

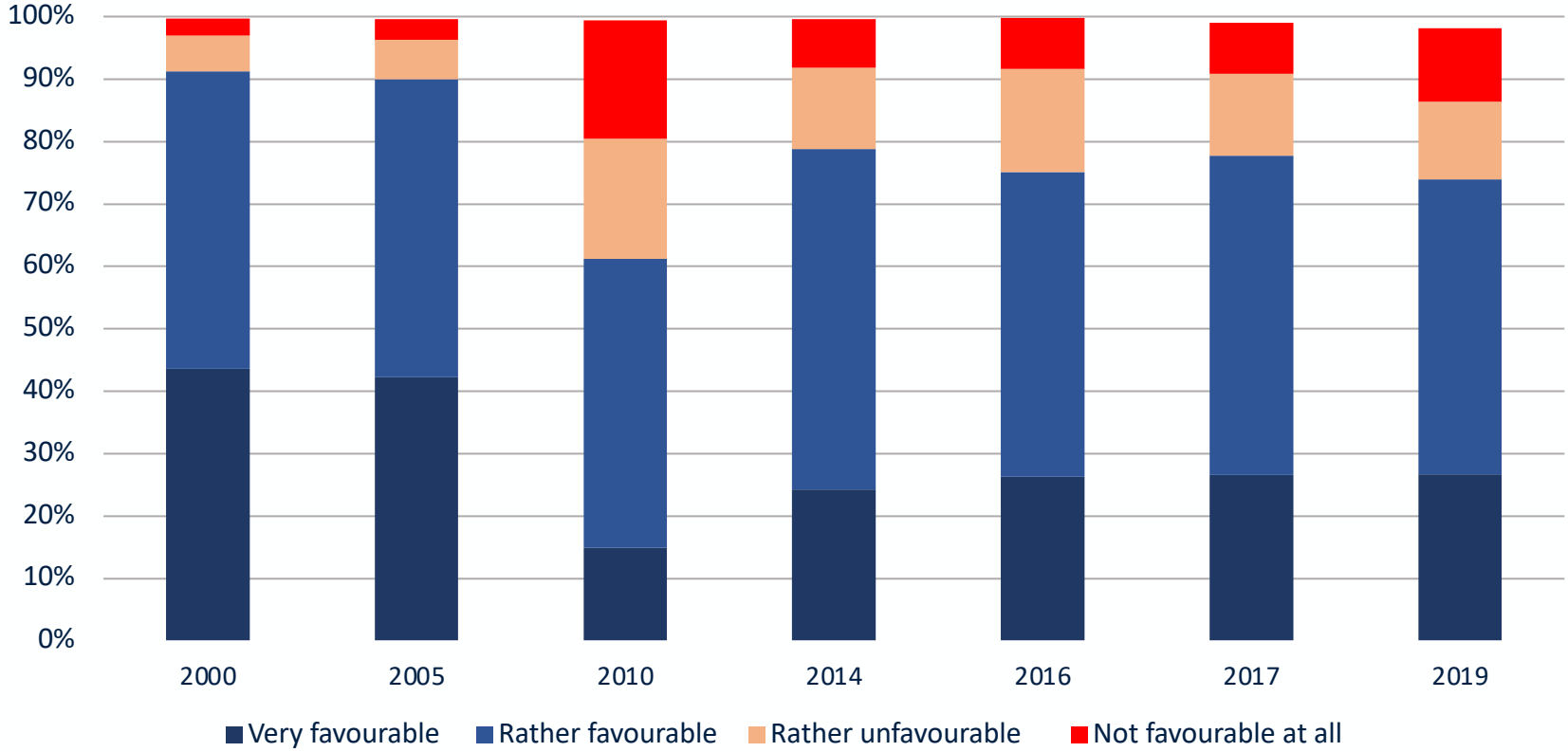
Vaccine acceptance and reluctance: some lessons from the A/H1N1 and COVID-19 pandemics

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A/H1N1 pandemic: strong resurgence of vaccine distrust

Opinions on vaccination in general: evolution from 2000 to 2019 (France, 18-75 years old)



