

Boosting Vaccination Rates

Making Healthier Communities

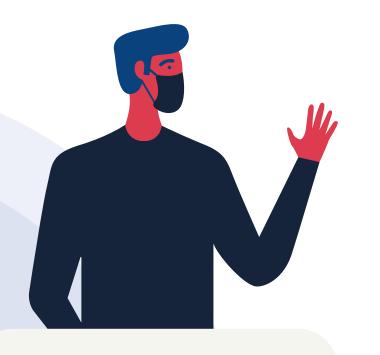




We Will Propose...

- 1.) Consistency in physician promotion
- 2.) Emphasis on risk of illness and effectiveness of vaccines
- 3.) Targeting specific demographics





Agenda



Business Problem

Data & Methods

Results

Recommendations

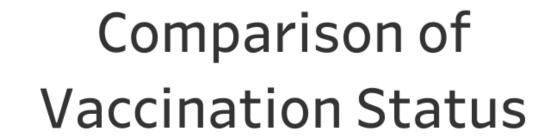


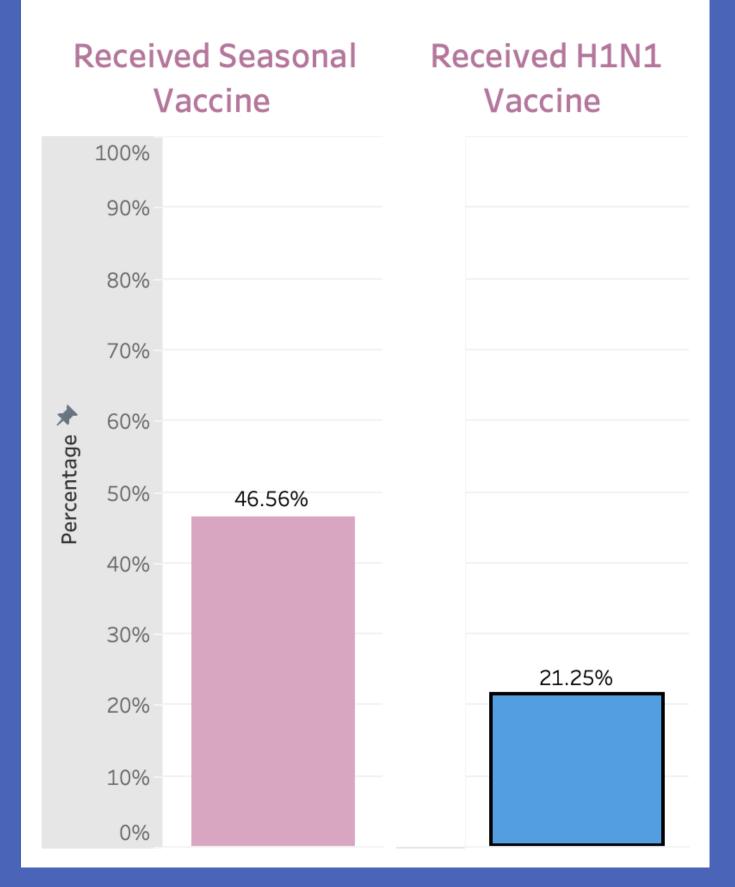
Business Problem

How to increase vaccine acceptance in preparation for future pandemics?

