



# European Medical Students' Association

Association Européenne des Étudiants en Médecine

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This policy was adopted by the 30th EMSA Spring Assembly held online on the 3rd of October of 2020.  
Must be reconsidered until: 3rd of October of 2024.

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## Vaccine Hesitancy

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*The European Medical Students' Association (EMSA) represents medical students across Europe. We envision a healthy and solidary Europe in which medical students actively promote health. EMSA empowers medical students to advocate health in all policies, excellence in medical research, interprofessional healthcare education and the protection of human rights across Europe.*

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## **Problem Statement**

Vaccines have been effective and affordable in the prevention of the spread throughout the history of communicable diseases. Yet, a sizable group of people refuse or hesitate to accept vaccination and threaten the wellbeing of society at large. The World Health Organization (WHO) defines vaccine hesitancy as a “delay in acceptance or refusal of vaccines despite the availability of vaccination services” (Macdonald, 2015). According to The Lancet Child & Adolescent Health (2019), vaccine hesitancy has been reported in more than 90% of countries around the globe.

Vaccine hesitancy includes several factors such as the safety of the vaccine, beliefs that vaccines do not work, lack of information and low risk of contracting VPDs (vaccine-preventable diseases), which makes the issue even more complex (ECDC, 2020; Karafillakis, 2017). The variety of factors associated with vaccine hesitancy do not allow health professionals to have an exact classification of the real influence behind the problem, as they are affected by contextual factors such as time, place and vaccines (Smith, 2015; Larson et al., 2014).

The anti-vaccination movement has a long history, dating back to the 19th century when there was opposition against the compulsory smallpox inoculation (WHO, 2017). The arguments against vaccination have not changed since the early days, however, anti-vaccination supporters now have the opportunity of reaching large audiences through digital and social media (WHO, 2017). The anti-vax movement’s strong social media presence and subsequent spread of such beliefs created a whole new challenge for public health authorities; having to combat waves of misinformation and disinformation on top of their ongoing fight to prevent and curb the spread of communicable diseases (WHO, 2017). According to an article by WHO, simply correcting myths of misinformation is not enough; a multipronged approach including building confidence and educating the public and showing them how to process the myths have been shown to be the most effective (WHO, 2017).

Vaccine-hesitant parents are generally more likely to seek out questionable information than vaccine-compliant parents (The Lancet Child & Adolescent Health, 2019). In addition, they are prone to believe unverified reports of adverse effects of vaccination and unrealistically alarming information promoted by the anti-vaccination movement (The Lancet Child & Adolescent Health, 2019). Although most hesitant parents are not against scientific evidence, the counter-arguments presented by anti-vaccination supporters convince such parents through scaremongering techniques despite their claims being unfounded (WHO, 2017). Widespread misinformation and misconceptions are hence a major driving force behind deferral or deficiency of childhood vaccination.

## **Our View. Aim.**

EMSA recognizes vaccine hesitancy as a pressing public health issue nowadays which has increased in relevance in the past decades and has become especially apparent in the COVID-19 pandemic. Hence EMSA has taken several approaches to tackle this problem such as organizing sessions and webinars to inform its members. Concurrently, EMSA is a full member of the Coalition for Vaccination which was convened by the European Commission in 2019 and is part of the European Joint Action on Vaccination (EU JAV).

Our aim is to have widely accessible and understandable information about vaccines and raise awareness in the general population and among (future) healthcare professionals. Moreover, safety concerns need to be properly addressed by recognized institutions, and transparency needs to be guaranteed. Lastly, we feel that access to vaccines must be ensured in order to fully address this topic from a public health standpoint.

## **Recommendations**

EMSA calls upon the European Institutions to:

- Build an online platform with information for European citizens and specifically for (future) healthcare professionals to tackle vaccine hesitancy. On a European level, future EMSA boards are encouraged to be involved in the development of such a platform especially within the context of it being led by the Coalition for Vaccination.
- Ensure equitable vaccination access to all, which is especially relevant in the context of COVID-19. Once available, we appeal that the COVID-19 vaccine is made available for free for all.
- Create an EU-wide digital vaccination card that would help to level the playing field for European citizens by laying down the basic vaccination requirements for all to live a healthy life and to protect their community. Such an initiative would also streamline healthcare systems across Europe, raising standards to a point where all healthcare systems are comparable when it comes to vaccination. The end goal of such a vaccination card being to facilitate the movement of people and information throughout the Member States.

EMSA calls upon national medical organizations to:

- Include vaccine hesitancy and approaches to tackle it in the medical curriculum
- Fight the spread of misinformation and disinformation in the COVID-19 context. It is now more important than ever before that people feel confident in the vaccine/s being produced and that vaccine uptake is very high (85-95% going off data from other vaccine preventable diseases) in order to ensure that through herd immunity we can protect vulnerable members of society.

EMSA commits itself to:

- Organise capacity building activities to give future health professionals, especially future doctors, the knowledge and skills to take action on the organisational and individual level.
- Create an advocacy platform to engage students on European level in the fight against vaccine hesitancy.
- Making vaccine safety and efficacy a priority when it comes to their community outreach programmes. This would mutually benefit medical students who would receive training on this topic that goes above and beyond what is in the formal curriculum and the community which would be receiving reliable and scientifically sound information.

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