Sources: Baromètres santé (INPES- Santé Publique France) 2000-2019

A/H1N1 pandemic: multiple controversies

- **Strong public concern about the safety of the vaccine prepared in a few months**
- **Perception that this pandemic was not as serious as initially announced**
- **Accusation of conflicts of interest among the government's expert advisors**
- **Vehement criticism of the order of 94 million doses of vaccine by the Minister of Health (July 2009)**
- **Criticism of the A/H1N1 vaccine disseminated on numerous French-language websites (Ward, Vaccine, 2015)**
- **Widespread use of the term anti-vaccine to describe vaccine reluctance as a whole**

Pandemic COVID-19: Vaccination had never been so prominent in the public debate

- **Contradictory statements by politicians and doctors on the efficiency of masks; scandal over the management of their stocks**
- **Strong scientific controversy over the effectiveness of hydroxychloroquine**
- **Criticism of the government for the introduction of exceptional measures (confinements, curfews, etc.) deemed to be liberticidal...**
- **Criticism of the failure to start the vaccination campaign and the relative shortage of vaccines during its first few months**
- **In the end, the vaccination rate close to 90%, but the last 40 percent obtained through coercive measures**

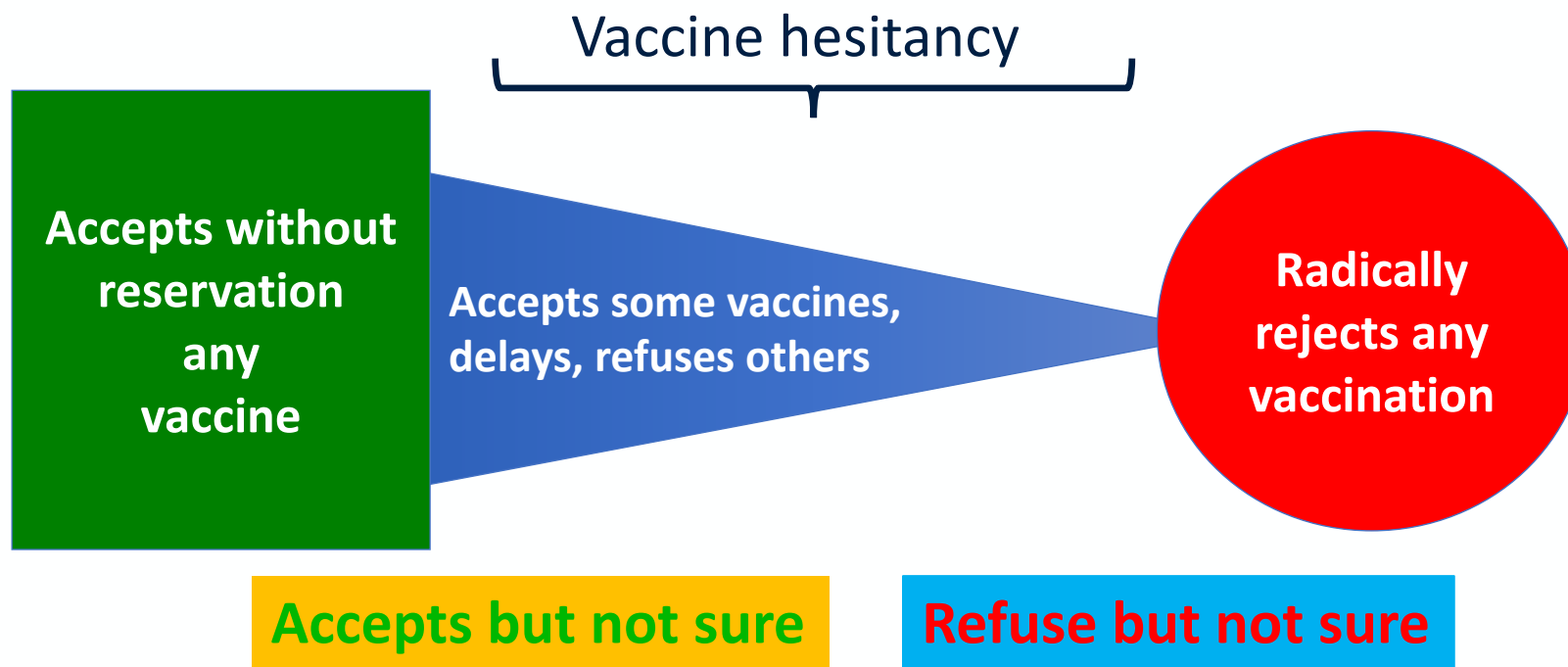
The traditional explicative « deficit » model of vaccine reluctance is now outdated

