

VAC-PACT PILOT PROJECT
VACCINATION CONFIDENCE –
PATIENTS' AND PROFESSIONALS'
AWARENESS, COMMUNICATIONS &
TRUST

Vaccine Uptake & Chronic Diseases



Funded by the
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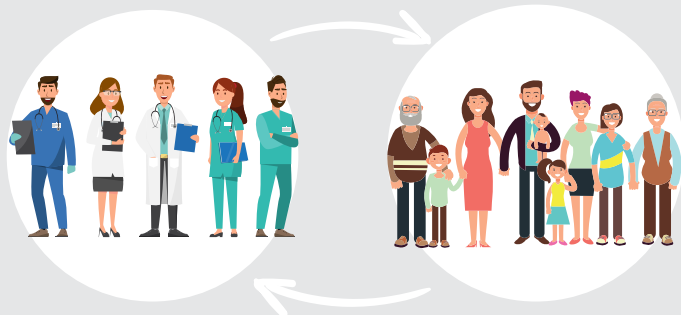
The status quo

- Thousands of adults around the world get sick from diseases that could be prevented by vaccines every year.
- People with **chronic diseases and long-term conditions**, in specific, are often at higher-risk of complications from **vaccine-preventable diseases**.

Even though specific vaccination recommendations exist, **vaccination uptake** (acceptance) amongst patients is low. This has been concerning in some areas of Europe, where the proportion of acceptance has been decreasing over time.

One reason is the lack of **easily accessible, evidence-based** information in lay-language on the benefits and risks of vaccination, the **relevance of the information** to patients' health status, and to what extent the information and related dialogue empowers them to make an **informed decision**.

SHARED DECISION-MAKING



Information +
Recommendations

Personal values +
Preferences

Vaccine hesitancy

- **Vaccine hesitancy** is a **delay in the acceptance**, or **refusal of vaccines** despite availability of vaccination services. It is complex and context specific, varying across time, place and vaccines.



Vaccine hesitancy

...continued

- According to the World Health Organization (WHO) SAGE Working Group, vaccine hesitancy is influenced by an easy-to-grasp model consisting of 3 key elements:

Complacency

Complacency exists where **perceived risks of vaccine-preventable diseases are low**, and vaccination is not deemed necessary. It is influenced by many factors, including other life and/or health responsibilities that may be more important at the time.

Convenience

Convenience is a significant factor when physical **availability, affordability** and willingness to pay, geographical **accessibility**, language and health literacy, and **appeal of immunisation services** affect vaccination uptake.

Confidence

Confidence is defined as **trust in the effectiveness and safety of vaccines**, the system that delivers them.



Exploring the status quo of

VACCINATION IN EUROPE



- The regulatory framework for medicines/vaccines authorisation is set up at EU level, but **vaccination policies, schedules** and legal rules or recommendations are a national competence, and **every EU Member State has its own immunisation plan.**

- The **body of research** relating to patients with chronic diseases **is not extensive.** Although many studies confirmed the safety and effectiveness of vaccination as a tool of prevention of infectious disease for this particularly vulnerable population, the reported immunisation rates are often lower than in the general population.



RECOMMENDATIONS

We call for action to **improve patients' access** to vaccination; provision of **evidence based lay-friendly information** on vaccination for patients; and involvement of patient organisations in shaping policies, programmes, and actions on vaccination at national and European levels.

Policymakers and other stakeholders also need to take into account the following:

01

Robust, evidence-based information that enable people to understand and contextualise the benefits and risks of vaccination should be made available specifically targeted towards patients with chronic conditions.

02

Detailed knowledge is needed to understand the factors contributing to low uptake in specific patient communities, and in different countries, to better address them and tailor actions accordingly.

03

Healthcare professionals should **incorporate routine assessment** of their adult patients' vaccination needs during all clinical encounters to ensure patients receive recommendations for needed vaccines and are either offered needed vaccines or referred for vaccination.

04

Healthcare professionals should be trained on the importance of vaccination and armed with the relevant scientific facts to help them communicate with patients and reinforce a trust relationship.

05

National institutions and authorities should **initiate collaborations** with patient organisations to better understand their communities' needs and to formulate more effective strategies.