

Home > Questions and answers: European Immunization Week (EIW)

Country

Europe WHO Region [1] Target <u>Citizens [2]</u> <u>Decision Makers [3]</u> <u>Government and Public Health [4]</u> <u>Healthcare Professionals [5]</u> Topic <u>Human Rights [6]</u> <u>Stakeholders [7]</u> <u>Vaccination [8]</u> Tags <u>Vaccines [9]</u> <u>public health [10]</u> <u>engagement [11]</u>

Catharina de Kat, Communications, Web and Information Officer Vaccine-preventable Diseases and Immunization

WHO Regional Office for Europe Email:<u>reynendekatc@who.int</u>12]

#### Description of the initiative[13]

### Q1: How did this initiative start? What were the needs it addressed?

A: Immunization has led to a remarkable decline in suffering and death around the world. However in the early 2000s immunization coverage rates across the European Region were stagnating or in some cases even falling, in part due to the spread of misinformation about vaccines, including a supposed link between MMR and autism asserted in 1998 but later proven to be incorrect.

Countries across the Region recognized an increasing need to provide accurate, balanced and understandable information about the risks of diseases and the benefits of vaccination.

Member States of the WHO European Region expressed the need for a joint framework to boost awareness and strengthen their immunization systems, and in 2005 agreed on a resolution urging all European Region countries ?to support, where appropriate, the implementation of an immunization week within the Region for advocacy to promote immunization? (WHO Regional Committee resolution EUR/RC55/R7).

The first European Immunization Week (EIW) was launched as a pilot in October 2005, with nine Member States participating: Belarus, Belgium, Hungary, Ireland, Italy, Russian Federation, Serbia, Tajikistan and the former Yugoslav Republic of Macedonia. Following the pilot, the next steps and lessons learnt were discussed at a meeting in Copenhagen with participation of 19 Member States.

Since 2007, EIW has taken place each year in April, and included a large number of activities aimed at reaching out to target groups through advocacy, communications and supplementary immunization.

### Q2: Can you describe how civil society was included in your project?

A: EIW is a WHO-led initiative that is open and welcoming to all. At country level the event is embraced by a wide range of stakeholders including universities, community leaders, media, organizations of parents, patients and health professionals, parliaments, international agencies and local health facilities. The WHO Regional and country offices work with international partners (such as UNICEF, ECDC and Rotary International), ministries of health and public health institutes to help coordinate the campaign and provide support where needed.

A prominent example of civil society involvement in the 2017 EIW included highprofile activities organized by ?Parents for Vaccination? in Ukraine.

See for example:

- <u>http://www.euro.who.int/en/media-</u> centre/events/events/2017/04/europeani... [14]
- <u>http://www.euro.who.int/en/health-</u> topics/disease-prevention/vaccines-andimmunization/publications/2017/highlightsof-european-immunization-week-2017narrative-report [15]

# Q3: Why do you think it was important to include civil society in your project?

A: Protecting people of all ages from vaccinepreventable diseases concerns everyone, and can only be accomplished with everyone on board. Every context is different, but we know that trust -- in vaccines and in the people and institutions that provide them - is a key factor for sustaining high immunization rates. EIW provides the opportunity for all stakeholders to stand aligned in promoting this important public health message and ensure that messages about the safety and importance of vaccines are reaching key target audiences.

# Q4: What was found to influence the attitudes / beliefs of the population towards vaccination?

A: While every context is different, we know that to ensure public trust in vaccines and health authorities, as well as resilience to vaccine safety scares, ongoing communications are needed to build awareness of the benefits of immunization and risks of diseases. This involves listening to and responding to the concerns of parents, addressing misperceptions and shaping messages to fit the target audiences. It also involves ensuring convenient service provision in an environment and with a health worker that help parents and those being vaccinated feel safe and comforted.