▪ Fails in part to explain the mechanisms of vaccine reluctance

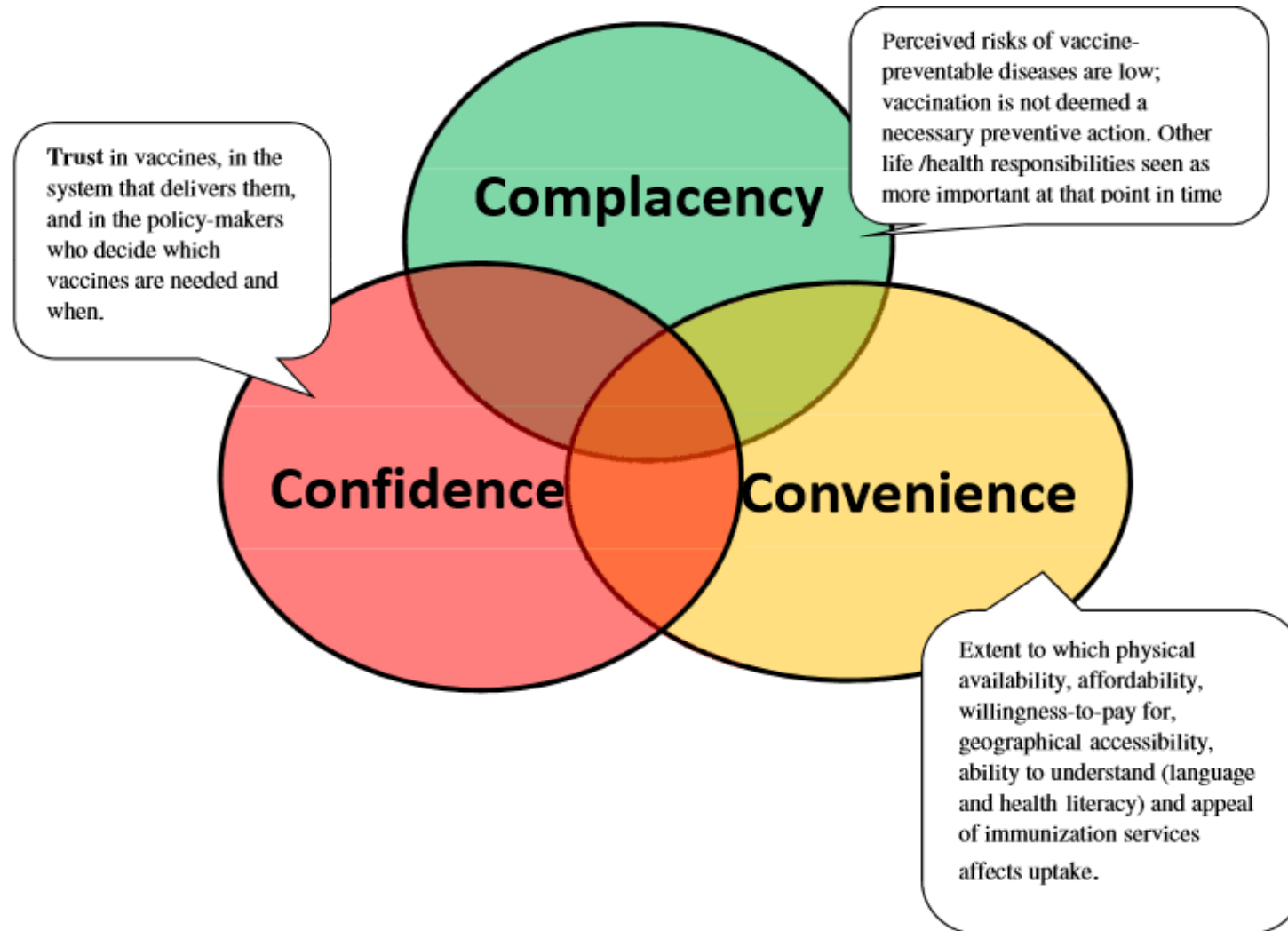
- Inverse social gradient during measles epidemics: reluctance among those in the highest income bracket (Peretti-Watel, SSM , 2014)
- Vaccine doubts present among general practitioners (Verger, Exp Review Vaccines, 2022)
- Failure to take into account the central role of trust in institutions, experts and science in vaccine acceptance
 - ⇒ Vaccine reluctance is not all about knowledge
 - ⇒ It is also about the perceived credibility and probity of those who claim to speak the truth

