

Claire Hannan, MPH, on role of immunization managers during pandemic

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In today's COVID-19 Update, a discussion with Claire Hannan, MPH, executive director of the Association of Immunization Managers (AIM), about what physicians need to know about immunization efforts and how the pandemic may influence those efforts long term.

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Speaker

■ Claire Hannan, MPH, executive director, Association of Immunization Managers

Transcript

Unger: Hello, this is the American Medical Association's COVID-19 Update. Today we're talking with Claire Hannan, executive director of the Association of Immunization Managers in Rockville, Maryland, about what physicians need to know about the immunization efforts and how the pandemic may influence those efforts long-term. I'm Todd Unger, AMA's chief experience officer in Chicago. Claire, thanks so much for joining us. How are you doing out there?

Hannan: I'm good. We're hanging in. It's been a particularly chaotic week but I appreciate you having me on, and obviously the partnership with physicians, just incredibly invaluable.



Unger: Well, I can't imagine what you and the rest of your team are going through this week given what we're seeing with the Delta variant. We'll get more into that in a little bit. I thought we could start just by making sure that folks out there understood, when we talk about immunization managers, what does that mean?

Hannan: Yeah. So immunization managers, the ones that are members of AIM, are at the state level in the state public health agency, some large cities but they're managing the immunization program and they're responsible for the vaccines for children program. They're responsible for sort of implementing strategies like school requirements, looking into outbreaks, really immunization across the board, and, of course, with the COVID campaign, planning and implementing that.

Unger: How many immunization managers are out there?

Hannan: Well, there are 64 in our membership, the 50 states, eight territories. Included in that are six Pacific islands and then six large cities. These 64 get directly funded from Congress through the Centers for Disease Control and Prevention to manage the immunization and vaccine programs in the country.

Unger: So one of the things about public health is when it's working, it's often kind of invisible because you're not seeing outbreaks of things like polio, for instance. And part of the job of the immunization managers is to manage these kinds of programs, for instance, to make sure that every child is getting polio vaccines, for instance. So how do you do that?

Hannan: Yeah. I mean, you wouldn't believe the amount that's going on behind the scenes, right? Just enrolling private providers, making sure that data transfers, making sure that every dose is accounted for, managing the inventory that gets sent out to providers, doing the actual orders. Every order goes through the state immunization program right now for COVID.

There's so much going on and normally it is invisible, right? You don't see them but wow, has politics played a part in this. I mean, governors, the president, everyone getting involved in the success of this campaign has really pushed the public health workforce into the eye of the public.

Unger: Well, let's talk a little bit more about what's on right now. Obviously with at least 190 million people getting one dose of the COVID vaccine, a lot of people have a lot of success there but there's still a lot of people, as we know, that haven't gotten a vaccine yet. How are our states and jurisdictions approaching this challenge, and particularly now that we're seeing a surge in cases, especially among the unvaccinated, due to the Delta variant?

Hannan: Yeah. And I told you this earlier, I mean, I think honestly this has been the toughest week, just because we worked so hard, tirelessly for more than a year in this pandemic and we really thought we'd be at herd immunity by now. We really thought we would push this vaccine out, people



would get vaccinated, we'd reduce the virus circulation. And we're hitting that point where we're realizing the virus is back on the upswing. We've got a variant that is protected by the vaccine but it's much more easily transmitted. And we have this unvaccinated population that's at risk and plus we have children that can't get the vaccine yet who are at risk.

So it's a particularly tough time, really trying everything we can to get vaccine into more arms to reduce the threat of this variant spreading into the unvaccinated population.

Unger: Yeah, I saw comments from someone at the CDC today that said that the Delta variant was as transmissible as chickenpox which, as we know, very transmissible. So that's—

Hannan: Yeah. I mean, that's incredible. So you and I might know how contagious chickenpox is, and I'm sure obviously the physician community, but most people don't know because they're vaccinated. So it's just one of those ironies that the vaccine works, and the virus if we don't get it, if we don't stop it circulating, it's going to get more transmissible. It's just natural.

Unger: Well, we've had a lot of discussion over the past week about mandates, different folks weighing in from the president to health associations, including the American Medical Association about health care workers. I want to talk specifically about schools. They're right around the corner, the start of school for the fall. What's the current status of vaccine mandates for schools and what can we expect for back to school this fall?