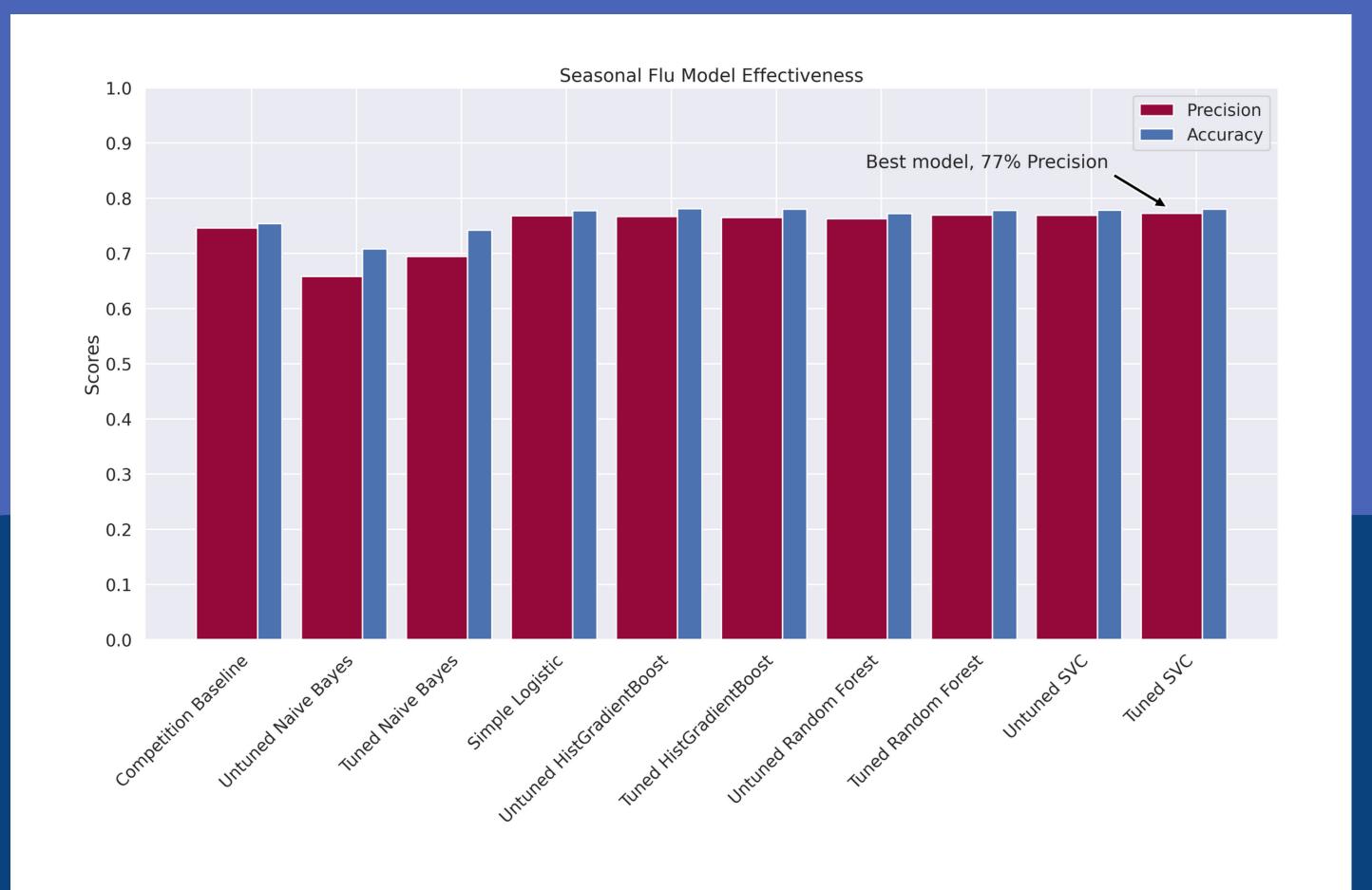
Dataset

- Interviews conducted from September 2009
 June 2010
- 26,707 respondents
- Broad range of demographics