Vaccine hesitancy: an empirical concept reflecting the various individual attitudes

- « *Vaccine hesitancy refers to delay in acceptance or refusal of vaccines despite availability of vaccine services.* » [Mac Donald, Vaccine, 2015]



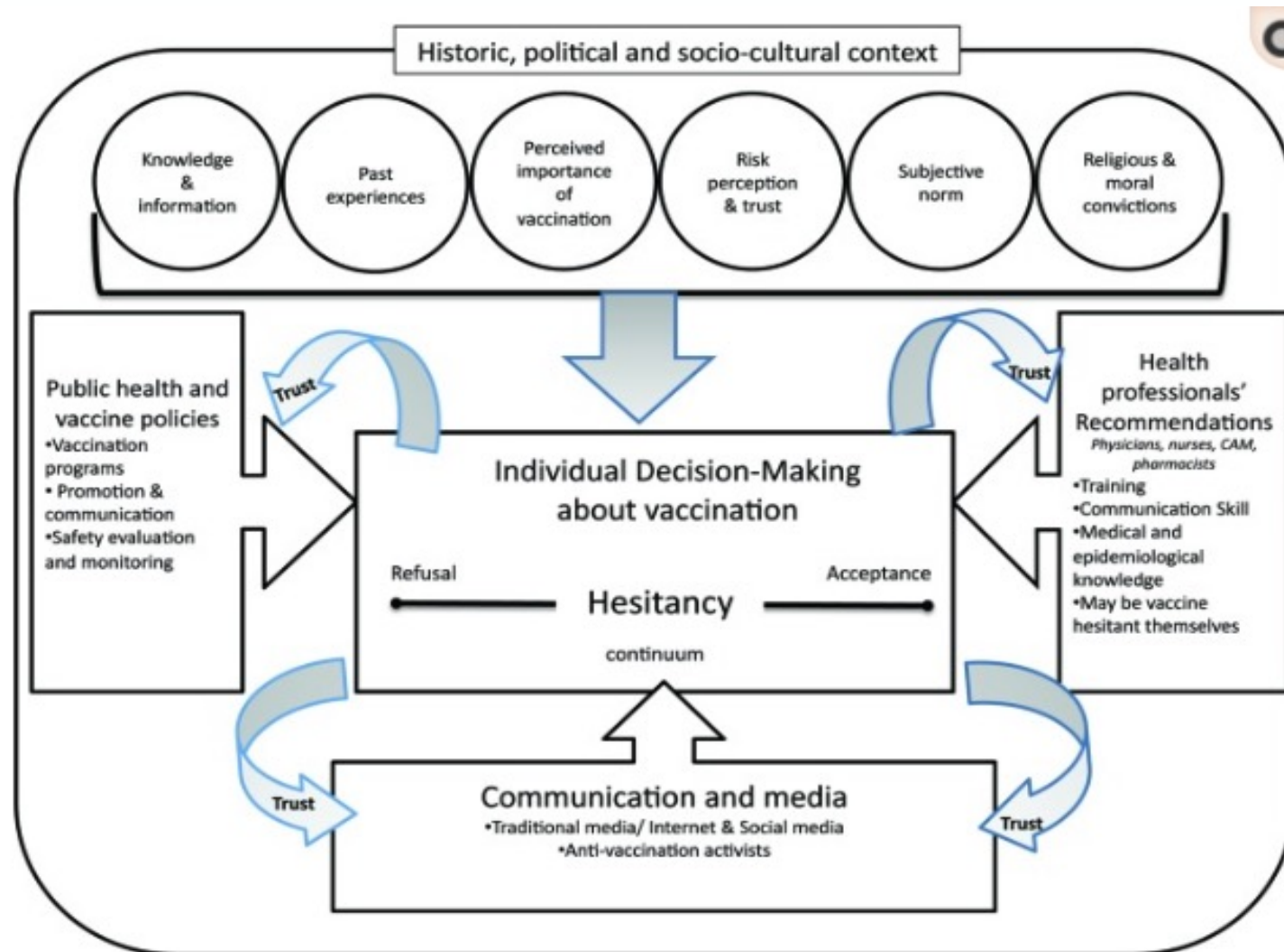
Three pillars of vaccine hesitancy (OMS, SAGE Group, 2015)



