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Strategies to Increase Child and Adolescent Vaccination Confidence. Comparison of the Pre-Pandemic and Pandemic Period (31st March 2022)

Speaker: **Emilie Karafillakis (WHO Researcher)**

Emilie Karafillakis is the European research lead at the Vaccine Confidence Project at the London School of Hygiene & Tropical Medicine (LSHTM). As a social scientist, her work focuses on understanding individual and group beliefs, attitudes, and confidence in health interventions; likewise, her research addresses how these concepts can influence public health policies.

Tools to Measure and Develop Vaccine Confidence – Create Data for Action

Despite the historic success of immunisation in reducing the burden of childhood illness and death, episodes of public concerns and rumours around vaccines have occurred around the world, spreading quickly and sometimes seriously eroding public confidence in immunisation and ultimately leading to vaccine refusals and disease outbreaks. Vaccine confidence is often context- and population-specific, with varying concerns observed from one country, region, or community to another and differences observed among individual from different socio-economic groups. Furthermore, while some public concerns are similar for all vaccines, such as fears around possible vaccine side effects or doubts about the effectiveness of vaccination, others are more vaccine specific.

The Vaccine Confidence Project was set up more than 10 years ago to monitor public confidence in immunisation programs by listening for early signals of public distrust and questioning and providing risk analysis and guidance to engage the public early and pre-empting potential programme disruptions. This initiative led to the development of various tools and methods to measure confidence in vaccination, including a Vaccine Confidence Index™ (VCI) used to continuously map and monitor confidence in vaccination across more than 140 countries.

Vaccination Confidence Volatility increased by Politicization and Misinformation

The COVID-19 pandemic has shed light on the challenges posed by vaccine confidence, with countries around the world facing regular questioning and opposition to the newly developed vaccines. Confidence in vaccination has become more volatile; with attitudes changing rapidly as more information - or misinformation - becomes available. The current pandemic has led to an increase in concerns about the speed of production of COVID-19 vaccines, the different types of vaccines, or the role of authorities in mandating vaccines. In fact, discussions about vaccine mandates or other types of restrictions imposed by governments on unvaccinated individuals for the benefits of the community have led to a polarisation of vaccine attitudes, which has contributed to a spread of more extreme views and beliefs. These polarised views are often associated with feelings of belonging to certain groups, such as those sharing similar ideologies, values or political beliefs.

Strategies to Build and Sustain Confidence in Vaccines and Immunization

Understanding the factors that affect parents' decisions to vaccinate their children against COVID-19 is essential to develop targeted and successful strategies to restore confidence in vaccination. No single intervention will successfully restore or maintain confidence in vaccination. As vaccine confidence is influenced by a myriad of factors at various levels, from individual beliefs and behaviours to social or political contexts, interventions need to address all these elements to be successful. Certain interventions have been shown to be more successful than others, including those relying on strong two-way communication and engagement strategies. Examples of such interventions include stronger communication from healthcare professionals, for example through motivational interviewing techniques, or on a programmatic level, the use of school-based programs such as for HPV vaccination.

Strategies to increase child and adolescent vaccination confidence: *Comparison of the pre-pandemic and pandemic periods*

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EUSUHM webinar
31/03/2022

**Tools to Measure Vaccine
Confidence:**
Create Data for Action



The Cow-Pock — or — the Wonderful Effects of the New Inoculation! — vide. the Publications of the Anti-Vaccine Society.



Surely if the vaccine is not mandatory, a vaccine passport is not logical or ethical at all ??



Rechercher sur Facebook

st young, pregnant and those

Covid Vaccine Negative Reaction Reports

- Age 34, female, 32 weeks pregnant, Pfizer vaccine 12/18/20, MISCARRIAGE 12/19/20, VAERS ID# 906529
- Age 35, female, 28 weeks pregnant, Pfizer vaccine 12/23/20, MISCARRIAGE 12/25/20, VAERS ID# 918034
- Age 37, female, 26 weeks pregnant, Moderna vaccine 12/27/20, MISCARRIAGE 12/28/20, VAERS ID# 916065
- Age 32, female, 22 weeks pregnant, Pfizer vaccine 1/7/21, MISCARRIAGE 1/8/21, VAERS ID# 930916
- Age 39, female, 18 weeks pregnant, Moderna vaccine 12/22/20, MISCARRIAGE 1/15/21, VAERS ID# 952671
- Age 37, female, 10 weeks pregnant, Pfizer vaccine 1/6/21, MISCARRIAGE 1/8/21, VAERS ID# 932107
- Age 35, female, 6 weeks pregnant, Pfizer vaccine 12/20/20, MISCARRIAGE 1/8/21, VAERS ID# 928892
- Age 31, female, 5 weeks pregnant, Pfizer vaccine 12/19/20, MISCARRIAGE 12/19/20, VAERS ID# 953086
- Age 34, female, 5 weeks pregnant, Pfizer vaccine 12/17/20, MISCARRIAGE 12/31/20, VAERS ID# 922289
- Age 34, female, 4 weeks pregnant, Pfizer vaccine 12/22/20, MISCARRIAGE 12/22/20, VAERS ID# 925639

Allie French

22 février, 22:27 · 🌐

Verify through VAERS for yourself if you need to but please do your research before taking this 🙏.

Regardless of what health care professionals are saying....y...

Afficher la suite

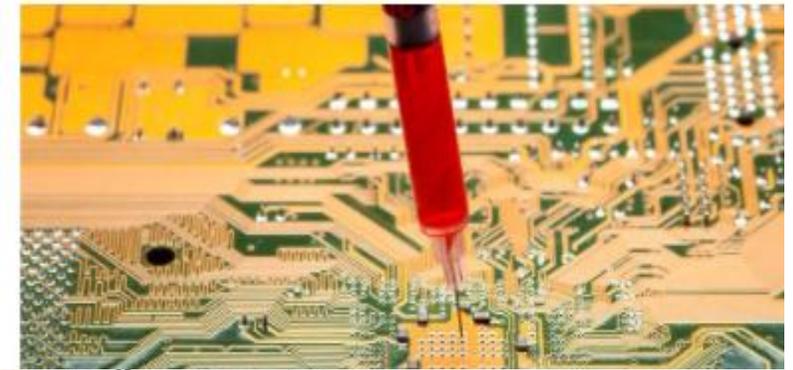
In 2022...

BBC

Vaccine rumours debunked: Microchips, 'altered DNA' and more

By Flora Carmichael and Jack Goodman
BBC Reality Check

2 December 2020



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TANZANIA PROMOTES USE OF TRADITIONAL MEDICINE TO FIGHT COVID-19
REPLY CONCERNED OVER PAUW'S ETHICAL BREACH LABOU SABC NEWS



About Vaccine Confidence Project™

What is the Vaccine Confidence Project™?

Vaccine confidence concerns the belief that vaccination – and by extension the providers and range of private sector and political entities behind it – serves the best health interests of the public and its constituents. The Oxford English Dictionary defines confidence as “the mental attitude of trusting in or relying on a person or thing”. In light of that, we are not examining the well-studied domain of supply and access barriers to vaccination, but rather what is typically called the “demand” side of immunisation. However, our focus on confidence takes the “demand” rubric a step further than the more traditional notion of building demand through increasing knowledge and awareness of vaccines and immunisation to understanding what else drives confidence in vaccines, and the willingness to accept a vaccine, when supply, access and information are available. In other words, understanding vaccine confidence means understanding the more difficult belief-based, emotional, ideological and contextual factors whose influences often live outside an immunisation or even health programme but affect both confidence in and acceptance of vaccines.

