

European active citizens for vaccination:  
focus on Spain (2019 - 2020)



# GRUPO DE TRABAJO: LA VACUNACIÓN A LO LARGO DE TODA LA VIDA



Asociación Española  
contra la Meningitis



The project is realized thanks to the support of





## Index

1. About us .....	2
2. Our commitment on Vaccination.....	3
3. Project description “European Active Citizens for Vaccination” .....	5
The key role of the life-course approach in vaccination policy .....	7
4. Methodology applied in the Civic Consultations (Focus Group).....	8
5. Main Results in Spain.....	11
6. Elements emerged from the debate .....	15
7. The ACN’ contribution on previous publications on the topic .....	19
8. Acknowledgments .....	21
9. Authors.....	21
10. Web references .....	21

## 1. About us

Cittadinanzattiva APS has more than 40 years of experience in protecting citizens' rights in the health sector, which initiated with its Tribunale per i diritti del malato<sup>1</sup> ("Tribunal for Patients' Rights" or TDM) in 1980 and was later strengthened through the Coordinamento nazionale Associazioni Malati Cronici<sup>2</sup> (National Coordination Centre of Chronic Patients' Associations) in 1996.

Cittadinanzattiva promotes protection against violations of the right of individual citizens through its free-of-charge counselling, information and support service provided by 300 TDM offices located nationwide. Each year in Italy, we collect an average of 25,000 among complaints and requests of information from patients and citizens and thanks to them, we present different Annual Reports to the Ministry of Health and relevant healthcare stakeholders, providing them a civic point of view about the daily relationship between the National Health System and Italian citizens and describing the state of the art of the access to health services in the different Italian regions.

Starting from 2001, through its EU branch, Active Citizenship Network (ACN)<sup>3</sup>, Cittadinanzattiva has been promoting civic participation and rights' protection, also at European level, gathering almost 200 civic and patients' organizations all over the Continent.

**Active Citizenship Network (ACN)** is a flexible network of European civil society organizations that participate as partners in different projects, aimed at encouraging the active participation of citizens in the European policies. ACN mirrors Cittadinanzattiva's policies concerning healthcare, consumer protection, corporate and social responsibility, education and training at international level. ACN's mission is to promote and support the construction of European citizenship as an active citizenship, meaning the exercise of citizens' powers and responsibilities in policymaking. The European Charter of Patients' Rights and promotion of the European Patients' Rights Day are its major initiatives in the field of health.

Over the last 20 years, it has been increasing Cittadinanzattiva - Active Citizenship Network contributions for the promotion and protection of citizens' rights in the fields of vaccination.

---

<sup>1</sup> <https://www.cittadinanzattiva.it/corporate/salute/1843-tribunale-per-i-diritti-del-malato.html>

<sup>2</sup> <https://www.cittadinanzattiva.it/corporate/salute/1845-cname-malati-cronici.html>

<sup>3</sup> [www.activecitizenship.net](http://www.activecitizenship.net)

## 2. Our commitment on Vaccination

Cittadinanzattiva -Active Citizenship Network is deeply committed to contribute to raise awareness about the importance of vaccination in Italy and across Europe<sup>4</sup>: immunization is vital to prevent diseases and protect life.

Our commitment has been appreciated by the European Center for Disease Prevention and Control (ECDC), the Agency of the European Union aimed at strengthening Europe's defense against infectious diseases that, in 2016, has decided to officially include Cittadinanzattiva in the ECDC Technical Advisory Group for Increasing Vaccine Coverage. As members of this Advisory Group we feel a great responsibility to commit ourselves to this issue: we believe that a widespread vaccination culture is necessary, particularly to overcome the idea that we only get vaccinated when we are young and, instead, to shift to a common knowledge linked to a life-course vaccination approach which prevents a series of diseases even during adulthood.

