



JOINED FOR VACCINATION
ADDRESSING VACCINE HESITANCY AND INCREASING UPTAKE IN EU
A MULTI-STAKEHOLDER PROSPECTIVE

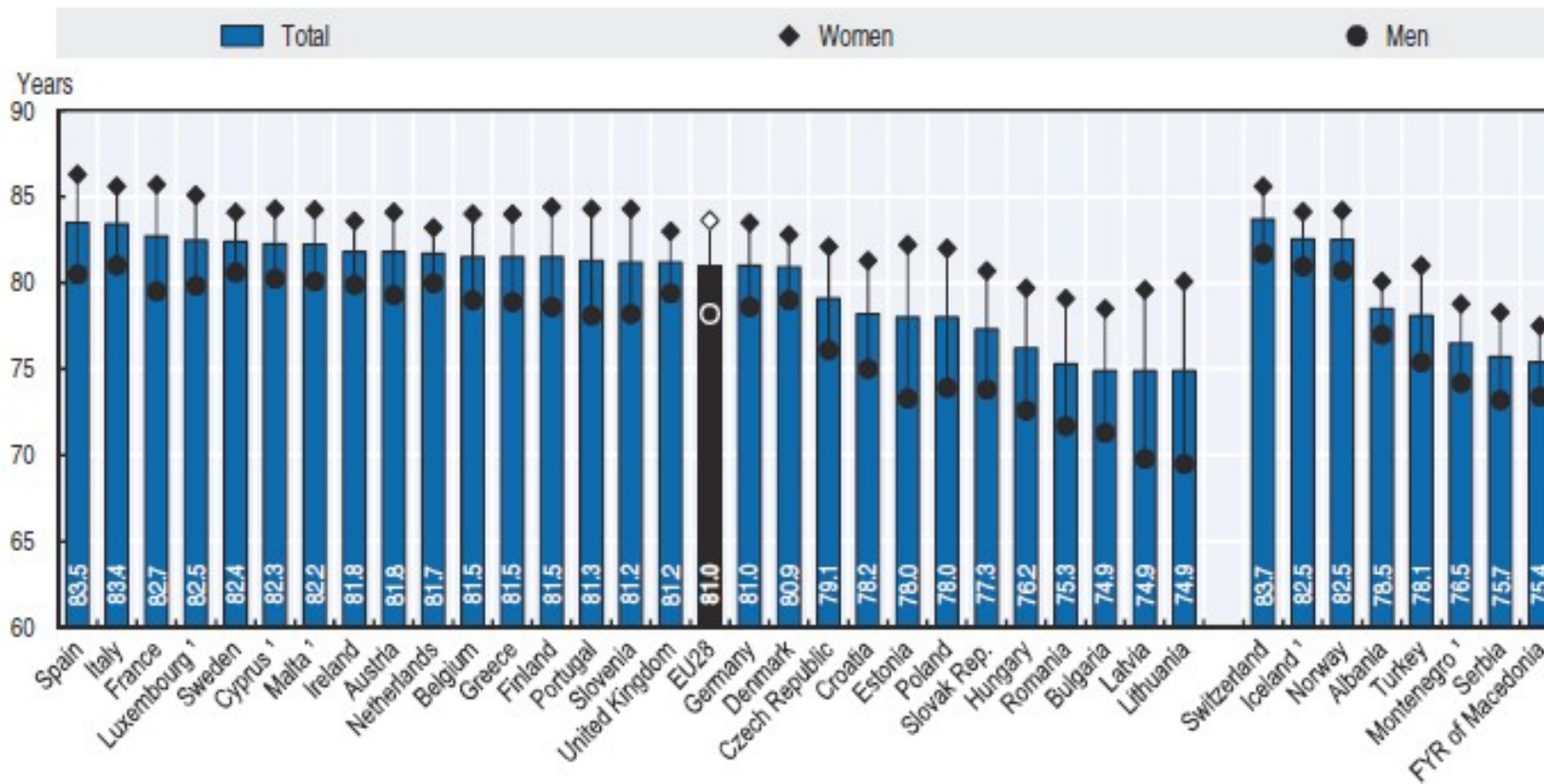
***Supporting the EU Institutional commitment on vaccination
for the coming years***

