Addressing challenges in vaccine acceptance – Countering misinformation

European Centre for Disease Prevention and Control (ECDC)
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COVID-19 vaccine uptake in the EU/EEA

COVID-19 vaccine uptake in the EU/EEA

What challenges are countries reporting in COVID-19 vaccine acceptance in the EU/EEA?

- Varying levels of vaccine refusal across countries (from low to up to 30%)
- Challenges in reaching specific populations: Socially vulnerable (e.g. migrants), elderly, remote areas
- Some countries: Acceptance issues among healthcare providers and staff in LTCFs
- Younger generations less willing to vaccinate
- Misinformation – An ongoing challenge

Countering online misinformation on vaccines – ECDC project overview

• Misinformation and disinformation pose risks to national vaccination efforts, can lead to increase vaccine hesitancy and, in turn, reduce vaccination uptake

• The COVID-19 pandemic has shown how easily misinformation and disinformation spread online and how quickly new narratives can emerge and evolve, affecting prevention and control efforts

Link to the ECDC report, published June 2021: Countering online vaccine misinformation in the EU/EEA (europa.eu)
Countering online misinformation on vaccines – Methods for the ECDC study

Literature review
• Effective ways to address misinformation (vaccination, other topics e.g. climate change)

Country case studies
• Focus on measles, HPV, flu. Included COVID-19 vaccines (not yet available in 2020)
• Included 6 countries: Estonia, France, Germany, Netherlands, Romania, Spain
  • Social media analysis of online vaccine misinformation in each country
  • Interviews with country stakeholders: Strategies, measures, lessons learned

Additional stakeholder interviews
• WHO, academia, European Commission

Focus on misinformation
• Misleading content, establishment of flawed causal links but without intention to harm
Key strategies highlighted in the ECDC report

Vaccine misinformation can lead to increased vaccine hesitancy and reduced vaccination uptake.

For countering vaccine misinformation public health authorities should focus on:

- Monitoring of misinformation on social media
- Correcting misinformation
- Pre-emptive interventions aimed at promoting people’s digital, health and science literacy
- Evaluation of the effectiveness of interventions aimed at countering online vaccine misinformation

Link to the ECDC report: Countering online vaccine misinformation in the EU/EEA (europa.eu)
Key strategies for countering online misinformation on vaccines

1. Monitor misinformation on social media
   • **Understand type of narratives** circulating & **audiences** targeted – Active ‘listening’
   • Requires tools, techniques, human and technical capacities (and financial resources)
   • Caveat: A portion of anti-vaccine and misinformation debates take place in private groups (FB) and through other closed platforms, often with large numbers of highly engaged members
2. Pre-emptive interventions – reduce people’s susceptibility

- Easier to promote ‘fresh’ beliefs than change existing ones
- Needs enhanced digital, health and science literacy – Multi-stakeholder approach
- ‘Inoculation’ as promising practice (demonstrate strategies behind spread of misinformation and fallacies behind). Gamification as a teaching tool.
- Develop ‘resilience’ to vaccine misinformation: To identify it / to assess credibility of sources and content
Key strategies for countering online misinformation on vaccines (cont.)

3. Debunking misinformation

- ‘Post-exposure’ correction with evidence-based counterarguments
- Can be effective for addressing specific myths or misconceptions. But is reactive.
- **Careful approach** to avoid risk of ‘amplifying’ myths
- Core technique: Presenting the misleading claim and explaining the nature of fallacious logic behind a statement
Key strategies for countering online misinformation on vaccines (cont.)

4. Evaluation of effectiveness of interventions

- **Scarce evidence** of effectiveness of strategies for countering vaccine misinformation
- Lack of evaluations, methodological challenges
- **Effectiveness data are needed** to develop more robust evidence base and improve practices
- **Share knowledge between countries**
Concluding remarks
Importance of trusted sources of information – European Vaccination Information Portal (EVIP)

The EU is responsible for ensuring that safe and effective COVID-19 vaccines reach the public in the EU/EEA. The European Commission authorises COVID-19 vaccines, after evaluation by the European Medicines Agency (EMA) and consultation with the EU Member States. The first vaccines were given at the end of 2020.

How COVID-19 vaccines work

COVID-19 vaccines prepare COVID-19 by triggering an immune response. Most COVID-19 vaccines trigger these immune responses to a small fragment of SARS-CoV-2. SARS-CoV-2 is the virus that causes COVID-19 disease.

If a person who has received a COVID-19 vaccine is infected by the virus later on, the immune system recognises the virus. Because it is already prepared to attack the virus, the person's immune system is able to mount a stronger response to COVID-19 disease.

Available in all EU/EEA languages

EVIP: European Vaccination Information Portal / Home page | European Vaccination Information Portal (vaccination-info.eu)
Importance of ‘being present’ in the social media landscape

Examples of ECDC’s presence in social media and materials developed for sharing on the platforms (e.g. visuals, videos)
Importance of HCWs as trusted sources

Flash Eurobarometer: Which of these sources would you trust more to give you reliable information on COVID-19 vaccines?*

This highlights the importance of providing them with training and communication resources to support them in their conversations with patients

* Flash Eurobarometer (EC – Published June 2021 with fieldwork done in May 2021) Eurobarometer (europa.eu)
Thank you for your attention!