Hannan: Yeah, there are a whole host of universities requiring the vaccine, so many people going back to college will be required to get it. But public schools, high schools, daycares, those school requirements are state responsibility, so they're state laws. And what we're seeing actually is a trend with states saying that you are not going to be able to require COVID vaccine. So we've seen states pass laws. I think 12 states have passed a law and there's an additional nine executive orders from governors not allowing that requirement to go into place.

So that trend is there. I think with school requirements, you really need to have that time period of acceptance of the vaccine, trust in the vaccine in place and get to the point where you want to get just that last hump of the population, those kids vaccinated. And right now, we're not there because you can't even vaccinate lower than 12 right now. We don't have that vaccine available and it's not fully licensed.

So I think it's really important to ... The school requirements are an incredible tool and an incredible protection to keep our kids safe while at school but we have to make sure we've got things in place before we require the COVID vaccine.

Unger: I talked last week with Dr. [Carol] Rao from the CDC about the toll that this pandemic has taken on public health care workers. There had been a lot of research on health care workers and not so much on the public health care worker, public health workers. And the results of the research



showed pretty substantial impact. How do you see the immunization manager workforce fairing with every other strain of this pandemic over the last year and a half?

Hannan: Yeah. This is a real issue. We've seen our membership of the 64 immunization program managers, 32 are new since 2019, and that's a large number of new people starting a job in a time of crisis. And now we've been really going full on for more than a year—and the exhaustion, the burnout, it's really real. And we've lost some of our institutional knowledge, our experienced program managers, and everyone is just singularly focused on COVID right now and it's taking a toll.

We're doing everything we can, really providing support and mental health resources and really just a community. And I think that's what they benefit from most, is having a community where they can talk and share and they know they're not alone going through this public health crisis and emergency.

Unger: And obviously it's not over yet and it continues to be an enormous issue out there. As you kind of think about the year and a half that you have under your belt right now, kind of project out in the future, what do you see as the potential set of implications for longer term?

Hannan: Yeah, I mean, one of the biggest challenges really was rolling this out and planning this with uncertainty. So not knowing exactly how many doses of vaccine you are going to get, not knowing everything about the vaccine. And now we're kind of hitting that time of uncertainty again for the fall. We don't know when exactly the vaccine will be authorized down to children. We don't know exactly what the picture is going to look like for a booster recommendation or a potential third recommendation. We don't know about transition to easier packaging of the vaccine. I mean, we're still working with large-scale vaccine packaging and large number of doses in a vial that has to be used within a small amount of time.

So we have a lot of uncertainty and that can be challenging but we have also have learned a lot and built a lot of strong relationships and have key people in place and stakeholders in place to help.

So we've learned a lot, but it's still, it's just a tremendous challenge not exactly knowing how to plan for everything in the fall. We also don't know, obviously we can't plan for the virus' behavior, and that contributes as well. We just don't know exactly what to expect even after we've been at this for quite a bit of time.

Unger: Claire, what additional resources, help, support, could you and your fellow immunization managers use from physicians, from the rest of us out there? How can we support you?

Hannan: Yeah, well, one of the biggest things that is working with trying to move that bar and getting more people vaccinated is the recommendation of a physician. And so I think physicians can do everything they can to be speaking to their community and talking about the value of the vaccine and showing themselves getting vaccinated.



We're getting more vaccine to private providers. So we need private providers to enroll. Hopefully we'll get better arrangements with packaging so that even small providers can order the vaccine and get it. Especially once we start vaccinating children, we're going to need all of those providers, family physicians, pediatricians, others. So it's all about the trust and the recommendation and pushing communication on the vaccine, and also being ready to administer it.

Unger: Well, just in closing, when you think about where we were a year ago when we started to think about the vaccine, what it was going to take to get hundreds of millions of people vaccinated, it really requires like an army when you think about it. And I guess we really can't lose track of just how far we come, even though there's a lot left. And so I just want to give you and the immunization managers an enormous shout out and thank you for all the work that you're doing amid what is just an incredible amount of uncertainty out there. We appreciate it.

Hannan: Yeah. Thank you so much. That's actually the best part. The best part of my day is going on that CDC COVID tracker and seeing the millions of people who are protected. And I think that it's just a tremendous accomplishment to be where we are and we can't forget that.

Unger: I agree. Claire, thanks so much for joining us. That's it for today's COVID-19 Update. We'll be back with another segment shortly. In the meantime, for resources on COVID-19, visit amaassn.org/covid-19. Thanks for joining us. Please take care.

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