### Q5: What types of activities / campaigns were found to be the most efficient?

A: EIW campaigns are planned based on the context and challenges in each country. Over the years we have seen EIW campaigns making use of radio, television, social media, sports events, school classrooms, university lectures, parliamentary discussions, flash mobs, outreach to health professionals and much more to spread targeted messages. In some cases, the aim is simply to educate, while at other times it is to reach vulnerable subgroups with supplemental immunization activities or to introduce a new appointment system or clinic opening hours. Although organized under the same umbrella, every national EIW campaign is unique, requiring its own set of activities and assessments.

### Q6: Was there an evaluation of the project conducted? If yes, what were the results?

A: Each country assesses its activity and involvement in its own way, based on the context and aims. Direct impact on uptake over a longer period is difficult to measure, but certainly the number of people who are reached by the messages being communicated can serve as a proxy for positive impact. Recently Austria confirmed the impact of their campaign by measuring increased uptake of immunization services during the week of EIW, when expanded clinic opening hours were being tested (See: https://www.ncbi.nlm.nih.gov/pubmed/28797728 [16]).

## Q7: How does the implementation of the project across European countries differ?

A: The 53 Member States of the WHO European Region are highly diverse in terms of their history, cultures, traditions, languages, income, health systems and service provision. This is reflected in the many ways EIW is used to reach the general public or specific target groups. In 2017 alone, hundreds of activities were reported by 30 countries across the Region in addition to development of information materials, press coverage and social media campaigns. These varied from banners on public buses in Kazakhstan to letters to paediatricians in Switzerland; and from a review of children?s immunization records in Malta to a national scientific conference on life-long vaccination in Poland. More examples of the many activities reported is available on the Immunize Europe Forum: ( http://www.immunizeeurope.org/calendar/event/71-europeanimmunization-week-2017/[17]), where countries can showcase the work they are doing during EIW and throughout the year to increase awareness and immunization coverage.

#### **Newsletters**

Select the newsletter(s) to which you want to subscribe or unsubscribe.

News from Asset project Responsible Research and Innovation Newsletter Asset PPRB

E-mail \*

#### Contacts

Facebook

Twitter

<u>YouTube</u>

<u>LinkedIn</u>

#### Contacts

General inquiries: info@asset-scienceinsociety.eu

#### ASSET

Action plan on Science in Society related issues in Epidemics and Total pandemics European Commission

This project has received funding from the European Union?s Seventh Framework Programme for research, technological development and demonstration under grant agreement no 612236.

**Source URL:** http://www.asset-scienceinsociety.eu/outputs/best-practice-platform/questions-and-answerseuropean-immunization-week-eiw

#### Links

[1] http://www.asset-scienceinsociety.eu/database-country/europe-who-region

[2] http://www.asset-scienceinsociety.eu/target/citizens

[3] http://www.asset-scienceinsociety.eu/target/decision-makers

[4] http://www.asset-scienceinsociety.eu/target/government-and-public-health

[5] http://www.asset-scienceinsociety.eu/target/healthcare-professionals

[6] http://www.asset-scienceinsociety.eu/topic/human-rights

[7] http://www.asset-scienceinsociety.eu/topic/stakeholders

[8] http://www.asset-scienceinsociety.eu/topic/vaccination

[9] http://www.asset-scienceinsociety.eu/tags/vaccines

[10] http://www.asset-scienceinsociety.eu/tags/public-health

[11] http://www.asset-scienceinsociety.eu/tags/engagement

[12] mailto:reynendekatc@who.int

[13] http://www.asset-scienceinsociety.eu/outputs/best-practice-platform/european-immunization-week

[14] http://www.euro.who.int/en/media-centre/events/events/2017/04/european-immunization-week-

2017/news/news/2017/05/ngos-join-efforts-to-increase-immunization-coverage-in-ukraine

[15] http://www.euro.who.int/en/health-topics/disease-prevention/vaccines-and-

immunization/publications/2017/highlights-of-european-immunization-week-2017-narrative-report [16] https://www.ncbi.nlm.nih.gov/pubmed/28797728

[17] http://www.immunize-europe.org/calendar/event/71-european-immunization-week-2017/