Actions to counteract hesitancy and increase acceptance and coverage rates: recommendations from the Italian Society of **Public Health** 

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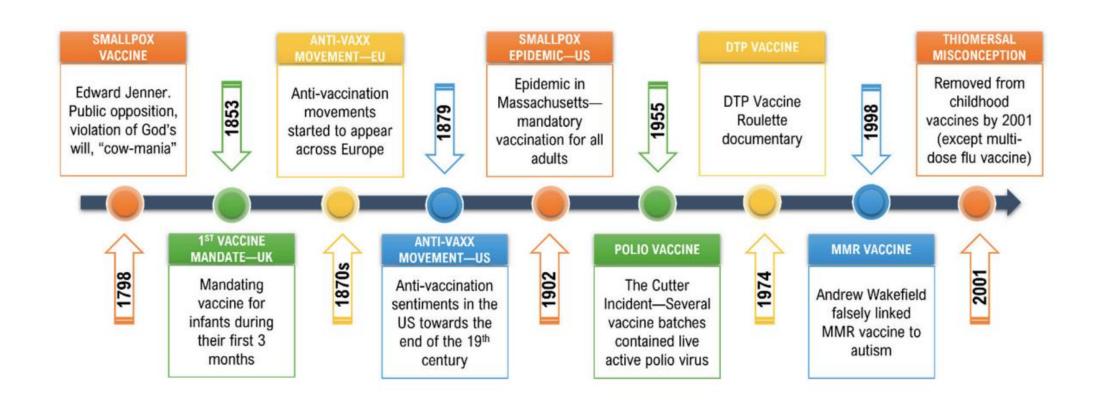


**Adult Immunization Board (AIB)** 

Country meeting:

Adult Immunization in Italy: successes, lessons learned and the way forward

## Vaccine hesitancy timeline: early hesitancy and modern controversies





#### Vaccine

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# Parental vaccine hesitancy in Italy – Results from a national survey

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#### ABSTRACT

In Italy, in 2016, we conducted a cross-sectional survey to estimate vaccine hesitancy and investigate its determinants among parents of children aged 16–36 months.

Data on parental attitudes and beliefs about vaccinations were collected through a questionnaire administered online or self-administered at pediatricians' offices and nurseries. Parents were classified as pro-vaccine, vaccine-hesitant or anti-vaccine, according to self-reported tetanus and measles vaccination status of their child. Multivariable logistic regression was used to investigate factors associated with hesitancy.

A total of 3130 questionnaires were analysed: 83.7% of parents were pro-vaccine, 15.6% vaccine-hesitant and 0.7% anti-vaccine. Safety concerns are the main reported reason for refusing (38.1%) or interrupting (42.4%) vaccination. Anti-vaccine and hesitant parents are significantly more afraid than pro-vaccine parents of short-term (85.7 and 79.7% vs 60.4%) and long-term (95.2 and 72.3% vs 43.7%) vaccine adverse reactions. Most pro-vaccine and hesitant parents agree about the benefits of vaccinations. Family pediatricians are considered a reliable source of information by most pro-vaccine and hesitant parents (96.9 and 83.3% respectively), against 45% of anti-vaccine parents. The main factors associated with hesitancy were found to be: not having received from a paediatrician a recommendation to fully vaccinate their child [adjusted odds ratio (AOR): 3.21, 95% CI: 2.14–4.79], having received discordant opinions on vaccinations (AOR: 1.64, 95% CI: 1.11–2.43), having met parents of children who experienced serious adverse reactions (AOR: 1.49, 95% CI: 1.03–2.15), and mainly using non-traditional medical treatments (AOR: 2.05, 95% CI: 1.31–3.19).

Vaccine safety is perceived as a concern by all parents, although more so by hesitant and anti-vaccine parents. Similarly to pro-vaccine parents, hesitant parents consider vaccination an important prevention tool and trust their family pediatricians, suggesting that they could benefit from appropriate communication interventions. Training health professionals and providing homogenous information about vaccinations, in line with national recommendations, are crucial for responding to their concerns.