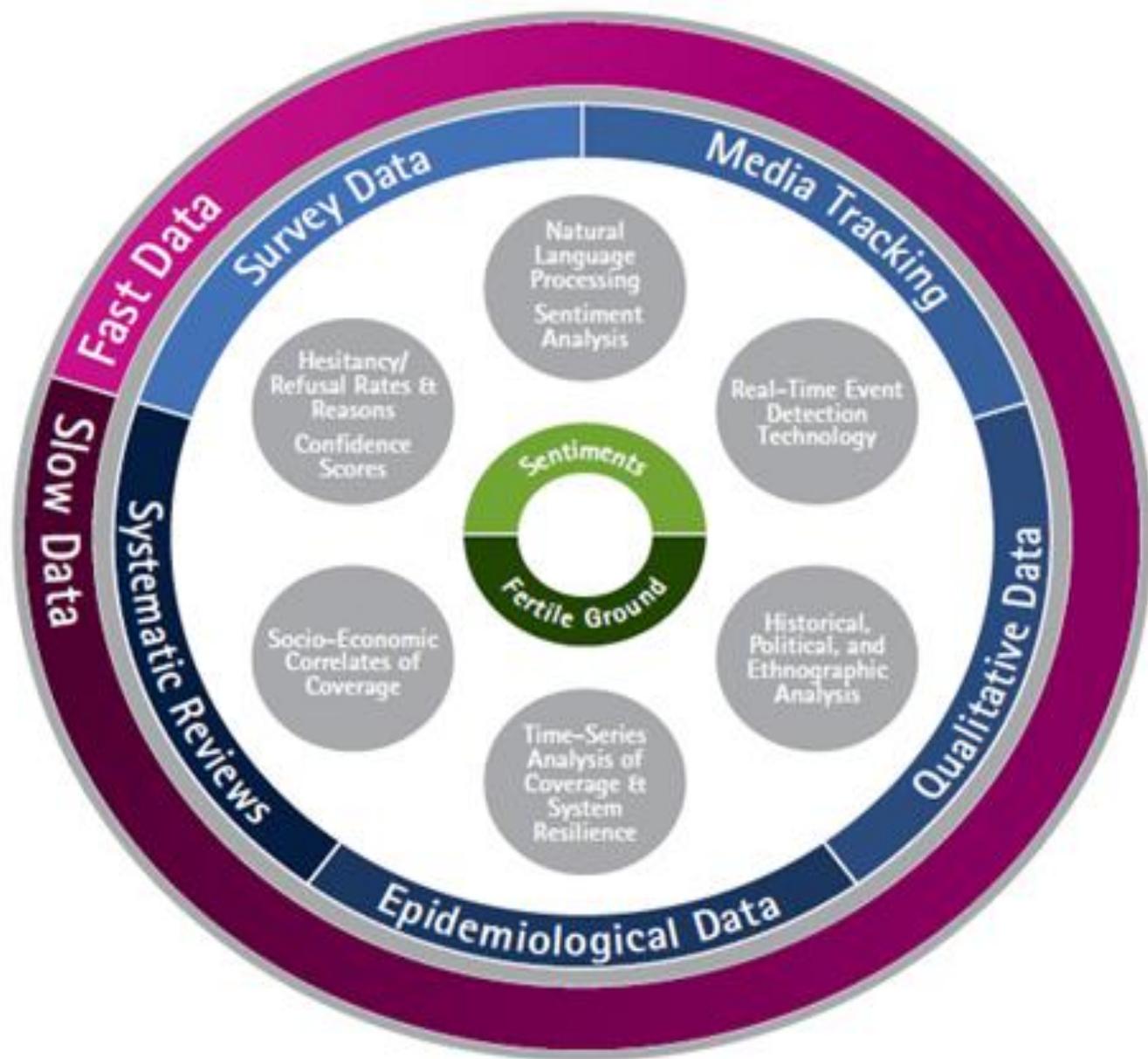
VCP Mission

The purpose of the project is to monitor public confidence in immunisation programmes by building an information surveillance system for early detection of public concerns around vaccines; by applying a diagnostic tool to data collected to determine the risk level of public concerns in terms of their potential to disrupt vaccine programmes; and, finally, to provide analysis and guidance for early response and engagement with the public to ensure sustained confidence in vaccines and immunisation. This initiative also defines a Vaccine Confidence Index™ (VCI) as a tool for mapping confidence globally.

Latest News →



Weekly news and journal update
from the Center for Vaccine
Ethics and Policy
Mar 19, 2022



Listening to
the public:
no single
metric tells
the story

A global survey tool: The Vaccine Confidence Index™



Overall I think vaccines are...

important for children to have.

safe.

effective.

compatible with my religious beliefs

Overall I think the MMR vaccine is...

important for children to have.

safe.

Overall I think the flu vaccines is...

important.

safe.

How likely are you to recommend...

the MMR vaccine to patients?

the flu vaccine to patients?

the flu vaccine to pregnant women?

Europe: one of the region with the lowest confidence in vaccine safety in the world

Overall results

Overall vaccine confidence is positive, though responses differ between countries

European region

Lowest confidence in the safety of vaccines in the world 7/10 countries in the world with lowest confidence levels in Europe, including France, Italy, Greece and Slovenia

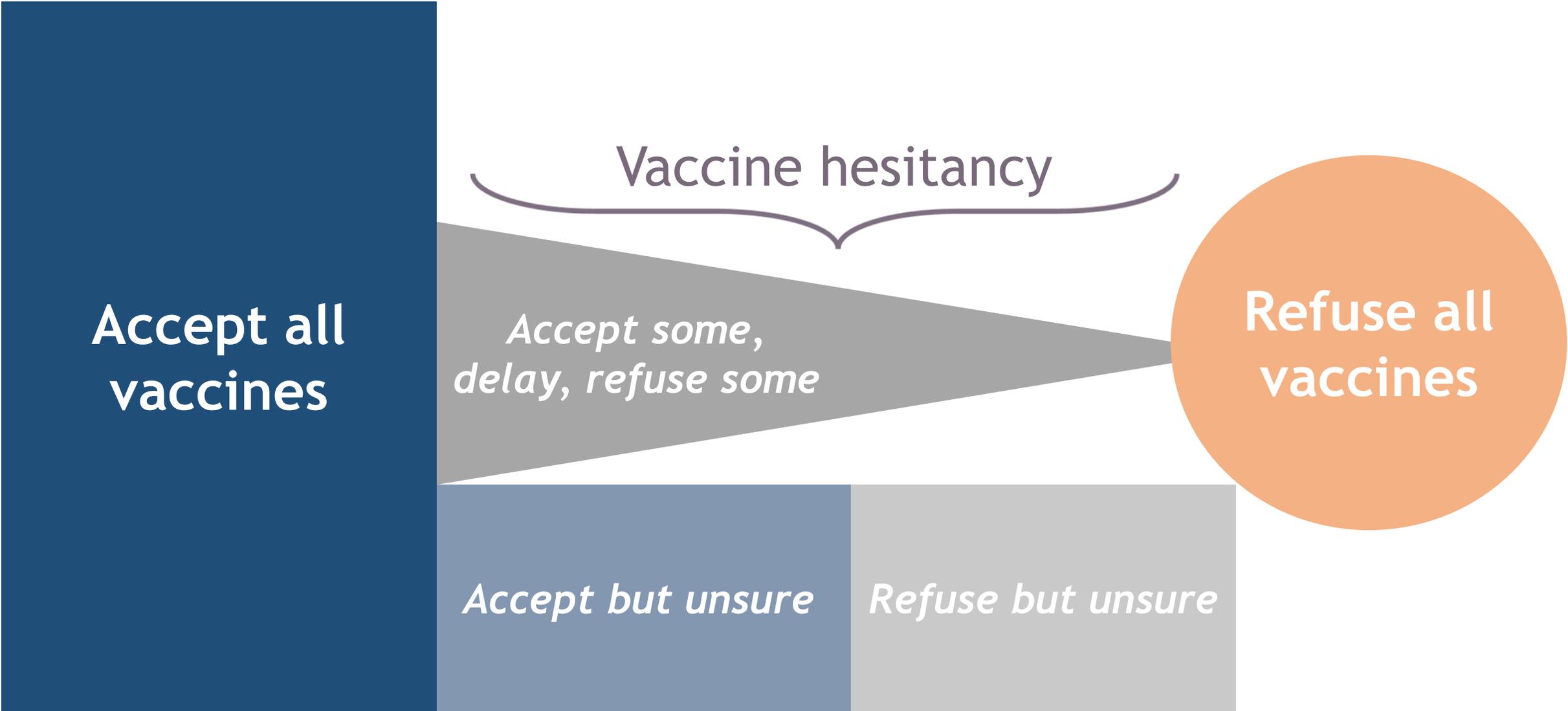
Education

Education increases confidence in vaccine importance and effectiveness but not safety

France

Country with the lowest level of confidence in the safety of vaccines

The WHO vaccine hesitancy continuum



Determinants of vaccine hesitancy (WHO SAGE, 2014)



Vaccine & vaccination specific issues

- Scientific risk/benefit
- Vaccination schedule
- Mode administration or delivery
- Introduction new vaccine
- Vaccine supply
- Healthcare professionals
- Costs
- Tailoring vaccines