Advantages of the concept of vaccine hesitancy

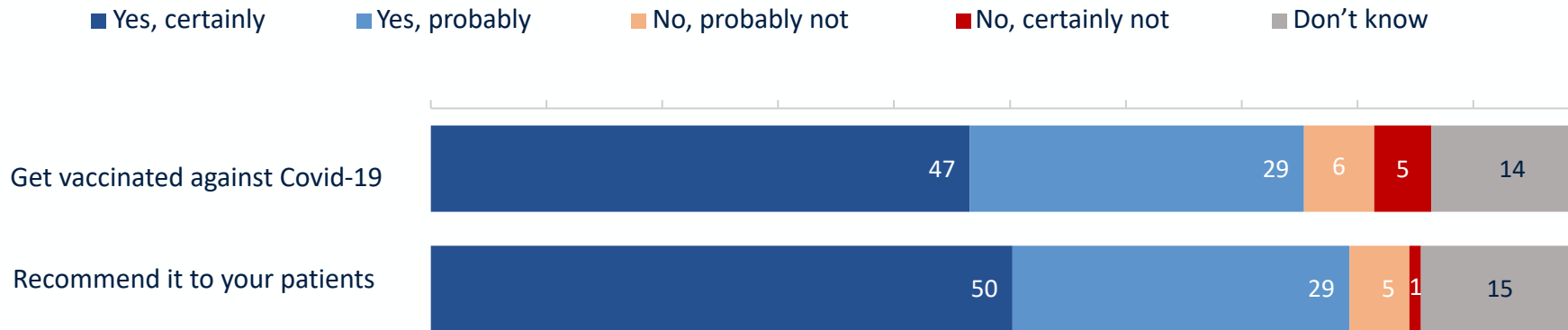
- **Focuses on the individual decision-making process (Peretti-Watel, Plos Curr Outbreaks, 2015)**
 - COVID-19 vaccination campaign: a model case
 - Everybody exposed to much information
 - Public discovery that a vaccine is not 100% effective
 - Complexity of trade-offs (which vaccine, when, booster?)
- **Emphasises that accepting vaccines does not necessarily mean trust in these vaccines**
- **Provides a theoretical framework for investigating its determinants**

A contextual model of vaccine hesitancy determinants (Dubé 2013)



A priori acceptance of Covid-19 vaccines by general practitioners (France, oct-nov 2020)

« If a vaccine against Covid-19 was available, would you be willing to: »



In October-November 2020, only 47% of GPs stated that they would definitely be willing to be vaccinated against Covid-19, if such a vaccine was available (Verger, Eurosurveillance, 2021)

Beyond VH, the COVID vaccination campaign revealed persistent and even worsening access problems

- **For disadvantaged populations, and those in great precariousness (homeless, migrants)**
 - In Marseille, as of 4 September 2022, two-dose vaccination rate:
 - < 60% in the city's poorest districts
 - > 75 % in the richest