Some example of our activities:

In 2018 *#Rompilatrasmisione* (break the broadcasting), an information campaign on vaccination was held in Italy by Cittadinanzattiva-Tribunal for patients' rights. Its aim was to illustrate citizens the benefits of prophylaxis through correct, scientific and evidence-based information in a more friendly environment of organizations that deliver vaccines across Italy<sup>5</sup>.

On November 16, 2018, an "Open day"<sup>6</sup> took place in 37 cities of eleven Italian regions: Cittadinanzattiva-Tribunal for Patients' Rights local offices opened to give information on vaccines and help citizens to face any critical issues in this area.



Activists and experts met citizens to promote proximity information, distributing useful material and collecting reports in order to offer tools and support to protect themselves.

<sup>4</sup> <http://www.activecitizenship.net/patients-rights/projects/278-the-engagement-of-cittadinanzattiva-on-vaccination.html>

<sup>5</sup> [https://cittadinanzattiva.it/files/progetti/salute/RompiLaTrasmisione\\_WEB\\_\\_12\\_09.pdf](https://cittadinanzattiva.it/files/progetti/salute/RompiLaTrasmisione_WEB__12_09.pdf)

<sup>6</sup> <https://www.cittadinanzattiva.it/primo-piano/salute/11823-16-novembre-primo-open-day-sui-vaccini.html>

A series of training initiatives titled “Vaccinations, rights and duties today: learn to teach and to promote empowerment”<sup>7</sup> were launched by Cittadinanzattiva on the 22<sup>nd</sup> of October 2019. The goal of the initiative was to improve the understanding of vaccination among constituencies and activists.



On the 23<sup>rd</sup> of October 2019, Cittadinanzattiva launched in Italy the second edition of its campaign on vaccination called #Rompilatrasmissione focused on flu vaccination<sup>8</sup>.

On the 28<sup>th</sup> February 2018, ACN realized a public event in the European Parliament, hosted by the MEP David Borrelli in the framework of the MEPs Interest Group “European Patients’ Rights & Cross-Border Healthcare”. The event titled “The challenges of life-course vaccination to enhance public health protection in Europe: a multi-stakeholder approach”<sup>9</sup>—intended to demonstrate what citizens and advocacy groups, in partnership with stakeholders can offer in terms of raise awareness about the phenomenon, enhance the body of knowledge of positive cases and success, and strengthen commitment to this topic.



On the 7<sup>th</sup> November 2018, ACN organized another event at the EU Parliament aimed to build a close collaboration with European institutions and health-stakeholders to determine how we can work together to a more effective civic society engagement in vaccination policies. The event brought together MEPs, the Deputy Director General of DG SANTE, the leader of the Joint Action on Vaccination, experts and of course representatives of civic society very active on the theme of vaccination<sup>10</sup>.



<sup>7</sup><https://www.cittadinanzattiva.it/comunicati/salute/12671-vaccinazioni-diritti-e-doveri-oggi-in-italia-al-via-i-seminari-di-formazione.html>

<sup>8</sup> [https://www.cittadinanzattiva.it/files/progetti/salute/rompilatrasmissione\\_2019\\_DEFINITIVA\\_WEB.pdf](https://www.cittadinanzattiva.it/files/progetti/salute/rompilatrasmissione_2019_DEFINITIVA_WEB.pdf)

<sup>9</sup><http://www.interestgroup.activecitizenship.net/131-the-challenges-of-life-course-vaccination-to-enhance-public-health-protection-in-europe-a-multi-stakeholder-approach.html>

<sup>10</sup><http://www.activecitizenship.net/gallery-home/275-active-citizens-in-europe-advocate-for-vaccination-encouraging-reactions-from-european-institutions.html>

### 3. Project description “European Active Citizens for Vaccination”

In April 2019 ACN launched, during the European immunization week, a new project called “**European Active Citizens for Vaccination**”<sup>11</sup>. The aim was to improve the awareness on the importance of vaccination across Europe: the scientific evidence is clear, vaccination is an essential public health tool and helps to guarantee our fundamental rights as a European citizen. ACN, realized two main actions:

1. **A social media communication campaign** throughout a Video that supports and spread this core message: “Together, as active and aware citizens, we can protect ourselves, become the champion of your future!”, sending a unified, clear and strong message on the importance of vaccination directly from citizens to citizens. Videos were made in all the national languages of the involved countries (Italy, Hungary, Poland, Ireland and Spain) and then produced, shared and customized for each country. Moreover, an informative leaflet in a different language has been produced<sup>12</sup>.



