

Experts propose 'five Cs' to tackle vaccine hesitancy

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The reluctance or refusal to accept COVID-19 vaccinations can be tackled by a five-pronged strategy to addressing the behavioral and socio-demographic factors behind vaccine hesitancy. Writing in the *Journal of*

the Royal Society of Medicine, a group of population health, demographic, epidemiology and behavioral scientists propose an approach focused on confidence, complacency, convenience, communication and context.

While confidence in the safety and efficacy of vaccines is crucial, they write, complacency, particularly among younger people and those of lower [socioeconomic status](#), is strongly associated with lower vaccine uptake.

One of the authors, Dr. Mohammad Razai, of the Population Health Research Institute, St George's, University of London said: "As the lower age groups are being offered the vaccine, addressing complacency through repeated risk communication is crucial to facilitate informed decision-making. It is important to emphasize the greater societal benefits of population level immunity and the protection it offers to those vulnerable, their families and friends."

The strategy also covers convenience of vaccination delivery, communication to combat misinformation, and recognition of context including ethnicity, religion, occupation and socioeconomic status.

Another author, Professor Melinda Mills, Nuffield Professor of Demography and Director of the Leverhulme Centre for Demographic Science at Nuffield College and the University of Oxford, said: "A concerted international effort is required to understand, analyze and overcome vaccine hesitancy. It is estimated that at least 60-70% of the world's population needs to be vaccinated to achieve an effective herd immunity. However, European data show lower intention to be vaccinated amongst racial and ethnic minorities, those with lower education, [younger people](#) and people with previously poor compliance with recommended vaccinations. COVID-19 has exacerbated inequalities related to ethnicity and socioeconomic status and higher

vaccine hesitancy in these groups could compound it even further."

The authors conclude that tailored, appealing, culturally competent, [local community](#) but also multi-lingual messages delivered by organisations such as the Red Cross, Red Crescent and UNICEF could have the highest chance of success in addressing [vaccine hesitancy](#).

More information: Mohammad S Razai et al, COVID-19 vaccine hesitancy: the five Cs to tackle behavioural and sociodemographic factors, *Journal of the Royal Society of Medicine* (2021). [DOI: 10.1177/01410768211018951](#)

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