Individual & social group influences

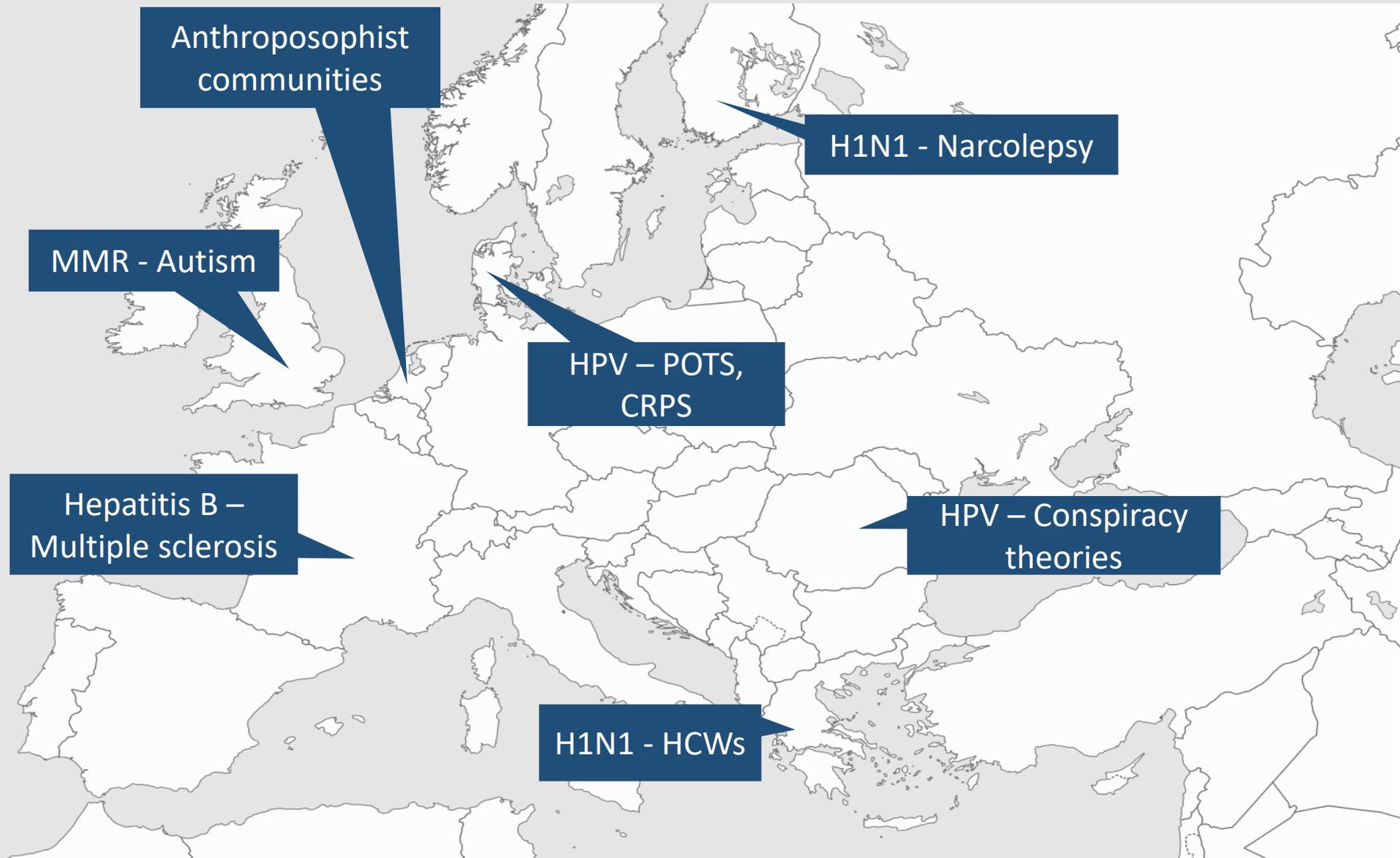
- Perceived risk/benefit
- Social norm, individual need
- Beliefs, attitudes and motivations about health
- Knowledge, awareness
- Trust in health system or provider
- Experience with past vaccination



Contextual influences

- Influential individuals or leaders
- Politics, policies (mandates)
- Religion, culture
- Socio-economics
- Communication and media
- Pharmaceutical industry
- Historical influences
- Geographic barriers

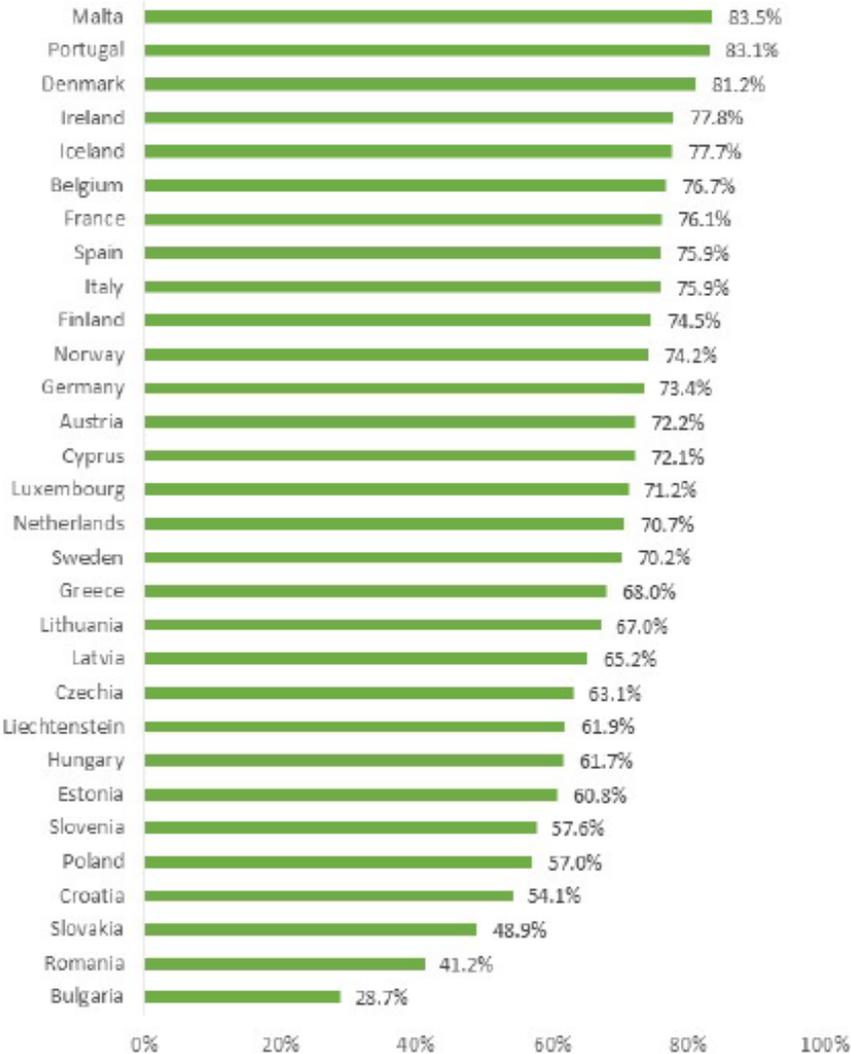
Concerns vary by vaccine, time, context, and country - even within Europe



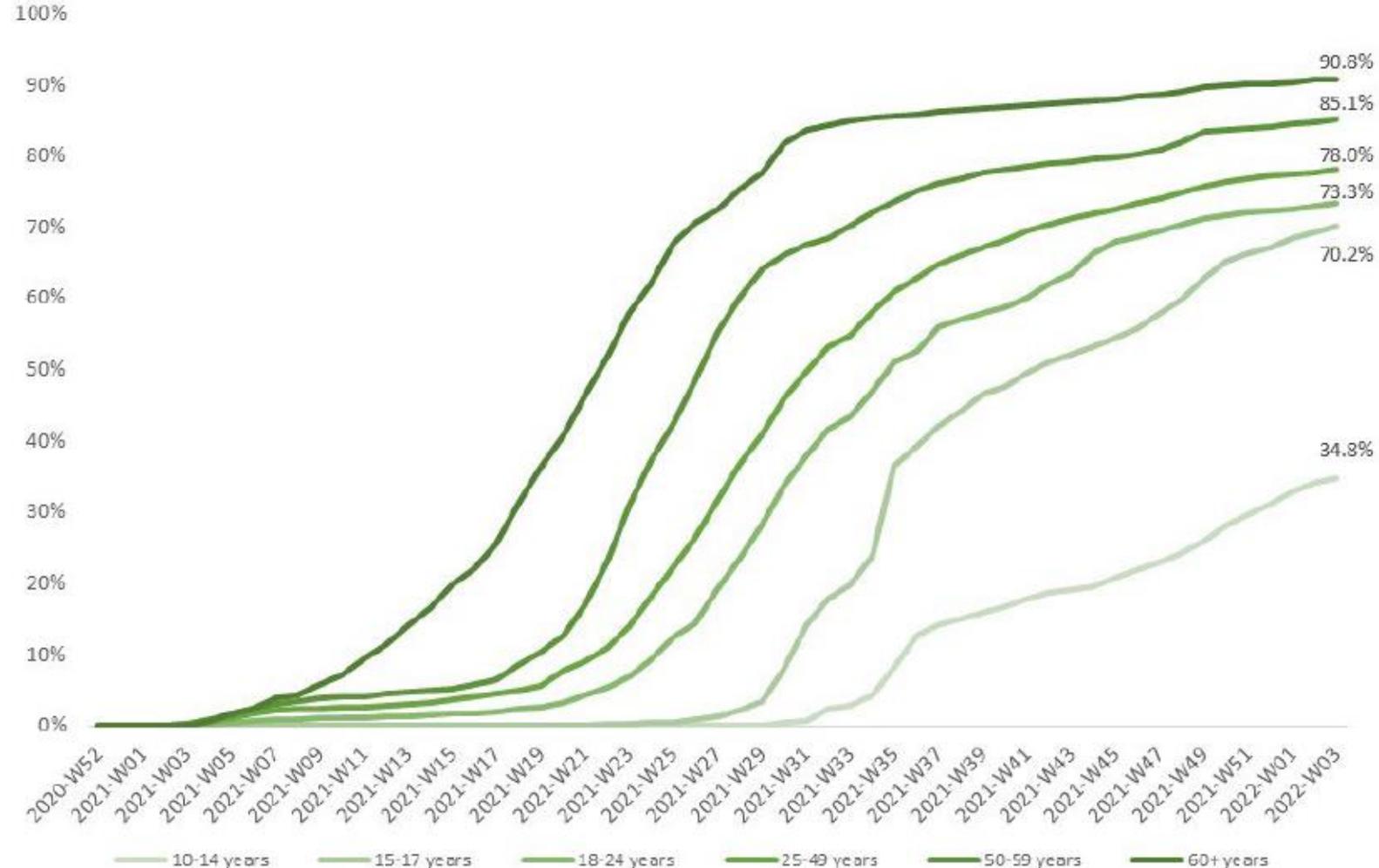
Vaccination Confidence: *Volatility, Politicization and Misinformation*