2. **A civic evaluation** of the national immunization plans throughout the realization of three **focus groups** (in Spain, Hungary and Poland) on the specific theme of the life-course immunization approach: thanks to the work and cooperation of our constituency of national citizens' organizations, we brought together around the table leaders of civic and patients association, healthcare professionals, policymakers and other stakeholders involved in each country in the administration of vaccines. The aims was find together proposals

<sup>11</sup> <http://www.activecitizenship.net/patients-rights/projects/294-european-active-citizens-for-vaccination-2019.html>

<sup>12</sup> All the materials are available on [www.activecitizenship.net/patients-rights/projects/294-european-active-citizens-for-vaccination-2019.html](http://www.activecitizenship.net/patients-rights/projects/294-european-active-citizens-for-vaccination-2019.html)

and gather impressions, suggestions, advices and provide institutional and health care stakeholders with: the strengths/weaknesses of national policies and plans about their approach to life-course immunization approach; the common elements or specificities that affect a greater or lower success of this approach. The first countries involved were Hungary, Poland, Spain with the respective associations: Vedem Civilian for Vaccination<sup>13</sup>, Institute of Patients' Rights and Health Education<sup>14</sup>, Foro Español de Pacientes<sup>15</sup> and the Asociación Española contra la Meningitis<sup>16</sup>.



A glimpse of the Spanish focus group.

<sup>13</sup> <https://vedem.hu/>

<sup>14</sup> <http://ippep.pl/>

<sup>15</sup> <https://forodepacientes.org/>

<sup>16</sup> <https://www.contralameningitis.org/la-asociacion/>



For the success of the project, ACN established and managed a Steering Committee, composed of professionals, experts, and representatives of civic and patients' associations to define the messages of the social media communication campaign and the main contents of the civic evaluation. The meeting of the Steering Committee of the project was realized in Brussels at the beginning of July 2019. The members involved were:

George Griffin	Federation of European Academies of Medicine (FEAM)
Professor Alberto Tozzi and Dr. Sara Ciampini	Epidemiologist and Chief Innovation Officer, Bambino Gesù Children's Hospital, Italy. Leader of the Vaccine Safety Net Web Analytics project.
Elena Moya	Confederation of Meningitis Organizations (CoMO)
Dafne Holt and Malcom Taylor	Coalition for Life-course Immunization
Silvia Romeo	ThinkYoung
Gary Finnegan ( <i>Moderator of the discussion and media partner</i> )	Vaccines Today
Mariano Votta, Daniela Quaggia, Alessandro Cossu, Andrea Falzarano	Cittadinanzattiva - Active Citizenship Network