Brussels, 28 January 2020
Luciana Valente

Vaccination of Senior Citizens

Demographic context

The number of elderly people is growing



Source: Eurostat Database

Life expectancy at birth now exceeds 80 years in two-thirds of EU countries

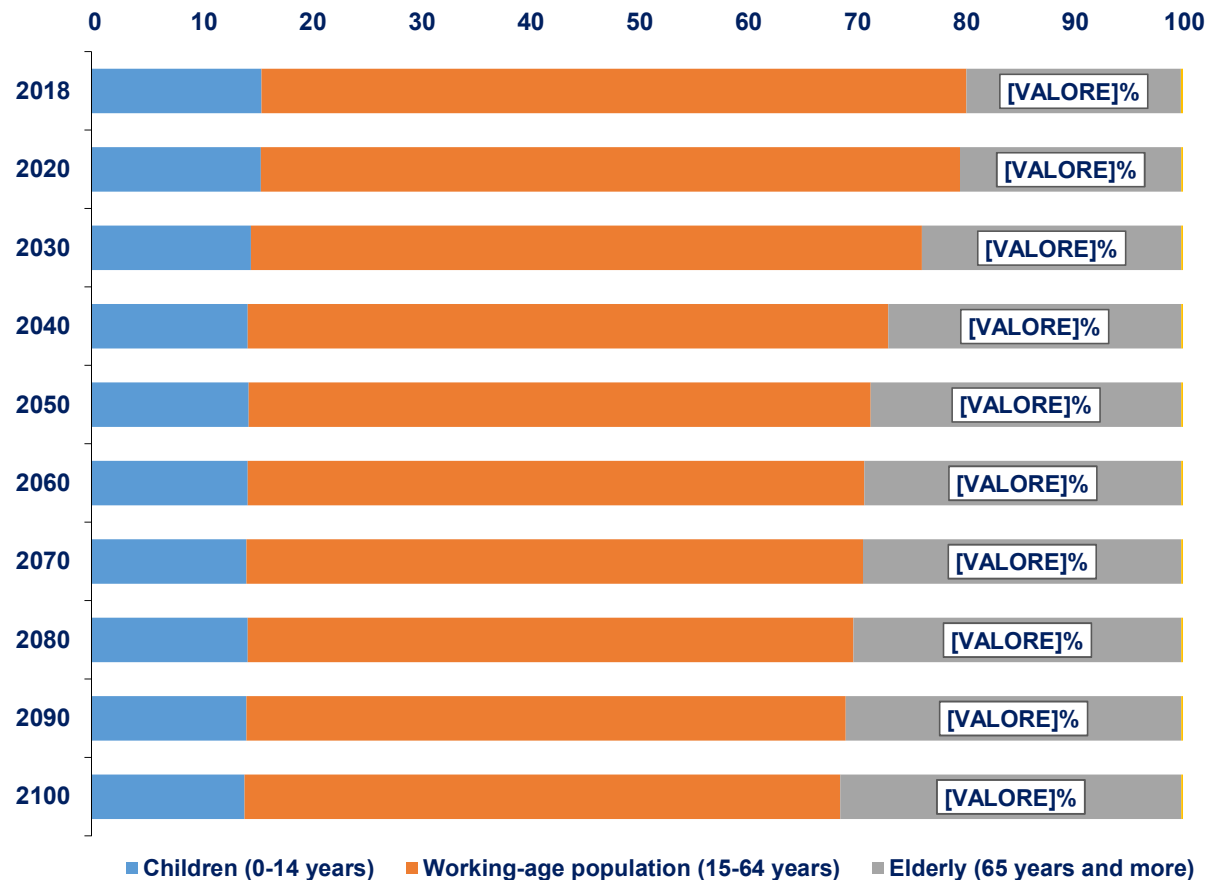
Life expectancy at birth reached 81 years across the 28 EU member states in 2016

Spain and Italy have the highest life expectancy among EU countries, with life expectancy reaching over 83 years in 2016.

Future trends in the EU's ageing population

The ageing of the population in the EU is likely to continue until 2100. The share of older people in the total EU population is expected to increase from 19.7% in 2018 to 31.3% by 2100

The European Union tends to age and will face major "challenges" in terms of the economic situation and social inclusion of older people. The proportion of older people (aged 65 and over) in need of long-term care and assistance is constantly increasing



Source: Eurostat DataBase

Why are vaccines important?

The introduction of vaccinations has been the *most important public health intervention* for humanity. It has determined:

➔ a reduction in **morbidity and mortality rates** due to preventable diseases

➔ a **reduction in the rate of hospitalization** and possible disabling outcomes due to preventable diseases

95 %

Despite good progress, we are still far from the threshold of vaccination coverage recommended by the WHO.

Herd immunity: If the proportion of vaccinated individuals within a population reaches this value, the circulation of the pathogen is stopped. Reaching this threshold therefore makes it possible to protect even fragile individuals who, due to their health conditions, cannot be vaccinated

Current vaccination coverage

In 2018, **only 5 countries reported at least 95% childhood vaccination** coverage rates for both doses of the measles, mumps and rubella (MMR) vaccine. In 2007, this threshold was obtained by a much higher number of 14 countries¹.