COVID-19 vaccine uptake in Europe (2022)

Uptake of COVID-19 vaccination (primary course), week 3, 2022



Uptake of COVID-19 vaccination (primary course) by age group in EU/EEA countries, week 3, 2022



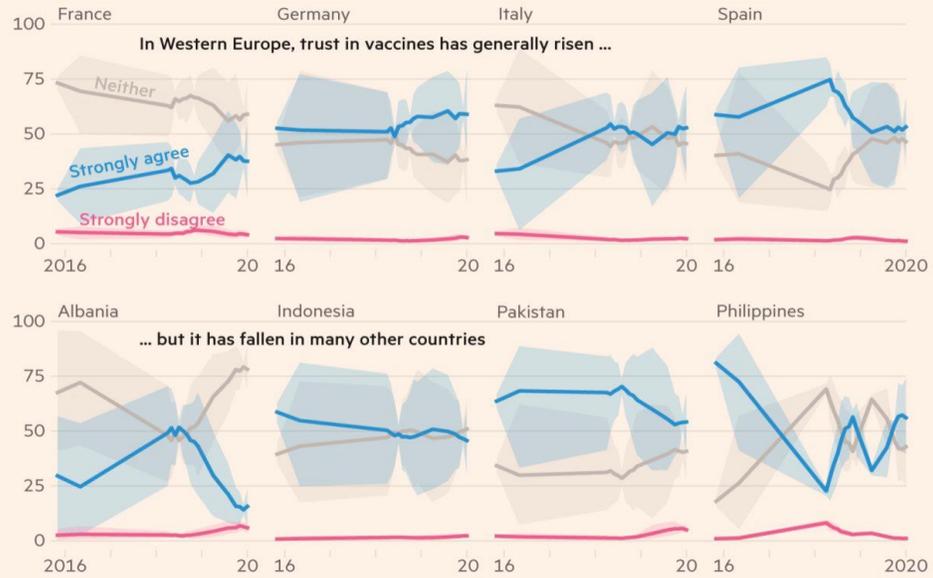
Differences in vaccine confidence by demographics

- Across the EU/UK, **males are found to be more likely than females** to have high confidence in vaccination in 11 countries Austria, Croatia, Czechia, Estonia, France, Greece, Italy, Lithuania, Luxembourg, Romania, and Slovakia.
- **Over 65s have higher confidence than younger** groups, with Latvia the only exception
- In 12 countries, individuals with a **university education are more likely to have high vaccine confidence than** those with secondary education. Primary education is associated with lower vaccine confidence in four countries: Finland, Poland, Romania, and the UK
- **Individuals with children** are found to have higher confidence than those without children in Ireland and Slovenia, while those without children are found to have higher confidence in Denmark, Romania, and Sweden
- Differences among **migrant populations** vary by country and type of communities: in some countries, in Sweden for example, Somali communities were found to have lower confidence in vaccination than the general population. In Germany, vaccine uptake is for COVID-19 is lower in migrant communities, yet studies showed conflicting findings regarding their willingness to get vaccinated compared to the general population

Vaccine confidence changes over time

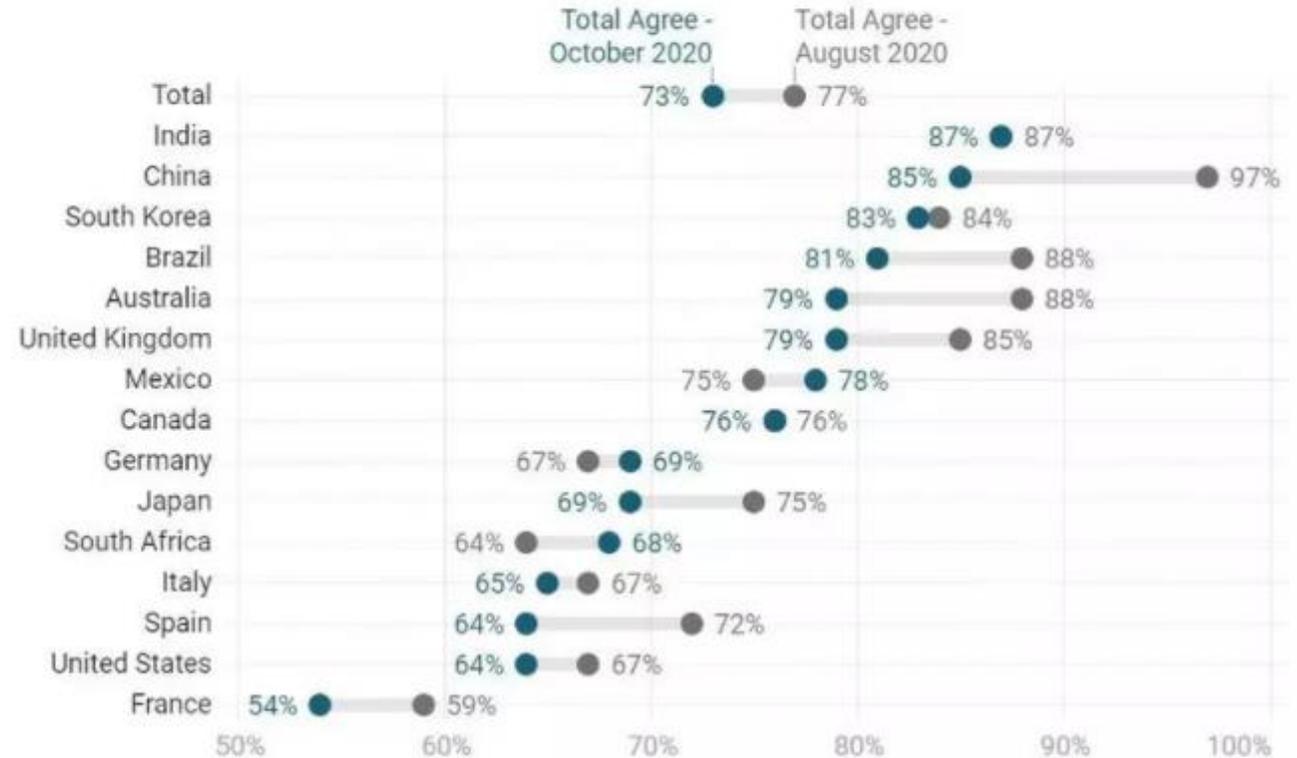
Opinions on vaccines have shifted in different directions

Share of population agreeing or disagreeing that vaccines are effective
(Per cent, with 95% confidence intervals)



Graphic: Alan Smith
Source: Figueiredo, Simas, Karafillakis, Paterson and Larson in The Lancet (2020)