### **The key role of the life-course approach in vaccination policy**

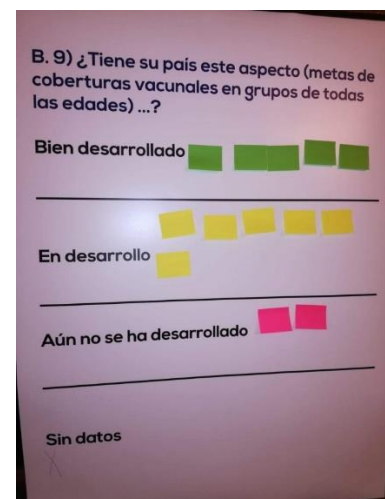
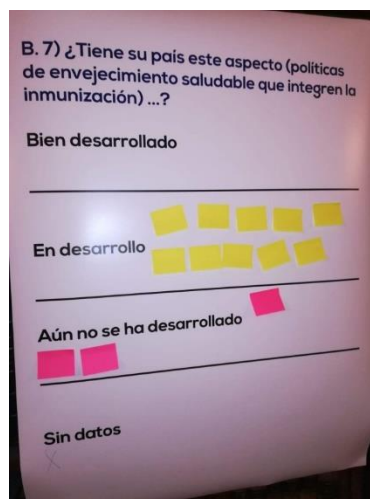
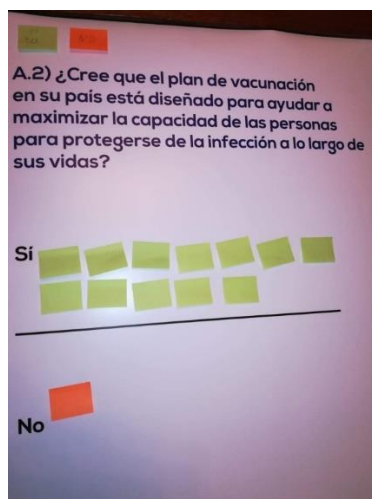
Most vaccination programmes focus on discrete life stages such as childhood, but evidence supports a life-course approach, meaning vaccination given through all phases of life. The life-course approach to immunization recognizes the role of immunization as a strategy to prevent disease and maximize health over one's entire life, regardless of an individual's age. A life-course approach requires that immunization schedules and access to vaccination respond to an individual's stage in life.

A life-course approach has been advocated by the World Health Organization (WHO) as a model of healthcare provision that would benefit both individuals and healthcare systems. It involves looking at health as a continuum through life: a dynamic and interconnected process, as opposed to rigid life stages. It moves away from traditional approaches, where one develops and delivers vaccines in response to immediate threats for discrete age groups. Instead, investments in vaccination strategies should be based on their potential to strengthen individuals' ability to maintain good health over the course of their lives, and their impact on the prevention of other pathogens and comorbidities over time

## 4. Methodology applied in the Civic Consultations (Focus Group)

ACN worked on the creation of a questionnaire (with both closed and open questions) that was handed out to each participant in order to be used as a base of discussion during the focus group on the specific theme of life-course immunization approach in the national immunization plan; to make an exchange of information on how it is organized in that country compared with other countries: to find together proposals, suggestions, advice on that aspect.

Different people were involved, such as: leaders of civic and patient's associations, healthcare professionals, policymakers and other stakeholders implicated in the administration of vaccines. Each focus group was led by a moderator and lasted between one and a half to three hours, depending on the number of participants. The discussions were recorded in order to be better summarized. Each participant was given two sheets with the written questions that the moderator had to ask during the discussion so that they could see them at all times and write down their answers in a completely anonymous way. During the debate they were given post-its of different colours to indicate their answer to the questions in a poster in the middle of the table, from which the moderator got inspiration to guide the next discussion.



The questions were divided into two blocks, A and B: in part A, the more general, all participants were asked to answer how they evaluated the awareness and support for life-course immunization approach in their Country, among different subjects, and how much vaccination plan in their country is designed to help maximize the individuals' ability to protect themselves from infection over the course of their lives.

In part B, the questions regarded five key policy elements that characterize effective life-course immunization strategies (according to the IFPMA Report<sup>17</sup>):

1. Comprehensive immunization program that supports vaccine availability,
2. Public demand for immunization,
3. Engaged healthcare professionals,
4. Multidisciplinary and cross-sectoral coordination,
5. Robust data informing policies and programs.