CHILDHOOD VACCINATION



Vaccination coverage rates for the first dose of the vaccine against measles vary from 92% in Italy (2017) to 99% in Luxembourg, with the average for the EU (93.6%) falling below what is required to ensure herd immunity

OLDER ADULTS VACCINATION



Similar variations can be seen for other vaccinations, including influenza immunization programmes targeting older adults who are at greater risk of severe complications²

¹ *Health at a Glance: Europe 2018, OECD*

² *The organization and delivery of vaccination services in the European Union – 2018 European Commission*

Mortality from respiratory diseases - Seasonal Influenza

➔ Mortality from respiratory diseases is the **third main cause of death** in EU countries, accounting for 8% of all deaths in 2015
Most of deaths (90%) were among people aged 65 and over

➔ The higher number of deaths in 2015 across EU countries was attributed mainly to higher mortality from influenza and pneumonia triggering cardiorespiratory events (together with alzheimer's disease/other dementias, and heart diseases)

➔ But influenza also contributed to many more deaths among frail elderly people with chronic diseases. The European Monitoring of Excess Mortality network estimated that up to 217.000 deaths were related to influenza among elderly people across EU countries during the winter 2015 (EuroMoMo, 2016).

The causes of the reduction in vaccination coverage

- ➔ **Low awareness**, of the individual and collective, **health benefits** of the use of vaccines
- ➔ **Reduced perception of risks related to infectious diseases**, thanks to the success of vaccination programmes
- ➔ Spread of **theories completely without scientific basis** that aim to exalt the severity and frequency of adverse events from vaccination (so-called fake news)
- ➔ **False correlation between vaccines and the incidence of some diseases** (for example: autism) and resulting fear of parents to subject their children to vaccination
- ➔ The diffusion of **opposition movements to vaccination** for ideological reasons or other interests (so-called no-vax)

The consequences of reducing vaccination coverage


- ➔ **Increase in cases of infectious diseases** in different age groups (for example adults) and more severe clinical pictures, with increased use of **hospitalization**
- ➔ **Reappearance of infectious diseases that were under control**, often accompanied by delays in diagnosis precisely because of the difficulty of easily recognizing clinical pictures rarely or never found in clinical practice
- ➔ **Increased health and social costs** connected with the spread of disease, as well as increased hospitalization and possible disabling outcomes

The Vaccine hesitancy and Increasing diffusion 1/2

- The lack of awareness in the population is an obstacle to effective vaccination coverage
- Vaccine hesitancy is a major public health threat all across Europe, which can be tackled by

Actively involving health workers

- As a trusted source, the health workforce has an unparalleled role in raising awareness and spreading the correct information
- 4 in 5 people consult general practitioners (GPs) for information on vaccination

 *To increase the real scope of Prevention and contrast the low perception of the value of vaccination, at the same time as the need for **constant updating** (hopefully mandatory) for General Practitioners and for all health professionals*

The Vaccine hesitancy and Increasing diffusion 2/2

Improving health literacy

- ➔ *A better organization of services through health literacy can improve their **accessibility** and allows for better **coordination** with General Practitioners*

Countering disinformation

- ➔ *It is necessary to transmit an adequate, simple culture also to the population, through meetings with the various Centres in all Regions, in order **to create a cultural synergy** between Doctors and Elderly people*
- ➔ *To encourage any health information and education initiative that increases the empowerment of citizens, patients and caregiver*

Supporting EU Institutional commitment 1/2

- **Partnership** between different health stakeholders, patient's associations, medical-scientific world, companies and institutions is essential to have a comparative analysis of the functioning and performance of health systems in Europe and to enable their evolution
- Only starting from the **confrontation** between the different actors and points of view is it possible to activate processes of change that bring out the strong points of those States characterized by the **best performance** and the best health indexes of the population and vaccination coverage
- **Models for progress** exist globally and in Europe, but attention and support is needed between and within states and communities

Supporting EU Institutional commitment 2/2

- Citizens' and patients' associations can play a **central role** from different points of view: in data collection, in information and empowerment activities, in raising awareness of the importance of vaccination and prevention
- Particularly in a Europe more and more affected by the ageing process, the point of view of elderly patients is crucial to make known the "**real life**" of a population suffering from multiple morbidity, from different forms of fragility to non-self-sufficiency, which will soon represent one third of the European population
- By sharing their critical issues and difficulties in accessing services, seniors and patients can all be stimulated **to find solutions based on their real needs**
- Despite the health gains in Europe, **inequalities persist and increase**. Without addressing this problem, the objectives will not be achieved successfully

A common purpose to act in real context

All together ...

- *Define the* **Priorities**
- *Collaborate in* **Partnerships**
- *Encourage* **Policies**
- *Construct* **Practices**

**Thanks
for your
attention**

www.seniorinternationalhealthassociation.org
contact@sihassociation.org