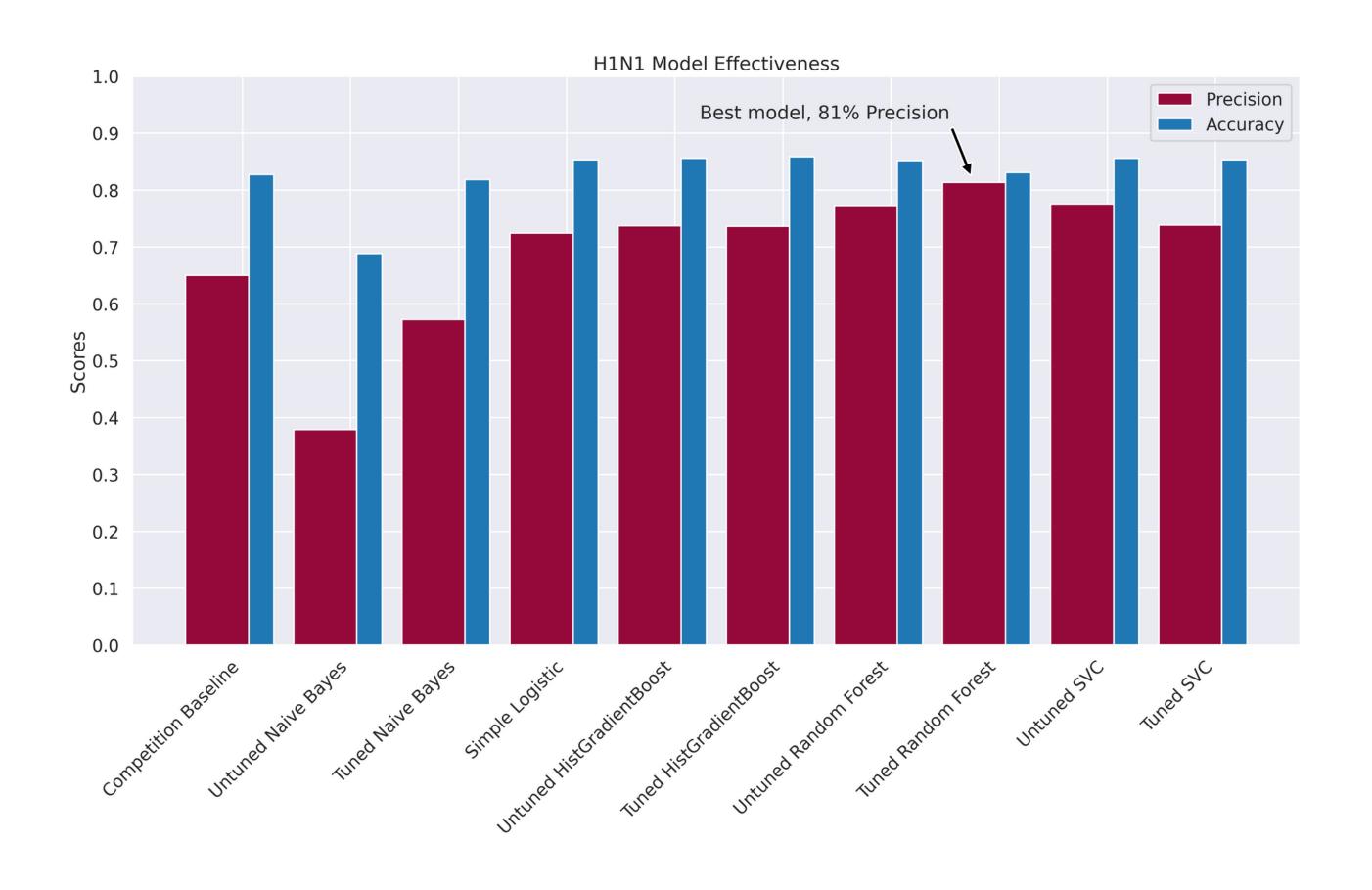






Seasonal Flu Modeling

Precision Metric:
how often are we
predicting that
people will get
vaccinated who
really aren't?