---

<sup>17</sup> [https://www.ifpma.org/wp-content/uploads/2019/08/IFPMA\\_HPP\\_Life\\_Course\\_Immunization\\_Full\\_Report.pdf](https://www.ifpma.org/wp-content/uploads/2019/08/IFPMA_HPP_Life_Course_Immunization_Full_Report.pdf)



Image from IFPMA report

## 5. Main Results in Spain

The Spanish Focus Group took place in Madrid at the Royal Academy of Medicine, on the 26<sup>th</sup> November 2019. The meeting was organized by the Spanish Association against Meningitis (AEM) with the collaboration of the Spanish Patients' Forum (FEP).

The participants were:

<b>Elena Moya Pendería</b>	Vice-president of AEM
<b>Dr. Jose Luis Baquero</b>	Director and scientific coordinator of FEP
<b>Dr. Pilar Campos Esteban</b>	General Directorate of Public Health of the MSCBS
<b>Dr. Aurora Limia Sánchez</b>	General Directorate of Public Health of the MSCBS
<b>Dr. Angel Gil de Miguel</b>	Royal Academy of Medicine and Professor of Preventive Medicine at the King Juan Carlos University of Madrid
<b>Dr. Mariló Las Heras Carbajo</b>	Ministry of Health of the Community of Madrid
<b>Dr. Carlos Mateos</b>	director of ComSalud
<b>Dr. Jesús Ruiz Contreras</b>	Preventive Medicine Service of the Doce de Octubre Hospital
<b>Dr. Isabel Jimeno Sanz</b>	Madrid Health Service, SERMAS
<b>Inmaculada Cuesta Esteve</b>	National Vaccine and Nursing Association, ANENVAC
<b>Santiago García Blanco</b>	Health Council of Cantabria
<b>Alejandro Cremades</b>	Community Nursing Association
<b>David Cantarero</b>	Economy and Health, University of Cantabria
<b>Javier Moreno Alemán</b>	Legal expert in Health, LEXMOR
<b>Mariano Votta</b>	Active Citizenship Network

The participants answered a question (**A.1**) regarding their perception of the **awareness and support on life-course immunization approach among citizens**, with a prevalence of *acceptable*. 😞<sup>18</sup>

<i>Very Good</i>	<i>Good</i>	<i>Acceptable</i>	<i>Poor</i>	<i>Very Poor</i>
1	0	7	5	1

<sup>18</sup> We inserted an emoticon next to each answer as a visual summary of the main result, ed.

About **awareness and support among health professionals (question A.2)**, most of the answers were *acceptable*. 😞

<i>Very Good</i>	<i>Good</i>	<i>Acceptable</i>	<i>Poor</i>	<i>Very Poor</i>
1	4	6	3	0

Concerning **awareness and support among health authorities (question A.3)**, most of the participants think it is *good*. 😊

<i>Very Good</i>	<i>Good</i>	<i>Acceptable</i>	<i>Poor</i>	<i>Very Poor</i>
1	9	3	1	0

For what concerns **policy maker's awareness and support (question A.4)**, utmost considers it as *acceptable*. 😞

<i>Very Good</i>	<i>Good</i>	<i>Acceptable</i>	<i>Poor</i>	<i>Very Poor</i>
0	3	7	4	0

Finally, participants believe that **awareness and support among civic and patients' associations (question A.5)**, is *good*. 😊

<i>Very Good</i>	<i>Good</i>	<i>Acceptable</i>	<i>Poor</i>	<i>Very Poor</i>
1	6	5	1	0

Regarding **the vaccinations plan and its capacity to maximize the individuals' ability to protect themselves from infection over the course of their lives (question A.6)**, all participants except one believe that it is well designed. 😊

<b>YES</b>	<b>NO</b>
12	1

The fourteen participants then discussed the second part of the questionnaire.

