# VACCINE HESITANCY DETERMINING THE SCALE OF THE CHALLENGE

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#### SAGE WORKING GROUP

### DEFINITION

Party



Party



Party



Party



Party



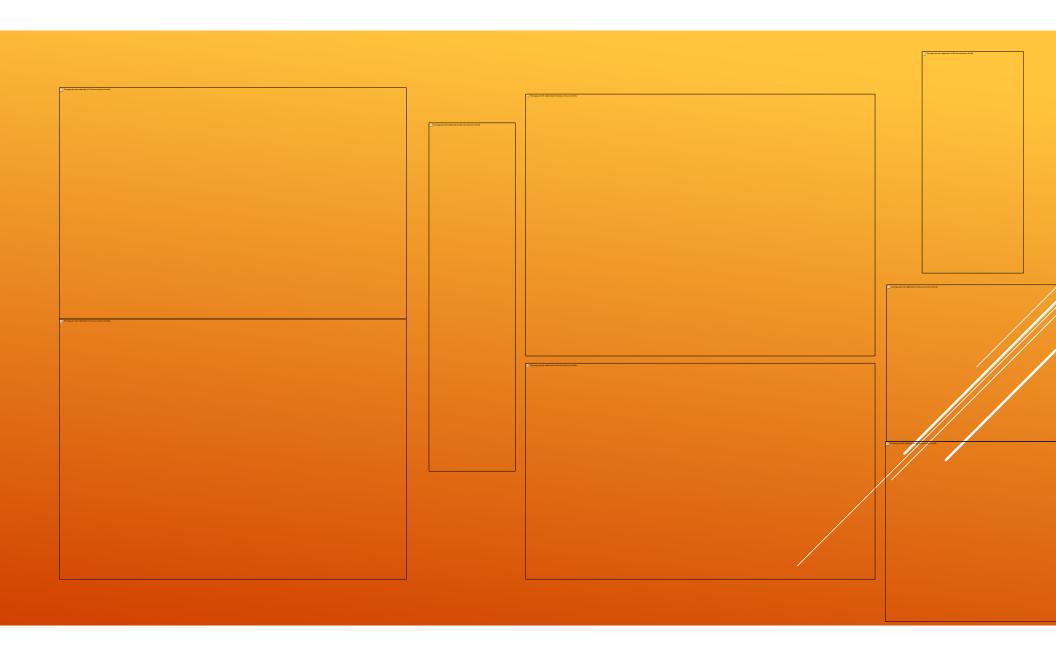
Party



Vaccine hesitancy refers to delay in acceptance or refusal of vaccines despite availability and quality of vaccine service. Vaccine hesitancy is complex and context specific varying across time, place and vaccines. It is influenced by factors such as complacency, convenience and confidence.



To address GVAP defined vaccine demand, countries will need to diagnose the root causes and magnitude of vaccine hesitancy and address vaccine hesitancy at both the individual and community levels as hesitancy undermines demand



#### **CONTEXTUAL INFLUENCES**

Influences arising due to historic, socio-cultural, environmental, health system/institutional, economic or political factors

#### VACCINE/ VACCINATION-SPECIFIC ISSUES

Directly related to vaccine or vaccination

#### INDIVIDUAL AND GROUP INFLUENCES

Influences arising from personal perception of the vaccine or influences of the social/peer environment

In 2015, 189 people from 24 states and the District of Columbia were reported to have measles. In 2014, the United States experienced a record number of measles cases, with 667 cases from 27 states this is the greatest number of cases since measles elimination was documented in the U.S. in 2000.

ITS REAL

"While we see many outbreaks reported among Roma populations, Irish travellers and anthroposophical, or religious communities, these populations are from different social backgrounds and there are different reasons why they are not vaccinated."

MEASLES

"There was no evidence that leaving vaccination undone was due to the parents' lack of knowledge, forgetfulness or lack of interest in MMR vaccination, and it was rare that only one reason was mentioned."

MMR

## Missed children (2015) due to refusals:

- Nigeria: 0.4%
- ► Afghanistan 2%
- **Pakistan 0.1%**

- Inaccessible politics
- Child not there -
  - ? Refusal
- **⊳** Gender

**POLIO** 

- Different age group
- **Fertility**
- **▶Trust**

**HPV** 

- Covered the six WHO regions and high, middle and low income countries
- vaccine hesitancy existed in all 13 countries
- religious beliefs
- lack of trust in the health system and health care providers,
- safety concerns (mass campaigns and newer vaccines)
- ▶ lack of perceived benefit of vaccines.

## 13 COUNTRY IMMUNIZATION MANAGERS

- Many attempts to deal with it in numerous ways
- Very few rigorously evaluated

INTERVENTIONS

- **► Alert**
- **B** Proactive
- **▶** Complex
- > Do something
- **Evaluate**

CONCLUSION

- Invest in finding out about your vaccine hesitancy issues
- Write up your experiences –positive and negative

RECOMMENDATIONS