If a vaccine for COVID-19 were available, I would get it



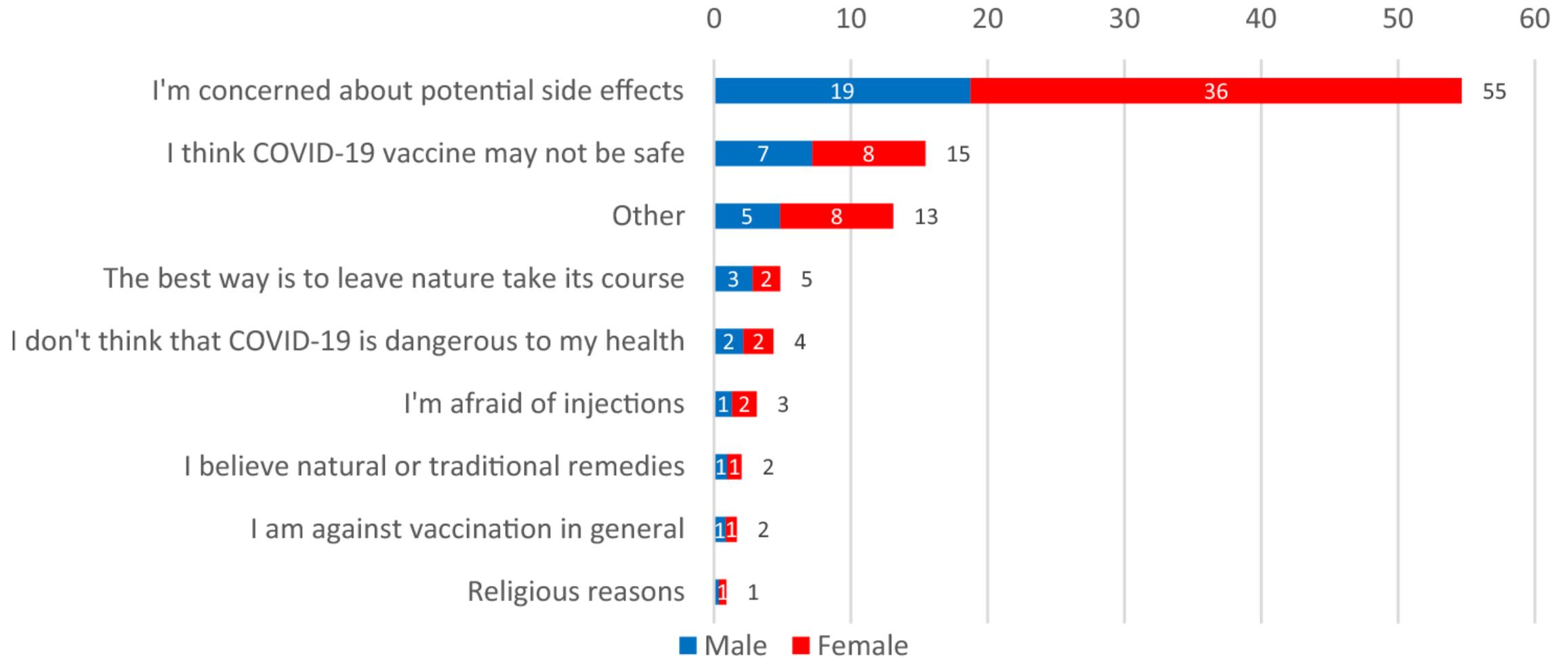
Base: 18,526 online adults aged 16-74 across 15 countries

Chart: Ipsos • Source: Global Advisor • Get the data • Created with Datawrapper

Image: World Economic Forum-Ipsos

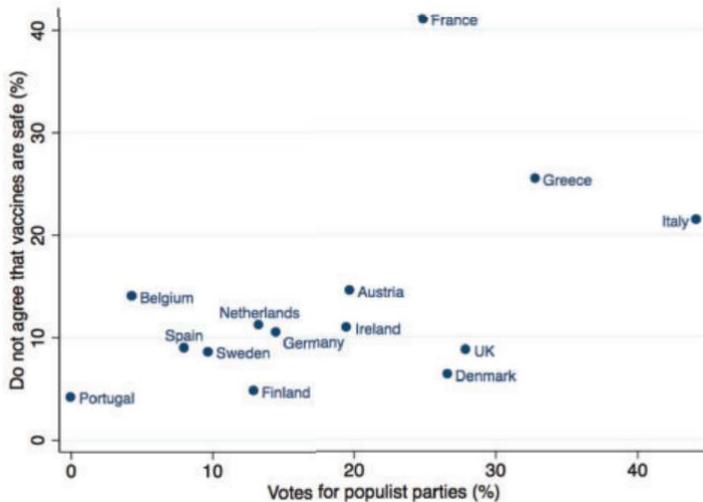
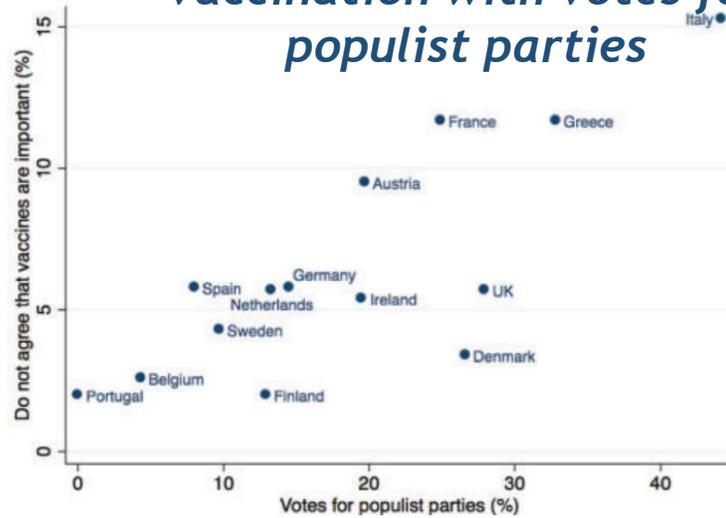
de Figueiredo, Alexandre, et al. "Mapping global trends in vaccine confidence and investigating barriers to vaccine uptake: a large-scale retrospective temporal modelling study." *The Lancet* (2020).

Reasons for hesitating to get vaccinated against COVID-19



The influence of politics and populism

Comparing confidence in vaccination with votes for populist parties



Kennedy J, Populist politics and vaccine hesitancy in Western Europe: an analysis of national-level data, *European Journal of Public Health*, Volume 29, Issue 3, June 2019, Pages 512–516

What about COVID?

Four common mechanisms used by populist leaders in handling the Covid-19 pandemic: **blaming outsiders and victims, contempt for institutions, denialism and suspicion of elites**

<http://ijhpm.com>
Int J Health Policy Manag 2021, 10(8), 511–515

doi: 10.34172/ijhpm.2020.124

IJHPM
International Journal of Health Policy and Management

Commentary



Are Populist Leaders Creating the Conditions for the Spread of COVID-19?

Comment on “A Scoping Review of Populist Radical Right Parties’ Influence on Welfare Policy and its Implications for Population Health in Europe”

Martin McKee^{1*}, Alexi Gugushvili², Jonathan Koltai³, David Stuckler⁴

Abstract

Do populist leaders contribute to the spread of coronavirus disease 2019 (COVID-19)? While all governments have struggled to respond to the pandemic, it is now becoming clear that some political leaders have performed much better than others. Among the worst performing are those that have risen to power on populist agendas, such as in the United States, Brazil, Russia, India, and the United Kingdom. Populist leaders have tended to: blame “others” for the pandemic, such as immigrants and the Chinese government; deny evidence and show contempt for institutions that generate it; and portray themselves as the voice of the common people against an out-of-touch ‘elite’. In our short commentary, focusing on those countries with the most cases, we find that populist leaders appear to be undermining an effective response to COVID-19. Perversely, they may also gain politically from doing so, as historically populist leaders benefit from suffering and ill health. Clearly more research is needed on the curious correlation of populism and public health. Notwithstanding gaps in the evidence, health professionals have a duty to speak out against these practices to prevent avoidable loss of life.

Keywords: Populism, Political Determinants of Health, COVID-19

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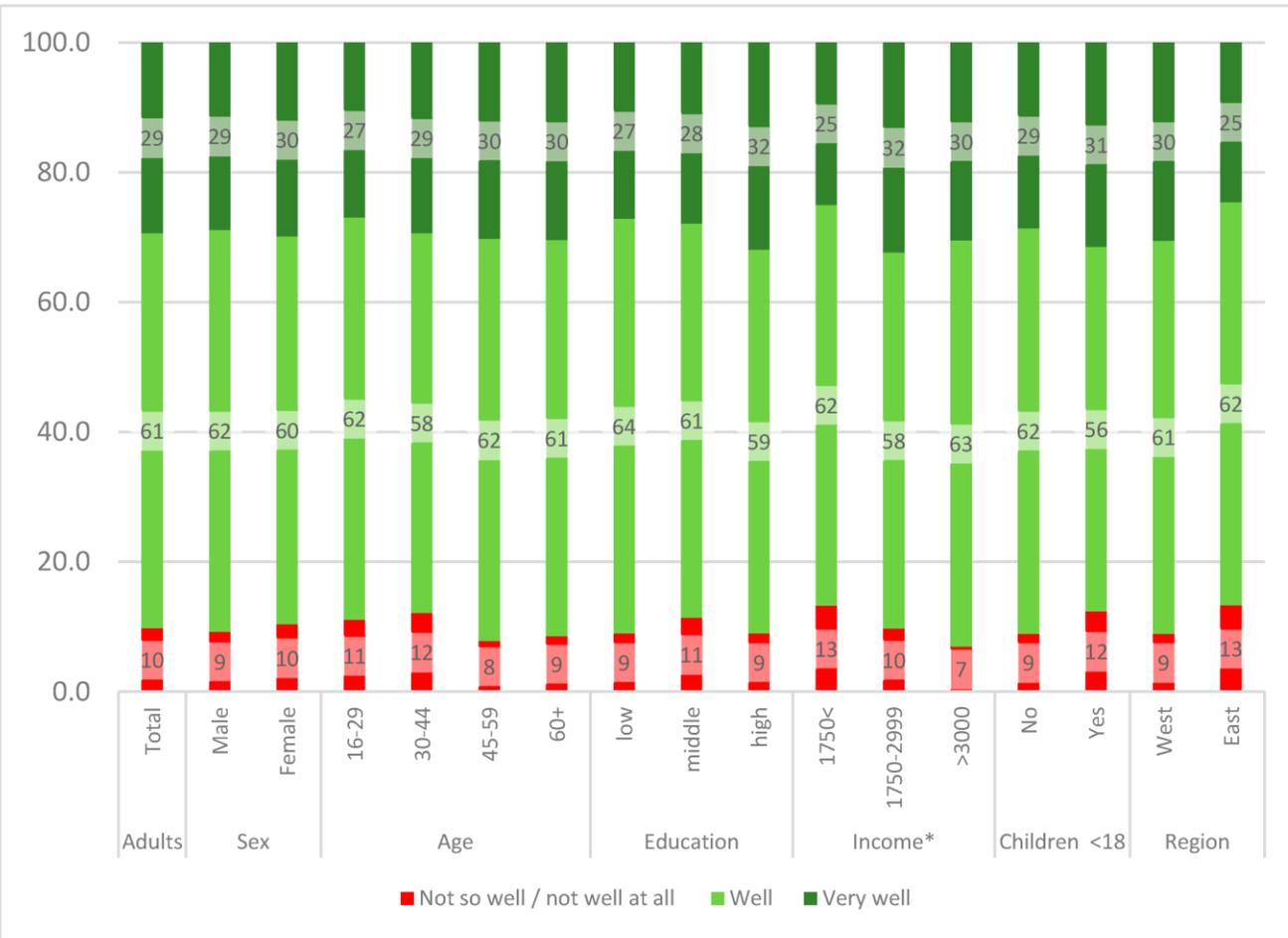
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McKee, A. et al. Are populist leaders creating the conditions for the spread of Covid 19?; Comment on “A scoping review of populist radical right parties’ influence on welfare policy and its implications for population health in Europe” *Int J Health Policy Manage* (2020)