Answering about how the development of an **immunization schedule that covers whole life course** is in their country (**question B.1**), participants split in half answering *well developed*

and *in development*. 😊 & 😐

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
7	7	0	0

Concerning the existence of recommendations **in the national immunisation programme for patients with specific chronic conditions (question B.2)**, most participants answered *well*

*developed*. 😊

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
10	4	0	0

Participants also believe that **awareness campaigns encouraging vaccine uptake across the life course** in their country (**question B.3**), are *in development*. 😐

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
2	11	1	0

About the involvement of **Active Civil society organizations in vaccine promotion (question B.4)**, most of the participants answered that it is *in development*. 😐

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
1	9	4	0

On the aspect of **health care professionals' education and training about benefits of immunization across the life course (question B.5)**, nearly all participants answered that it is *in development*. 😞

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
2	12	0	0

Talking about the support activated to facilitate **Health Care professionals to be vaccinated (question B.6)** most of the participants answered this option is *in development*. 😞

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
3	9	2	0

For what concerns **immunization integrated into healthy ageing policies (question B.7)** (national health and ageing policies that recognize immunization as an important strategy to achieve their aims), most participants answered it is *in development*. 😞

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
0	10	3	0

On **vaccine delivery in non-clinical settings (question B.8)**, participants answered both it is *in development* and *not yet developed*. 😞 & 😞

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
3	5	5	0

About the existence of a definition of **coverage targets for vaccines in all groups across the life course (question B.9)** to evaluate immunization program effectiveness and, determine whether new initiatives are required in Spain, participants answered with a prevalence of *in development*. 😞



<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
5	6	2	0

Regarding the last question on **timely and accurate data on vaccine uptake (question B.10)**

most participants answered it is *in development*. 😞

<i>Well Developed</i>	<i>In development</i>	<i>Not yet developed</i>	<i>No Answer</i>
4	9	1	0

## 6. Elements emerged from the debate

- Vaccine schedule in Spain.

As endorsed by specialized Spanish and international forums, child vaccination is a success in our country with a coverage above 95%, thanks to the complete schedule and its coverage, as well as the action of both government and health professionals. Another successful vaccination in the country is the one against pertussis in pregnant women. Actors involved were the health authorities, gynecologists, midwives and pediatricians. However, from adolescence and into adulthood, vaccination rates are lower. In any case, both in childhood, adolescence and adulthood, there are possibilities for improvement.

- Equality of the vaccination schedule in Spain in the different Autonomous Communities. Because of the autonomous communities' system, inequality is something that seems inevitable. The vaccination schedule proposed by the MSCBS to the Interterritorial Council is well-planned and based on evidence. Except for a few epidemiological reasons, it is usual for differences between the Autonomous Regions to be because of political differences and budgetary availability. Pressure from private industry also plays a part in this. In any case, there are more similarities than differences and it is necessary to tackle the feeling of inequality in the population.

- Adaptations of the vaccination schedule in Spain, in special cases: travelers, immigration, etc. Until 2019 it was handled independently in each Autonomous Community, but this year (2019) a joint proposal to the Interterritorial Council has been taken and agreed upon. Travelers must be controlled before departure, but also on their return. Immigration is

studied on a case-by-case basis, avoiding stigmatization and, in the event of doubt and depending on the case (origin, destination, age, etc.), vaccination is recommended despite possibly having already been received it, or previous serology.

- Certain cases, such as tuberculosis, currently have an ineffective vaccine such as BCG, but there is hope in the development of new vaccines with better protection rates, which probably will be able to enter the vaccination schedule in the near future. The development of new vaccines against different serotypes is also being studied for their incorporation or revaccination with an extended spectrum, such as the vaccine against human papillomavirus (HPV) and meningococcus (tetraivalent and B).

- Mandatory vaccination for children in Spain:

Its compliance rate of more than 95%, which is producing the "herd effect" which protects the unvaccinated, makes it unnecessary. It is obligatory only in the event of a public health risk or certain individual cases by court ruling.

- Compulsory vaccination of health professionals in Spain:

There is a certain disparity that is difficult to understand between the campaigns and the promotion of vaccination to the general population and that of professionals. In Spain vaccination is recommended for professionals in contact with particularly vulnerable patients, but in any case, there is the right to abstention. In 2011, the formal renunciation of this act was established, although its application is close to zero. A strong campaign from the Ministry to recommend vaccination to health professionals is suggested.

