Addressing vaccine hesitancy is one of the key areas that countries need to focus on in their efforts to increase vaccination uptake, writes Andrea Ammon.

Vaccines and immunisation programmes have protected whole populations against life-threatening diseases and major epidemics since their introduction in the beginning of the 1900s. Despite this success, national vaccination programmes in Europe are facing numerous challenges.

Sizeable populations across the EU (clustered or scattered) are either not vaccinated or under-vaccinated, and we are seeing continued outbreaks of diseases such as measles and rubella that are targeted for elimination.
From 1 January 2016 to 15 September 2017, more than 17,000 measles cases were reported in EU/EEA, with 43 deaths attributed to measles.

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Recently, Commission President Jean-Claude Juncker, expressed his concern about poor vaccination coverage in his annual State of the Union address in the European Parliament, saying that, “it is unacceptable that in 2017 there are still children dying of diseases that should long have been eradicated in Europe.”

Vaccination coverage is driven by several factors such as access to and availability of the vaccine, kind of offering, costs for the recipient, and appropriate information and communication activities.

Therefore, the strategies to address this should be multi-disciplinary. The underlying reasons for low coverage can vary widely from country to country, so any assessment of options for intervention must be based on evidence of the specific challenges faced in a given context.

Countries need to sustain high vaccine coverage at subnational and national level through measures such as guaranteeing equal access to vaccination across communities and age groups, improving the performance of national immunisation programmes and ensuring sustainable monitoring of the impact, effectiveness and safety of vaccines.

Nevertheless, one of the major factors that is impacting on vaccination uptake in Europe is public trust in immunisation, and this has become an increasingly global health issue.

As infectious disease rates have decreased and the widespread use of vaccines has grown, so have anxieties around vaccine safety and their efficacy. This is impacting not only on individual health and wellbeing, but also affecting community immunity and achievement of public health goals.

Concerns about vaccination currently place Europe as the region with the least amount of confidence in vaccine safety and most countries in Europe are dealing with pockets of people who are reluctant or refuse recommended vaccinations. In addition, rumours and misinformation can spread at high speed and affect uptake of routine vaccines and introduction of new vaccines.

As trust in science, media and governments is increasingly questioned and we enter into a new ‘post-factual’ era, immunisation programmes face a new set of challenges that require new targeted intervention strategies.

Vaccine hesitancy, according to the WHO, refers to the “delay in acceptance or refusal of vaccines despite availability of vaccine services. Vaccine hesitancy is complex and context specific, varying across time, place and vaccines. It is influenced by factors such as complacency, convenience and
With regard to vaccine hesitancy, the European Centre for Disease Control and Prevention (ECDC)’s focus is to provide information about determinants of hesitancy, common barriers and concerns, so that public health authorities can understand and respond appropriately with timely, targeted and evidence-based strategies.

Our centre also supports countries in providing information to and strengthening the role of healthcare workers. Healthcare workers are the most trusted source of information for parents and need to be empowered so that they become effective advocates of vaccination and are equipped to communicate effectively and address the public’s concerns.

To this end, ECDC guides and toolkits have been developed for healthcare professionals, immunisation managers and public health experts to support their efforts in addressing vaccine hesitancy. ECDC has also actively collaborated with several countries in the adaptation of the centre’s communication guides and toolkits to local cultural characteristics and information needs.

In addition, this year ECDC published a catalogue of interventions to address vaccine hesitancy which presents examples of interventions, developed in various countries in the world, and that can serve as examples of possible approaches to deal with hesitancy.

In an ECDC organised workshop at the European Health Forum Gastein on 5 October 2017, the issue of vaccine hesitancy and the challenges this poses for immunisation programmes will be further explored, with the aim to understand why parents and healthcare professionals are increasingly hesitant to vaccinate, and discussing whether there might be a link to this possible ‘post-factual era’ that we are experiencing.

The aim of the workshop is to build understanding of the complex and multi-faceted nature of vaccine hesitancy and shed light on the ‘known’ and ‘unknown’.

We will also be sharing some specific experience in tackling vaccine hesitancy in the countries and discuss possible solutions and priority actions both at the national and EU level - actions that require an inter-sectorial approach and good political leadership.

Addressing vaccine hesitancy is one of the key areas that countries need to focus on in their efforts to increase vaccination uptake.

Regardless of whether vaccination is mandatory or recommended, it is thought that a national healthcare system should promote and actively offer the vaccines included in the national vaccination programme - vaccines that have been proven safe and effective to use and with a positive public health impact.

In order to achieve the intended public health objectives, we also need to take into account the local context, culture and habits.

In addition, digital systems for recording vaccinations could enable the individual to keep up to date with his or her vaccination status. It is also a means for health authorities to identify populations that have not been fully vaccinated and to develop more targeted interventions.

Finally, health threats cannot be tackled by one organisation or one country alone but require concerted action at the European and global level. During these challenging times, ECDC remains committed to the fight against vaccine-preventable diseases and will continue to provide scientific evidence and support.
About the author

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