COVID-19, scientific literacy and misinformation

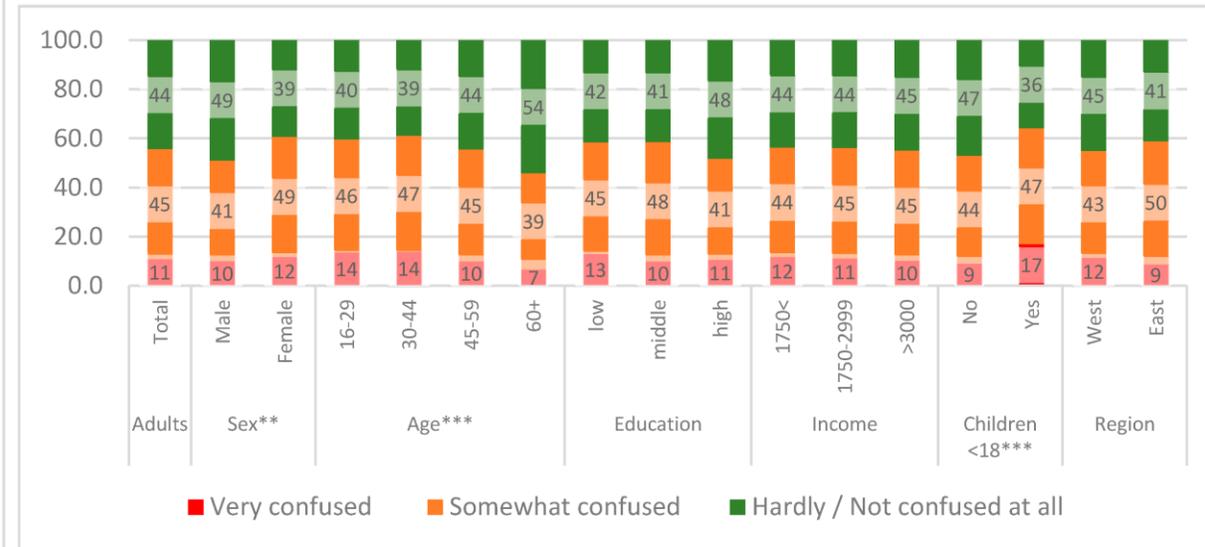
How well are you informed about coronavirus?

* $p < 0.05$; Spearman correlation, $n = 1037$



Do you feel confused about coronavirus information?

** $p < .01$; *** $p < 0.001$; Spearman correlation, $n = 1037$



Misinformation and COVID-19 vaccination in Europe: towards polarisation?

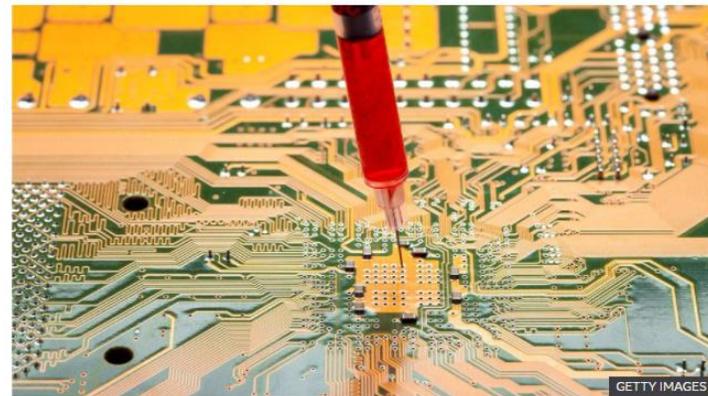
Fear of new technologies



Vaccine rumours debunked: Microchips, 'altered DNA' and more

By Flora Carmichael and Jack Goodman
BBC Reality Check

2 December 2020



Spotting Misinformation On Social Media Is Increasingly Challenging

Aug 2, 2021, 03:56pm EDT | 6,208 views

Peter Suci Contributor
Social Media

Listen to article 8 minutes

FACT-CHECKING

Whether it is about the presidential election, climate change, or Covid-19 vaccines and the delta ... [+] NURPHOTO VIA GETTY IMAGES

The spread of misinformation



The influence of 'expert figures'

INSIDER

HOME > HEALTHCARE

The UK approved Pfizer's vaccine too quickly and without the proper checks, EU politicians have warned

Concerns about the speed of vaccine development

Individual liberties vs safeguarding the public's health

- The role of the State in controlling infectious diseases is widely accepted, justified by human rights to health & duty to protect common good
- But, the State has to be mindful of individual rights: liberty, privacy and autonomy
- Perceptions of individual liberties and the role of the State will vary depending on culture (which may change over time)
- Individualistic cultures: patients want to make their own health decisions, rather than doctors or governments telling them what to do



What role for Covid-19 vaccine mandates?



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Research Paper

The potential impact of vaccine passports on inclination to accept COVID-19 vaccinations in the United Kingdom: Evidence from a large cross-sectional survey and modeling study

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^b Department of Health Metrics Sciences, University of Washington, Seattle, United States

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ABSTRACT

Background: The UK Government is considering the introduction of vaccine passports for domestic use and to facilitate international travel for UK residents. Although vaccine incentivisation has been cited as a motivating factor for vaccine passports, it is unclear whether vaccine passports are likely to increase inclination to accept a COVID-19 vaccine.

Methods: We conducted a large-scale national survey in the UK of 17,611 adults between 9 and 27 April 2021. Bayesian multilevel regression and poststratification is used to provide unbiased national-level estimates of the impact of the introduction of vaccine passports on inclination to accept COVID-19 vaccines and identify the differential impact of passports on uptake inclination across socio-demographic groups.

Findings: We find that a large minority of respondents report that vaccination passports for domestic use (46.5%) or international travel (42.0%) would make them no more or less inclined to accept a COVID-19 vaccine and a sizeable minority of respondents also state that they would 'definitely' accept a COVID-19 vaccine and that vaccine passports would make them more inclined to vaccinate (48.8% for domestic use and 42.9% for international travel). However, we find that the introduction of vaccine passports will likely lower inclination to accept a COVID-19 vaccine once baseline vaccination intent has been adjusted for. This decrease is larger if passports were required for domestic use rather than for facilitating international travel. Being male (OR 0.87, 0.76 to 0.99) and having degree qualifications (OR 0.84, 0.72 to 0.94) is associated with a decreased inclination to vaccinate if passports were required for domestic use (while accounting for baseline vaccination intent), while Christians (OR 1.23, 1.08 to 1.41) have an increased inclination over atheists or agnostics. Change in inclination is strongly connected to stated vaccination intent and will therefore unlikely shift attitudes among Black or Black British respondents, younger age groups, and non-English speakers.

Interpretation: Our findings should be interpreted in light of sub-national trends in uptake rates across the UK, as our results suggest that passports may be viewed less positively among socio-demographic groups that cluster in large urban areas. We call for further evidence on the impact of vaccine certification and the potential fallout for routine immunization programmes in both the UK and in wider global settings, especially those with low overall trust in vaccinations.

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“Vaccine passports have a positive impact on stated intentions to get vaccinated among those who have not received at least one dose of a COVID-19 vaccine. Looking more closely, however, **we find a polarizing effect** of passports. **Passports make those who already intend to get vaccinated (who comprise 80% of our participants) even more positive.** (...)

But when we remove those participants who express certainty (they either definitely will or definitely will not get a job) and **focus on the remaining doubters, we find lower intentions to get vaccinated when vaccine passports are mentioned**, especially when these passports cover domestic activities.”