- Vaccination as a barrier to the proliferation of multi-bacterial resistance.

There is clear evidence of its indirect effectiveness, especially with attenuated vaccines such as influenza, by reducing the risk of subsequent bacterial complications and the consequent reduction in the use of antibiotics. In addition, it has also been associated with lower morbidity, for example by reducing cardiac pathology. Information and training in this regard should be strengthened, both for professionals and the population.

- Certain actions by governments, such as price pressure on the producing industry, put supply at a certain risk in the medium and long term. On the other hand, the governments must be supported for actions taken to protect the population in the case of certain emergency situations, despite the fact that expectations may not have subsequently been fulfilled, since decisions in this area must be taken quickly, at an early stage and

sometimes with little information (e.g. in the case of the massive purchase of type A flu vaccine, of which only 2/10 was consumed).

- Anti-vaccination hoaxes and movement:

Professionals should actively warn about the risk to give credit to poorly validated information, as well as recommend reliable sources of information. Administrations should carry out dissuasive and informative campaigns, against hoaxes, either through posters, press, radio and television. The figure of the "technical disseminator" (administrations and professional societies) should also be encouraged. Communication is key and journalists (among others), due to their influence, should be adequately trained.

- IT support for administrations:

the scarce compatibility between the national, autonomic and local level is common. The "single card" only contains very limited common information. Work on harmonization has been underway since 2017 but is slow. There is also the "blockchain" technology which, in a direct and practical sense, makes the patient the owner of his own health data, carrying it e.g. on his mobile phone and sharing it with whomever they like.

- Therapeutic Vaccines:

It differs from the standard vaccine, because instead of being preventive, it is therapeutic. It is in development and bears very promising expectations based on genome and personalization, however, there are fears about high prices that may lead to inequalities, if not addressed in agreements between the public and private sector.

#### Conclusions:

- Health authorities, followed by patient associations and civil organizations, are the most conscious about life-course immunization.
- In fact, it is widely felt that the vaccination plan in Spain is designed to help maximize people's ability to protect themselves from infection throughout their lives, with the immunization schedule being considered either well-developed or in development, in equal parts. On the other hand, nearly three quarters consider it well developed for patients with specific chronic diseases.

- Public campaigns, the involvement of civil and patient organizations, the education and support of professionals, the integration of immunization into aging policies, the administration of vaccines in non-clinical settings, vaccination coverage by age, and the availability of data are still all in development. The importance of patient associations is underlined as a strong asset for improving adult vaccination. The use of emotional arguments through personal stories is also suggested.
- Childhood vaccination in Spain is a success. However, from adolescence onwards and into adulthood, the rates are lower and there is much room for improvement.
- We have a very complete and well-justified vaccination schedule, with more elements in common than differences between the Autonomous Regions. It is necessary to tackle the feeling of inequality.
- Vigilance and adaptation to the vaccination schedule is necessary in the case of travelers and immigration.
- The government is monitoring the development of new vaccines to be included in the vaccination schedule, once they are endorsed for their effectiveness and safety.
- Obligatory vaccines are not considered necessary for children, and not adequate for professionals; information, training, awareness and incentives of professionals are more important. It is recommended to open channels of communication from the Ministry to the councils, nursing associations and young people. These three communication channels would reach the majority of the population.
- The role of vaccination against the spread of bacterial multi-resistance is scientifically proven and information and training in this sense must be strengthened, both for professionals and the population.
- The pressure on the price of vaccines puts the supply at some risk, in the medium and long term.

- The actions during epidemiological emergencies, although taken by experts, usually need to be quick, which leaves many doubts, although this must excuse calculation errors
- It supports in Spain is not bad, but it is uneven and ineffective for universal analysis; improving it should be a national priority.
- The development of therapeutic vaccines is very promising, but personalization is supposed to involve high costs.

