could include readiness to introduce future vaccines and/or prepare for new outbreaks, pandemics, etc.
- d. Research on how building confidence in vaccination and/or resilience of immunization programs is embedded into government health and other government policies and where these efforts are delivering impact.

Focus Area 2: Effective Interventions in Building Confidence in Vaccination and in Improving Vaccination Equity

- a. The impact of efforts to create a "culture of vaccination" within a given practice setting and/or community and/or research on where weak points within a setting (e.g., front desk staff, lack of support for vaccination from community leaders) may undermine other efforts to instill confidence in vaccination.
- b. Technology (e.g., Generative Al and/or social media) as a source or solution for vaccine disinformation.
- c. Research on how to use consistent measurement techniques to measure, track, and report trends in vaccination confidence and equity nationally and/or globally.

Focus area 3: Using principles of implementation science to understand how, why, and among whom interventions can successfully increase vaccination confidence, equity, and/or administration

- a. Study underlying factors that drive the ability of evidence-based interventions to increase confidence in vaccination and/or improve vaccine administration. Studies should focus on elucidating the mechanisms that are important to understand why interventions do or do not have their desired effect. Such mechanisms could include emotional triggers, changes in attitudes, etc.
- b. Development of novel measurement tools or implementation models that improve the understanding of the modifiable contextual factors affecting vaccination confidence (e.g., clinic operations, community settings, pharmacy, provider or patient misinformation or knowledge gaps, suboptimal communication strategies, patient satisfaction, and user feedback, etc.)