The situation in Europe

Mandatory vaccination	Countries
Yes, for certain population groups	France, Greece, Hungary, Italy, Latvia, Poland
Planned mandatory vaccination	Austria, Lithuania
No	Belgium, Bulgaria, Croatia, Czechia, Cyprus, Denmark, Estonia, Finland, Iceland, Ireland, Germany, Liechtenstein, Luxembourg, Malta, the Netherlands, Norway, Portugal, Romania, Slovenia, Slovakia, Spain, Sweden
Required certificates for access to specific locations/events (e.g. restaurants, museums, concerns, etc.)	Austria, Belgium, Bulgaria, Croatia, Cyprus, Estonia, Finland, Germany, Greece, Hungary, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, the Netherlands, Portugal, Romania, Slovenia and Spain

Vaccine confidence is not only about vaccines

Journal of Public Health | pp. 1–11 | doi:10.1093/pubmed/fiab122

Correlates of COVID-19 vaccine hesitancy in Austria: trust and the government

Eva Schernhammer^{1,2,3}, Jakob Weitzer¹, Manfred D. Laubichler^{2,4,5}, Brenda M. Birmann³, Martin Bertau⁶, Lukas Zenk⁷, Guido Caniglia⁸, Carlo C. Jäger⁹, Gerald Steiner^{2,6}

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⁶Institute for Technical Chemistry, TU Bergakademie Freiberg, 09599 Freiberg, Germany

⁷Department for Knowledge and Communication Management, Danube University Krems, 3500 Krems an der Donau, Austria

⁸Konrad Lorenz Institute for Evolution and Cognition Research, 3400 Klosterneuburg, Austria

⁹Global Climate Forum, 10178 Berlin, Germany

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ABSTRACT

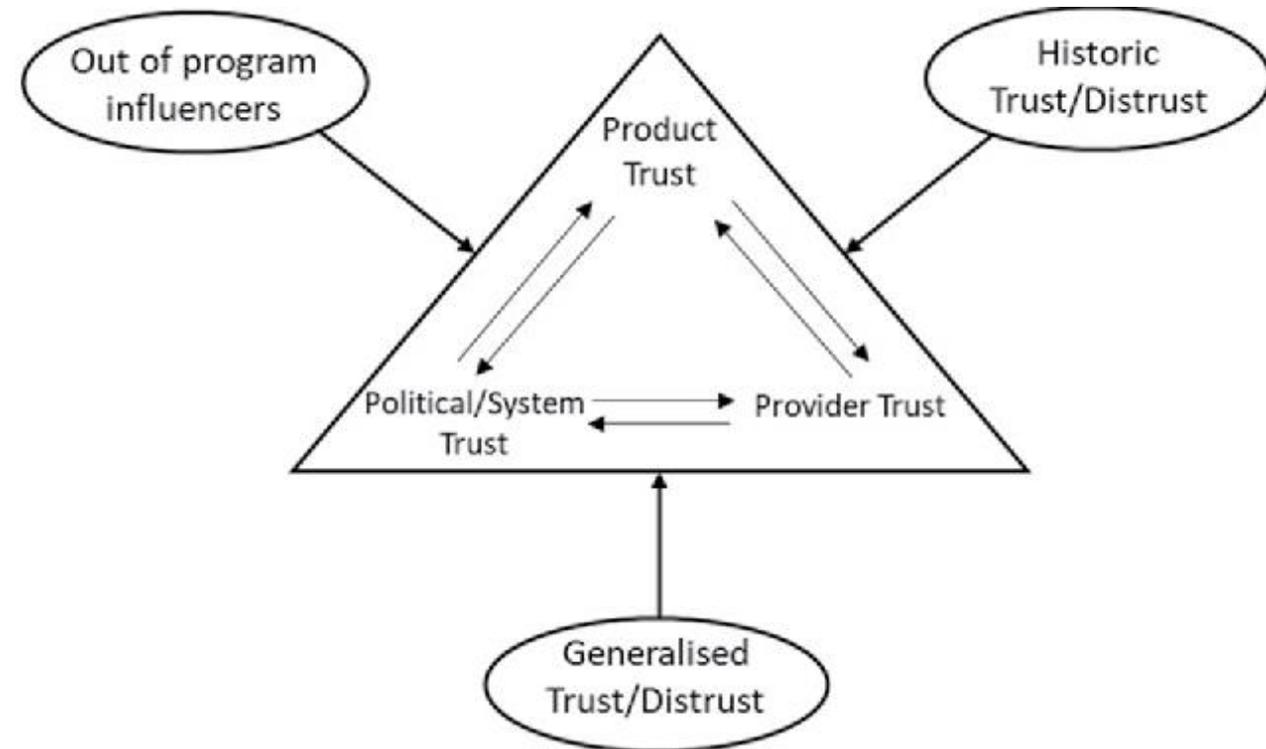
Background With the coronavirus disease 2019 (COVID-19) pandemic surging and new mutations evolving, trust in vaccines is essential.

Methods We explored correlates of vaccine hesitancy, considering political beliefs and psychosocial concepts, conducting a non-probability quota-sampled online survey with 1007 Austrians.

Results We identified several important correlates of vaccine hesitancy, ranging from demographics to complex factors such as voting behavior or trust in the government. Among those with hesitancy towards a COVID-19 vaccine, having voted for opposition parties (opp) or not voted (novote) were (95% Confidence Interval (CI)opp, 1.44–2.95) to 2.25-times (95%CI_{novote}, 1.53–3.30) that of having voted for governing parties. Only 46.2% trusted the Austrian government to provide safe vaccines, and 80.7% requested independent scientific evaluations regarding vaccine safety to increase willingness to vaccinate.

Conclusions Contrary to expected, psychosocial dimensions were only weakly correlated with vaccine hesitancy. However, the strong correlation between distrust in the vaccine and distrust in authorities suggests a common cause of disengagement from public discourse.

Keywords behaviour, communicable diseases, vaccine hesitancy, COVID-19



Larson HJ, Clarke RM, Jarrett C, Eckersberger E, Levine Z, Schulz WS, Paterson P. Measuring trust in vaccination: A systematic review. *Human vaccines & immunotherapeutics*. 2018 Jul 3;14(7):1599-609.

Breakout session

Exercise: read the scenario and answer the questions

COVID-19 vaccination for children and adolescents

COVID-19 vaccination has generated various concerns and anxieties amongst members of the public, leading to suboptimal vaccine uptake rates in many countries. The introduction of vaccination for children and adolescents has led to similar challenges, albeit with different types of concerns identified.

PART A (10min)

Thinking about your own country, what would you say were the key concerns around COVID-19 vaccination for children and adolescents amongst different population groups (e.g. parents, healthcare professionals, adolescents themselves, etc.).

Compare your answers with your colleagues: are there any similarities or differences between countries?

PART B (20min)

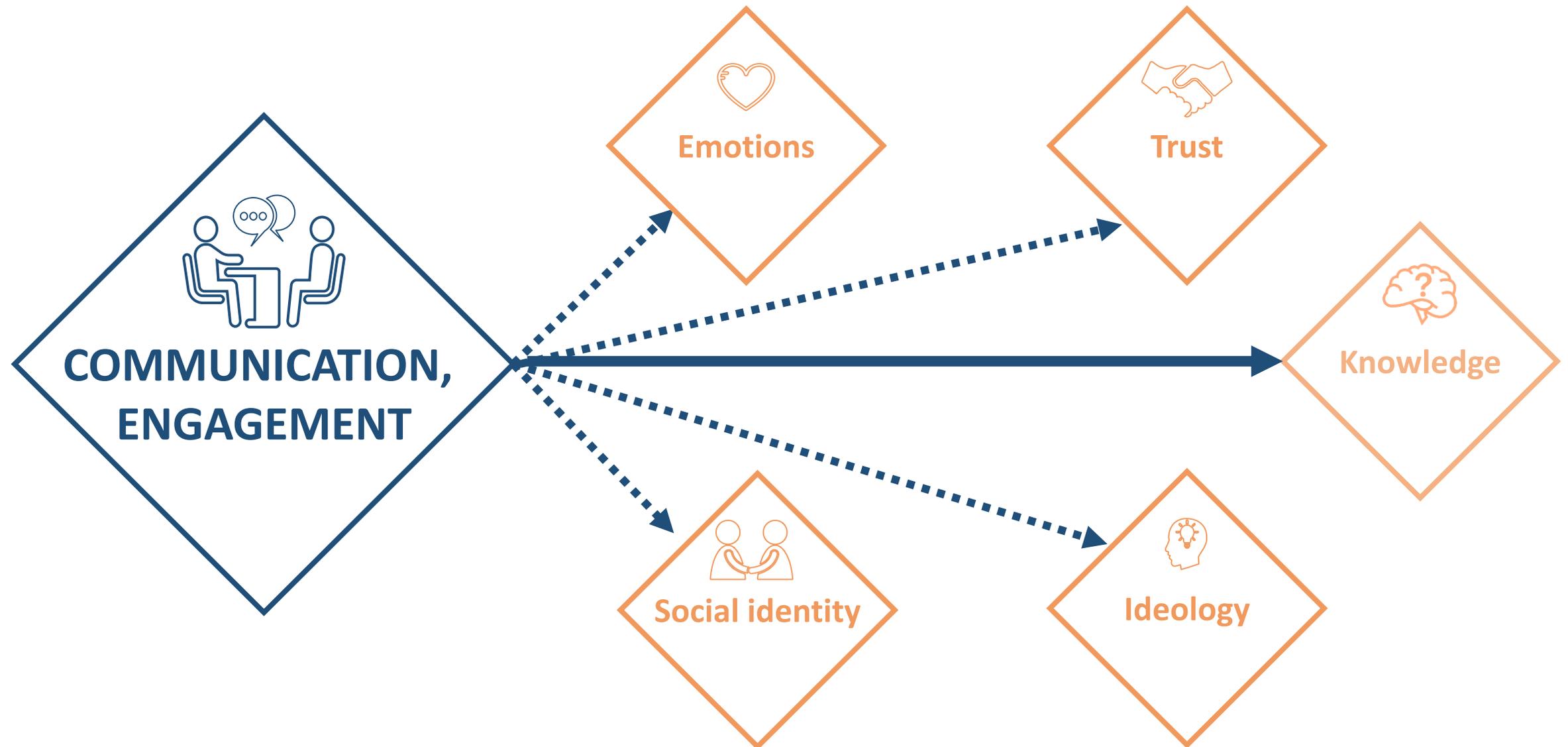
What has your country done to address some of the issues identified in Part A? Do you think these interventions were successful? What would you have done differently and why?