So, it is widely felt that the vaccination plan in Spain is designed to help maximize people's ability to protect themselves from infection throughout their lives, with the immunization schedule being considered either well-developed or in development, in equal parts. On the other hand, public campaigns, the involvement of civil and patient organizations, the education and support of professionals, the integration of immunization into aging policies, the administration of vaccines in non-clinical settings, vaccination coverage by age, and the availability of data are still all in development. The importance of patient associations is underlined as a strong asset for improving adult vaccination. The use of emotional arguments through personal stories is also suggested.

## **7. The ACN' contribution on previous publications on the topic**

Previous publication on vaccinations, which led to this project, were:

-“*A life-course approach to vaccination: adapting European policies*<sup>20</sup>”.

This report has outlined the benefits and challenges about implementing a life-course approach to vaccination. A change of policies towards a life-course approach may help anticipate new health threats and develop policies that address them. By vaccinating and educating people about vaccination throughout their lives, there will be a population that has a better capacity to lead healthy, productive lives for longer. This, in turn, will contribute to the sustainability of our healthcare systems and the productivity of our societies overall, for current and future generations. For this reason, stakeholders need to come together to implement concrete actions to ensure vaccination achieves its full potential.



-“*The life-course approach to vaccination: Harnessing the benefits of vaccination throughout life*<sup>21</sup>.”

In this article, the topic of vaccination beyond childhood was addressed. Its main outcomes show how a long life approach to vaccines brings significant benefits at the individual, community and socio-economic levels. The benefits of vaccination beyond childhood still need to be broadly understood and action must be taken by policymakers, healthcare professionals and patient and civil society organizations to ensure that the benefits of vaccination are fully realized. The Five areas of change mentioned in the methodology chapter were defined and the need to ensure vaccination across the life-course in national immunization programs came out. This included investing in robust data collection and analysis; ensuring coordinated, multidisciplinary leadership from the top; engaging healthcare professionals; changing public perceptions of vaccination; and integrating vaccination into schools and workplaces.



<sup>20</sup> [http://interestgroup.activecitizenship.net/files/news-and-events/life\\_course\\_vacc\\_policy\\_report\\_interactive.pdf](http://interestgroup.activecitizenship.net/files/news-and-events/life_course_vacc_policy_report_interactive.pdf)

<sup>21</sup> <https://www.sciencedirect.com/science/article/pii/S0264410X19312046?dgcid=coauthor>

## 8. Acknowledgments

This initiative, in Spain, was possible thanks to Foro Español de Pacientes and Asociación Española contra la Meningitis<sup>22</sup>.



Asociación Española  
contra la Meningitis

[www.contralameningitis.org](http://www.contralameningitis.org)



<https://forodepacientes.org/>

## 9. Authors

Daniela Quaggia, Mariano Votta, Giulia Decarolis, Elena Moya, José Luis Baquero Ubeda

Finished writing on 19/03/2020

## 10. Web references

- [http://interestgroup.activecitizenship.net/files/news-and-events/domanda\\_risposta\\_vaccini.pdf](http://interestgroup.activecitizenship.net/files/news-and-events/domanda_risposta_vaccini.pdf)
- <http://interestgroup.activecitizenship.net/files/news-and-events/the-challenges-of-life-course-vaccination-to-enhance-public-health-protection-in-europe-a-multi-stakeholder-approach-FACTSHEET.pdf>
- [http://interestgroup.activecitizenship.net/files/news-and-events/life\\_course\\_vacc\\_policy\\_report\\_interactive.pdf](http://interestgroup.activecitizenship.net/files/news-and-events/life_course_vacc_policy_report_interactive.pdf)
- <https://www.euractiv.com/section/health-consumers/news/no-freedom-of-choice-in-vaccination-top-eu-health-official-insists/>

---

<sup>22</sup> <https://www.contralameningitis.org/>