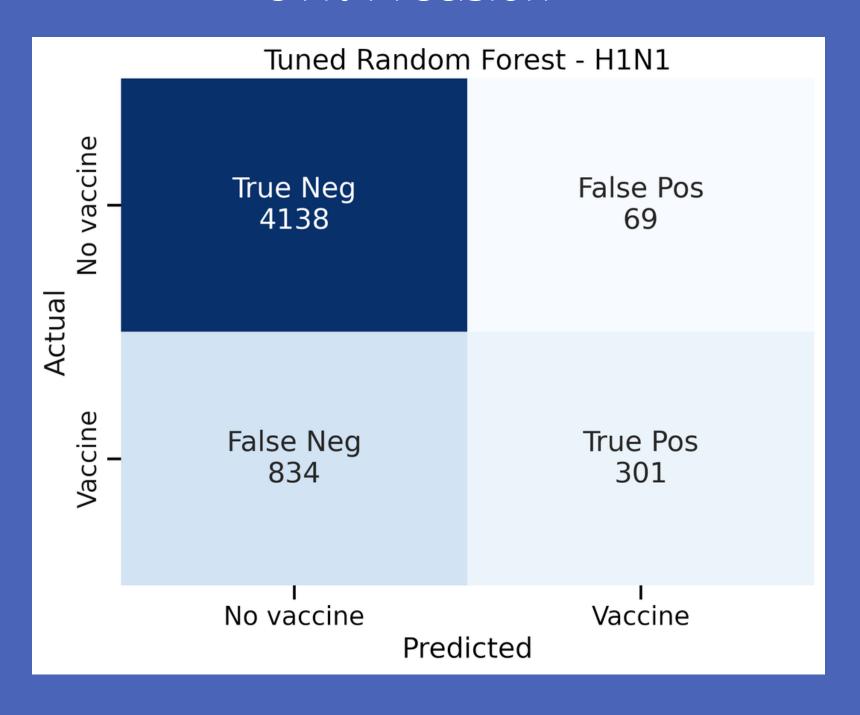


H1N1 Modeling

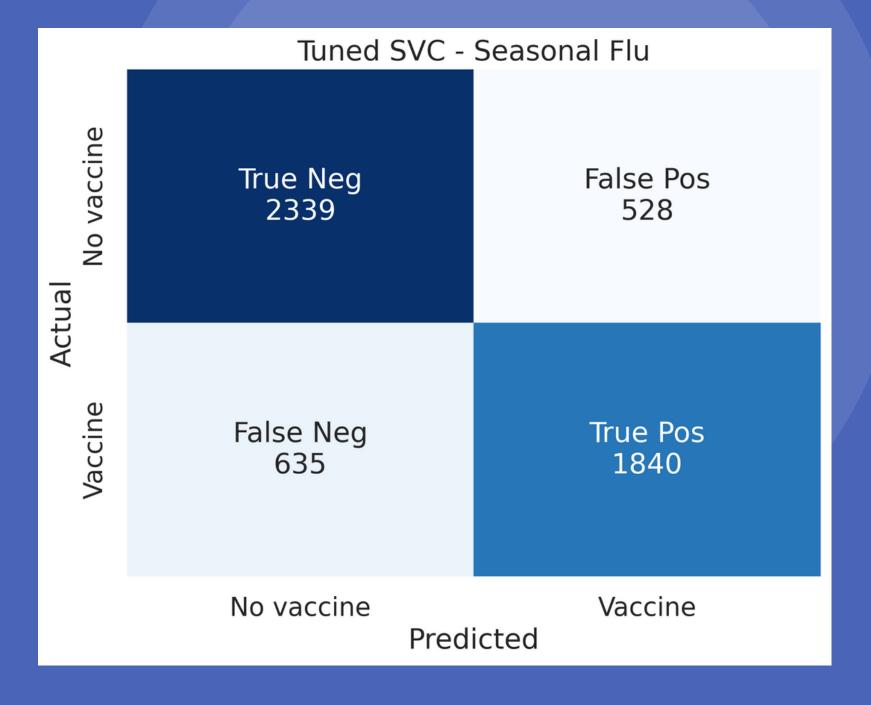


Best Models

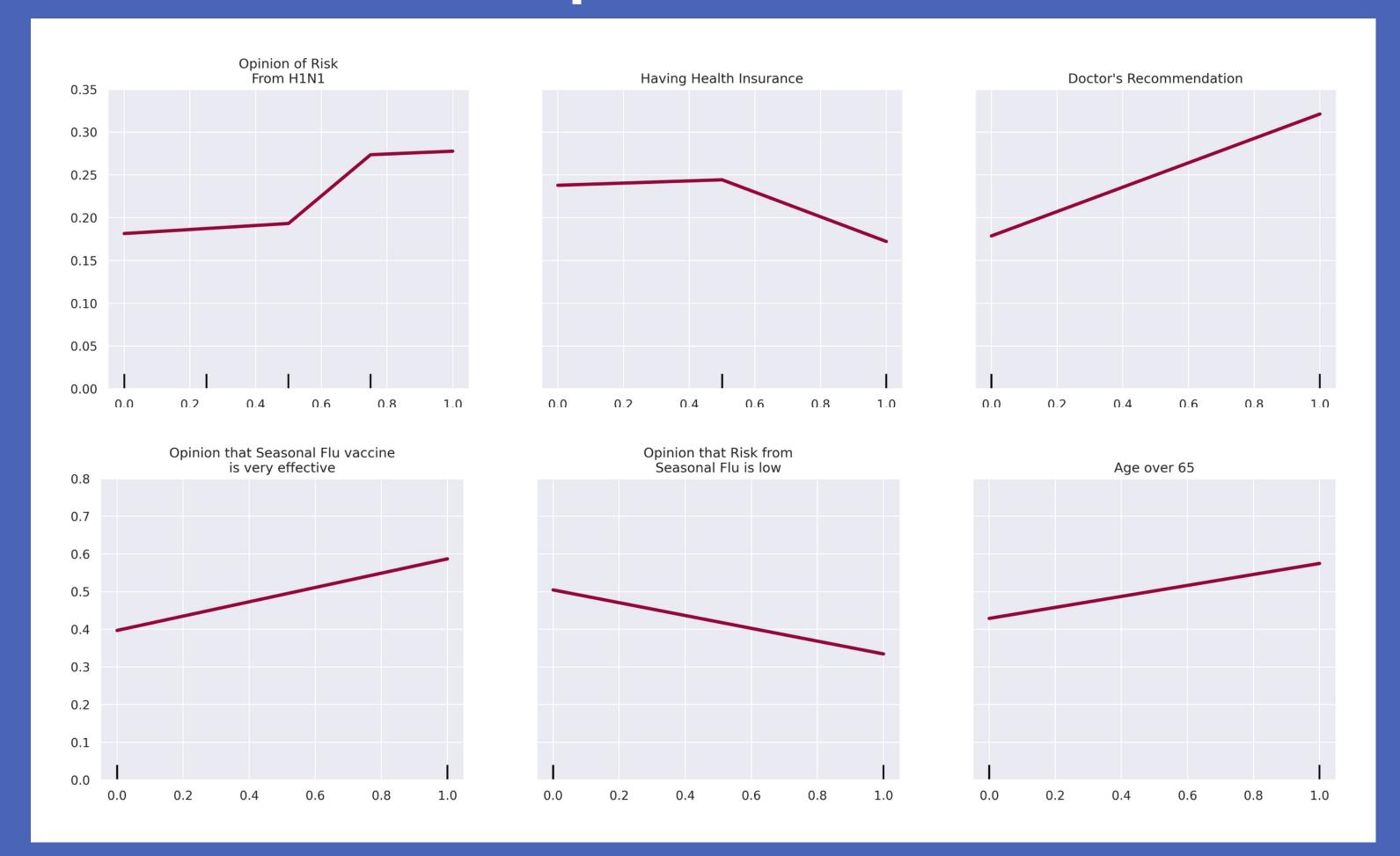
81% Precision



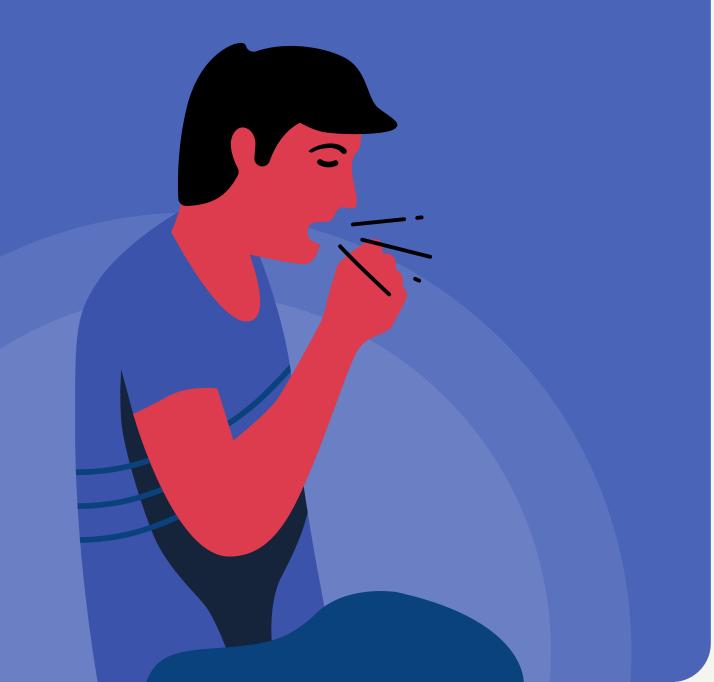
78% Precision



Most important features



Demographics Matter



Largest relative drop between seasonal and H1N1 vaccines:

- Unmarried individuals
- Black people
- People 65+
- Middle class (above poverty and below S75k)

Those most unlikely to get the seasonal flu vaccine:

- 18-34 year olds
- Hispanic people
- Those living in poverty



- 1.) Emphasize to medical professionals to consistently recommend vaccinations for their patients
- 2.) Public awareness campaign about the risk of getting sick without a vaccine as well as the effectiveness of vaccines
- 3.) Target outreach efforts to those groups who are most likely to get seasonal but not H1N1 (unmarried people, black people, those 65 and older, and middle class). More broadly, also target those groups unlikely to get seasonal vaccines (18-34 year olds, Hispanic people, those living in poverty).



Questions or comments?

Get in touch!

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