Strategies to Build and Sustain Confidence in Vaccines and Immunisation

Improving vaccine confidence

- 1 Monitor and measure public confidence, develop an understanding of scope/context/root causes, listen to the public
- 2 Use context-specific, evidence-based strategies (not only communication) to address underlying issues, engage the public

Moving beyond the knowledge-deficit model



HSE National Immunisation Office

@HSEImm

Part of @hselive sharing the facts about the National Immunisation Programmes



Questions about HPV? Get the facts from the HSE at hpv.ie



Marcia Cross

Actor, HPV Educator, Anal Cancer Thriver

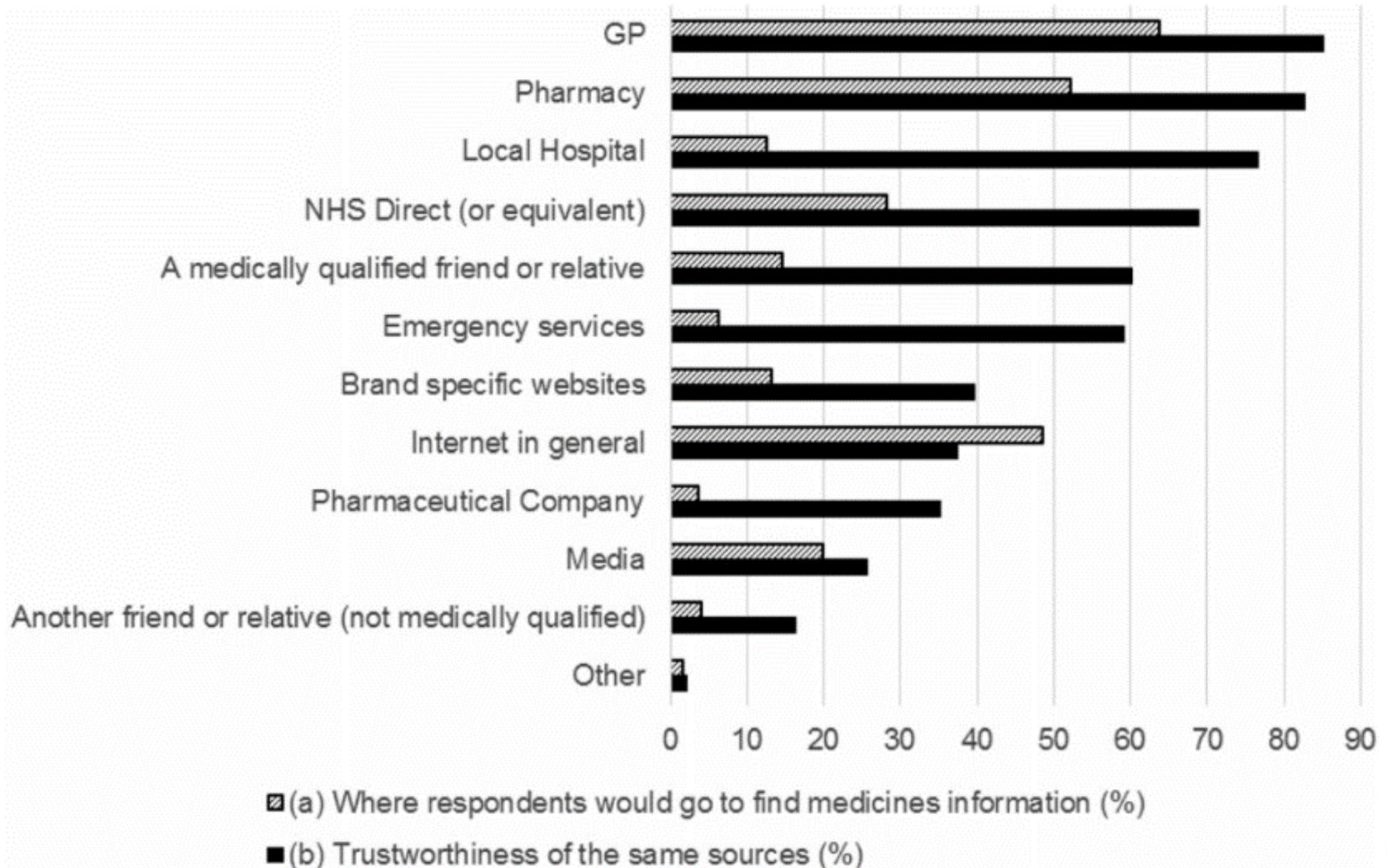
Don't forget to have your HPV vaccination!

You should have it in year 8/9*



How to communicate to restore trust?
The example of HPV

GPs: most trusted source of medical information in Europe



Communication techniques: facing hesitant parents

- **Scientific facts vs. personal stories:** “*Did you vaccinate your own children?*”
- Be respectful, **listen to their fears**, concerns, try to **understand them**: do not ignore, despise, judge them
- The answer is not always to “give more information” but to **gain parents’ trust**, to discuss, reassure
- **Correcting myths does not always work**, and can reinforce myths
- HCPs often want to resolve patients’ problems BUT when individuals don’t feel listened to, it can become a struggle: **giving more and more information in a directive way does not work and generates resistance**

The example of motivational interviewing: a 4-step process

1. Establish a relationship of trust

- ✓ MI spirit: Non-judgmental, accepting hesitation, being curious about their beliefs and position
- ✓ Don't try to correct misinformation at first
- ✓ Do not try to convince with more arguments
- ✓ Let people express their fears and concerns
- ✓ Empathy (showing people that you understand and want to help them) = the most effective way to move towards change

2. Understand the specific determinant of the person's hesitation

- ✓ Open-ended questions, Complex reflect
- ✓ Targeting what specific relevant information will be provided to this person to increase their perception of the importance of vaccination

3. Offer the information

- ✓ Ask-Offer-Ask: always ask permission before giving information (arouse curiosity)
- ✓ Co-building new knowledge in partnership that will increase the perception of the importance of vaccination

4. Respect the autonomy of the person

- ✓ I am confident that you will do what you think is the best choice

Social Media Toolkit

The AAP Social Media Toolkit offers guidance on choosing a social media platform, and setting up and managing an account. This tool was initially developed to help pediatricians share messages about immunizations; immunizations is an example throughout.

Toolkit Development

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- AAP Facts
- Committees, Councils & Sections
- Chapters & Districts
- News Room
- Donate Now
- Corporate Relationships



Introduction to Social Media

This introduction to social media will allow you to understand what social media is, decide which platform is best for you, define your social media strategy, stay relevant, and track usage.



Dr. Asher Williams @Asher_Williams · Dec 31, 2020
Myth #1: "We can't trust COVID-19 vaccines because they were rushed"

Team Halo ✓
571 Tweets

ID-19 trial progresses, as 'cautious optimism' grows
INA vaccine

Team Halo ✓
@projecthalo

12.7K views
0:06 / 1:58

Adapting our communication methods, increasing the presence of health professionals and doctors on the internet

In conclusion...



Confidence in vaccination has always been lower in European countries than in other regions of the world, varying by context, country and vaccine



This has resulted in suboptimal population willingness to accept a COVID-19 vaccine and in the spread of misinformation and rumours



Confidence in COVID-19 vaccines is not just about perceived risks and benefits, but is influenced by a range of psycho-social factors including trust in governments and ideological beliefs and values



Healthcare professionals have a central role in restoring trust, but their questioning of vaccination and of proposed regulations to mandate vaccines is increasing in certain settings