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Perspective

# Ten Actions to Counteract Vaccine Hesitancy Suggested by the Italian Society of Hygiene, Preventive Medicine, and Public Health

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# The Ten Actions Suggested by the Italian Society of Hygiene Preventive Medicine and Public Health

- 1. Establishment of a National Multidisciplinary Working Group on Vaccine Hesitancy
- 2. Activation of a National Monitoring/Surveillance System on Vaccine Hesitancy
- 3. Identification and Dissemination of Tools and Methods to Measure and Understand Vaccine Hesitancy
- 4. Identification, Testing, and Dissemination of Local and National Good Practices to Counteract Vaccine Hesitancy
- 5. Widespread and Interdisciplinary Training on Vaccine Hesitancy

# The Ten Actions Suggested by the Italian Society of Hygiene Preventive Medicine and Public Health

- 6. Training on Risk Communication, Community Engagement and Infodemiology
- 7. Inclusion of Effective Interventions to Counteract Vaccine Hesitancy within the National Immunization Plan (NIP)
- 8. Promoting the Establishment and Growth of a Community of Practice and Research in the Field of Vaccine Hesitancy
- 9. Promoting Collaborations between Scientific Societies
- 10. Promoting Knowledge from the Behavioral Sciences

# Piano Nazionale Prevenzione Vaccinale PNPV 2023-2025

20 marzo 2023

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### **OBIETTIVI E STRATEGIE**

#### Obiettivi del PNPV 2023-2025 sono:

- Mantenere lo status polio-free
- Raggiungere e mantenere l'eliminazione di morbillo e rosolia
- Rafforzare la prevenzione del cancro della cervice uterina e delle altre malattie HPV correlate
- Raggiungere e mantenere le coperture vaccinali target rafforzando Governance, Reti e percorsi di prevenzione vaccinale
- Promuovere interventi vaccinali nei gruppi di popolazione ad alto rischio per patologia, favorendo un approccio centrato sulle esigenze del cittadino/paziente
- Ridurre le diseguaglianze e prevedere azioni per i gruppi di popolazione difficilmente raggiungibili
  e/o con bassa copertura vaccinale
- Completare l'informatizzazione delle anagrafi vaccinali regionali e mettere a regime l'anagrafe vaccinale nazionale
- Migliorare la sorveglianza delle malattie prevenibili da vaccino
- Rafforzare la comunicazione in campo vaccinale
- Promuovere nei professionisti sanitari la cultura delle vaccinazioni e la formazione in vaccinologia.

# Framework for Vaccine Communication

## Monitoring and Response:

- Implement systems to monitor vaccine hesitancy.
- Address public doubts and misinformation, especially through social media and new media technologies.
- Provide timely and transparent responses to vaccine-related adverse events.

## Training and Education:

- Educate healthcare workers in vaccine communication.
- Enhance vaccinology topics in higher education and offer ongoing training for health professionals.

## Building Alliances:

Form alliances at various levels for optimized advocacy and community engagement.

# Strategic Actions for Effective Communication

### Communication Plans:

- Develop strategic communication plans targeting various audiences, including healthcare workers, media, and the general population.
- Implement targeted campaigns for emergencies or unforeseen circumstances.

## Internal Communication Among Healthcare Workers:

- Promote continuous training on vaccinations.
- Create privileged listening channels for healthcare workers' concerns and doubts.

## Rebuilding Trust:

- Promote positive examples of vaccination.
- Utilize social networks for listening to and engaging with citizens.
- Regularly report positive outcomes to the media and online platforms.

## Some useful tools: giving reliable references for the general population

























Credits: Prof Claudio Costantino

Infoveillance Infodemology





### Centro Nazionale per la Prevenzione ed il Controllo delle Malattie

- Implementation of a training model on risk communication
- Implementation of social media monitoring platform
- Dissemination and use of the evidence produced to promote the implementation of risk communication programs in Public Health









Thanks for listening!

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