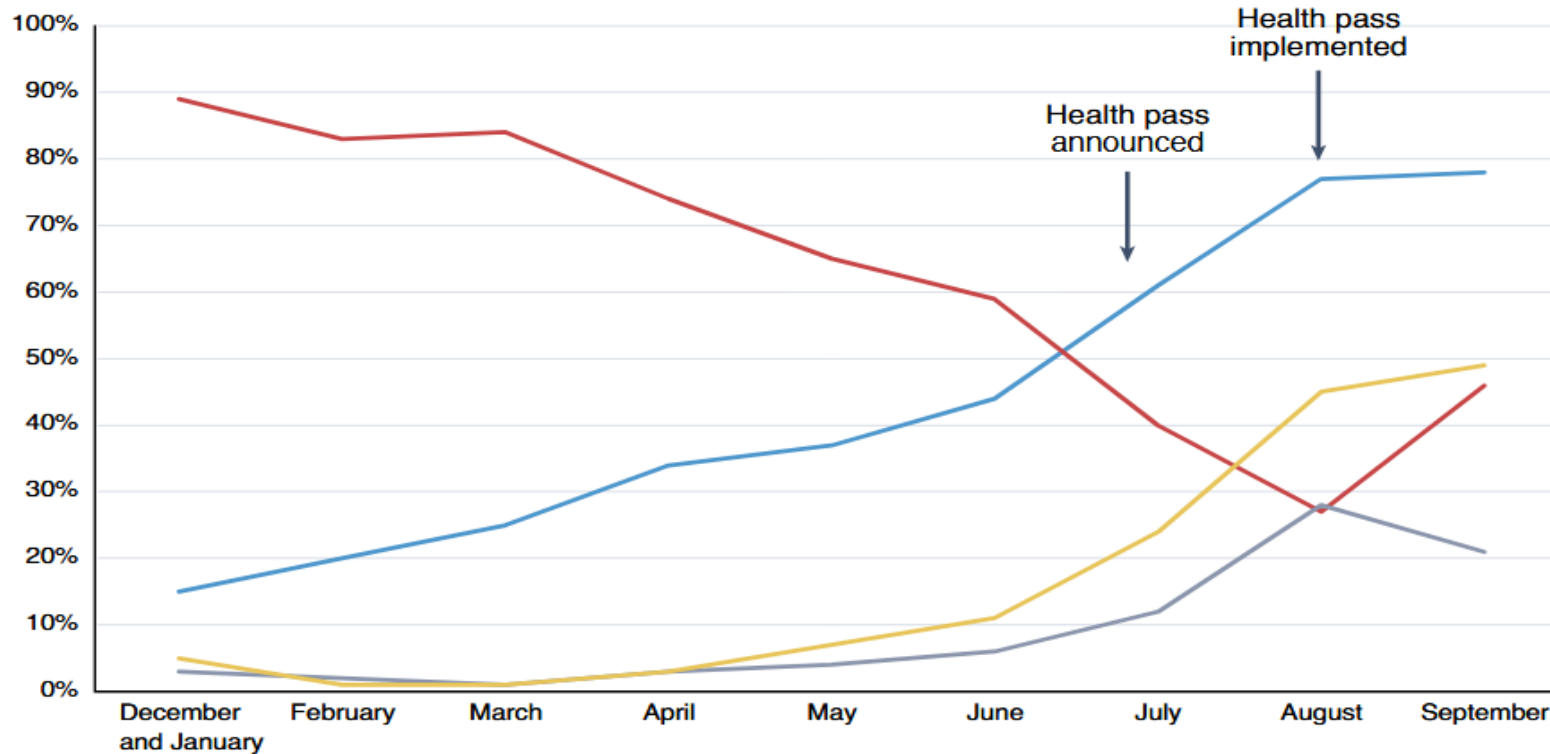
Beyond VH, the COVID vaccination campaign revealed persistent and even new access problems (2)

- linked to social and territorial isolation: rural areas, elderly people
- linked to the dematerialisation of services and in particular the booking of appointments:
 - => Difficulties in "navigating" the vaccination system
 - ⇒ Faced with this, social mediation and outreach strategies have been introduced
 - ⇒ Need +++ to evaluate their effectiveness

The health pass, an effective measure, but with limitations

- **A particularly effective response among young people aged 12 to 24**
- **But it left pockets of under-vaccination more or less important depending on the type of population and the territory**
- **Among those vaccinated late (August-December 2021): significant percentages of people with various forms of reactance (Slavaco project, 2022), including hostility to booster shots**

From doubt to anger...



- 'Some' or 'a lot' of doubts or reticence at the time of vaccination
- Agreed with the statement: "I am relieved since I have been vaccinated"
- Agreed with the statement: "I regret having been vaccinated"
- Agreed with the statement "I am angry to have had to be vaccinated"

Project SLAVACO, n=1,619 adults with at least one dose, October 2021, Référence.
Ward, Nature Med, 2022

The health pass, an effective measure, but with limitations (2)

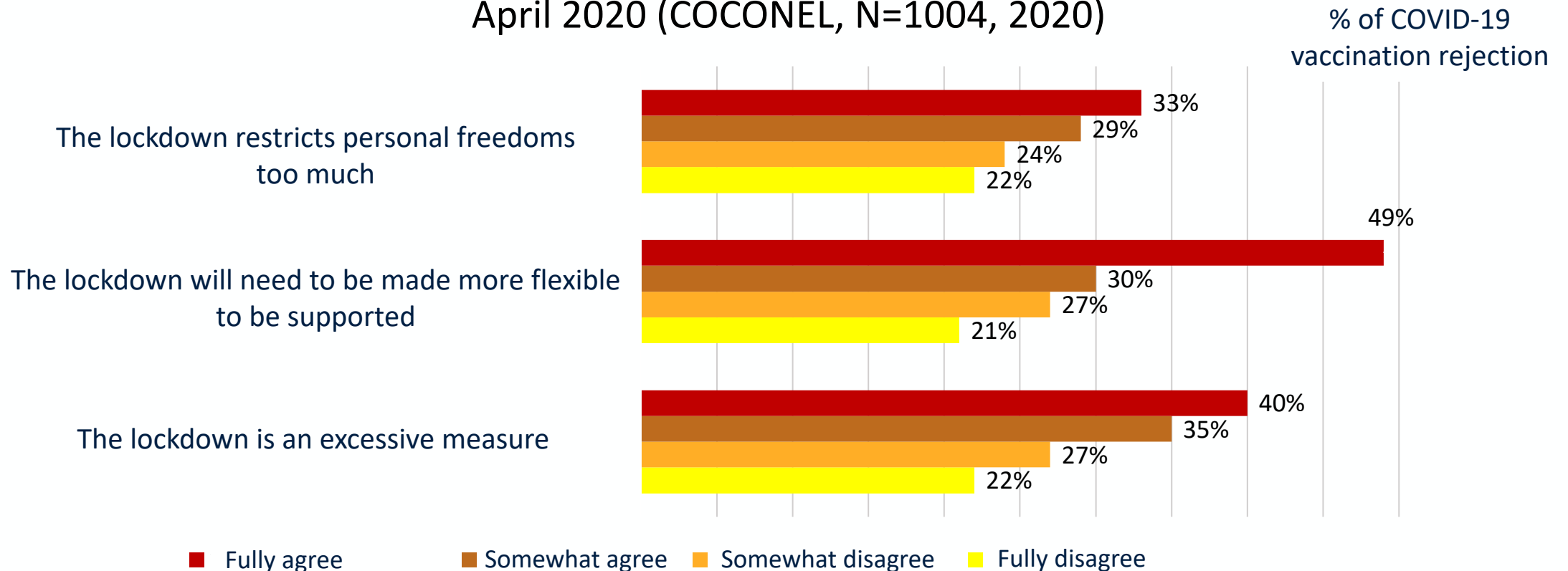
- **Protest movements, admittedly a minority in France, but the largest demonstrations against vaccination ever seen in France**
- **Movements that were even more present and active in the overseas territories**
- **This raises the question of the medium and long-term impact on the attitudes and vaccination behaviour of these populations (COVID-19 vaccines, other vaccines)**

A growing and unprecedented politicisation of vaccine issues

- **Vaccination has become a political issue for governments in times of crisis, but also in times of peace (2016 French vaccination debate)**
- **People's partisan orientation has become a determinant of their vaccine attitudes**
- **Vaccine rejection among the general population: a means of expressing dissatisfaction, either generated by the management of the COVID crisis or pre-existing but exacerbated by the crisis**

Rejection of COVID-19 vaccination: an expression of discontent

Opinions towards lockdown & rejection of COVID-19 vaccination
April 2020 (COCONEL, N=1004, 2020)



What is needed to better prepare for new epidemics and improve the peace-time situation?

- **Evaluate public policies on immunisation**
- **Support vaccination policies with evidence-based educational strategies**
- **Develop tailored (context-specific) & personalised approaches**
- **Improve access to immunization for socially vulnerable populations**
- **Better acculturate politicians/decision-makers/experts to the ethics of communication on vaccine/health issues**

Responses: intervention research to improve vaccine coverage and reduce vaccine hesitancy

- **Growing internationally (Andreas 2022, Cochrane Review on COVID-19: 96 studies, including 1 in France)**
- **The majority conducted in English-speaking countries**
- **Main focus on communication strategies & digital interventions to improve uptake of Covid-19 vaccines**
- **Diverse populations: health professionals, students, ethnic minorities in the US, at-risk patients, general population**
- **Research gaps: policy interventions, improving access to vaccines, interventions for children and adolescents**
- **The ANRS-MIE has set up a working group to define a roadmap in this field in France**

Some resources

- **The COVID-19 vaccination communication handbook**
 - translated into 12 languages
 - How to discuss COVID-19 misinformation
 - <https://sks.to/c19vax>
- **The www.jitsuvax.info website (EU-funded JITSUVAX Project)**
 - Developed for HCPs in particular
 - Psychological tools to address flaws in vaccine contrarian arguments
 - Consider attitudinal roots of the opposition to vaccines
 - Provide hand-on examples of how to affirm patients and correct their misconceptions with empathy