

Forum: ECOSOC

Issue: The question of state imposed vaccinations

Student Officer: Beatrice Ghiringhelli Cavallo

INTRODUCTION

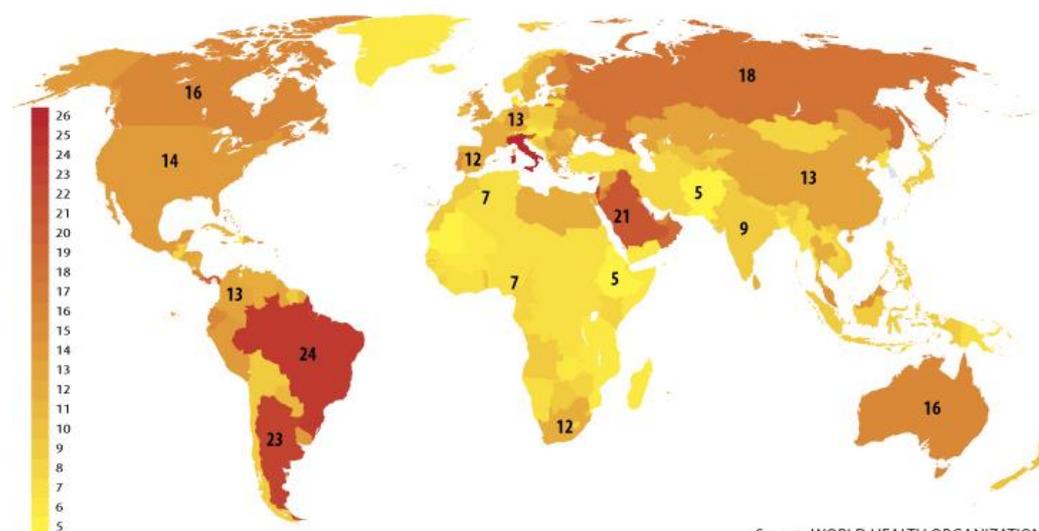
Compulsory vaccination is an extremely debated issue, as it requires authorities to analyse the balance between public health and individual freedom. In fact, vaccine controversies have been a topic of discussion between governments and the public ever since mandatory vaccines were introduced. Despite general agreement in the scientific field that vaccines are safe and effective, scares regarding their safety still occur. In fact, however very rare, there have been occasional registered cases of side-effects to them. Another source of discussion is whether mandatory vaccination policies violate the liberties of individuals or their religious beliefs.

In evaluating the legality of a particular compulsory vaccination, governments consider copious factors such as the safety of the vaccine, the import of the preventable disease, and the ease and speed of transmission.

The spread of vaccine refusal and hesitancy is making global immunisation goals hard to achieve. Enforcing mandatory vaccinations is one of the strategies that some countries adopted to eliminate the risk of disease; these policies stirred strong resistance from many anti-vaccinationists groups.

(VACCI) NATIONS OF THE WORLD

The WHO's database of vaccine requirements covers 193 countries. It does not have any information on enforcement or actual vaccination rates. Below, the map is colored according to the number of distinct vaccine antigens required, at least in part, by each country. The per-country average is a little over 10.



Source: WORLD HEALTH ORGANIZATION

ANTI-VACCINATION MOVEMENTS IN HISTORY

Opposition to vaccination has existed as long as vaccination itself. Here are some of the main anti-vaccination movements and leagues.

Anti-vaccination Leagues in England and the United States

In the early 1800s, following Edward Jenner's cowpox experiments with which he proved he could protect a child from smallpox if he infected him with lymph from a cowpox blister, The Vaccination Act was published. It ordered mandatory vaccinations for all children up to 3 months old. The citizens strongly opposed and demanded the right to control their bodies and those of their children.

The Anti Vaccination Society of America was founded in 1879 due to smallpox outbreaks in the United States. The New England Anti Compulsory Vaccination League (1882) and the Anti-vaccination League of New York City (1885) followed.

The Measles, Mumps, and Rubella Vaccine (MMR) controversy

In 1998, British doctor Andrew Wakefield published a paper in which he claimed there was a link between bowel disease and autism in children and the MMR vaccine, causing panic that led to a drastic dropping in immunization rates. Wakefield was struck off the medical register and the fraudulent paper was subsequently retracted by the journal that published it.

"Green Our Vaccines" Movement

Despite scientific evidence demonstrating the safety of thimerosal (a mercury-containing vaccine preservative), concerns over it led to the "Green Our Vaccines" rally. It was held on June 4, 2008 in Washington, DC by the celebrities Jenny McCarthy and Jim Carrey, to raise awareness on "toxins" in common childhood vaccines.

KEY TERMS

Vaccine: a substance deriving from the causative agent of a disease or a synthetic substitute, used to provide immunity against a particular disease.

Vaccination policy: the health policy a government adopts in relation to vaccination.

Anti-vaccinationists: groups who object vaccinations on ethical, political, medical safety, religious, and other grounds.

Mandatory vaccine: a vaccine that must be received by law without the possibility to choose to accept the uptake or not, regardless of whether a legal or economical implication exists for the refusal.

Vaccine hesitancy: *delay in acceptance or refusal of vaccines despite availability of vaccination services.* (WHO definition)

Vaccine-preventable diseases: infectious disease for which a preventive vaccine exists.

Behaviour change: efforts to change people's habits in order to prevent diseases.

Factors influencing Vaccine Hesitancy

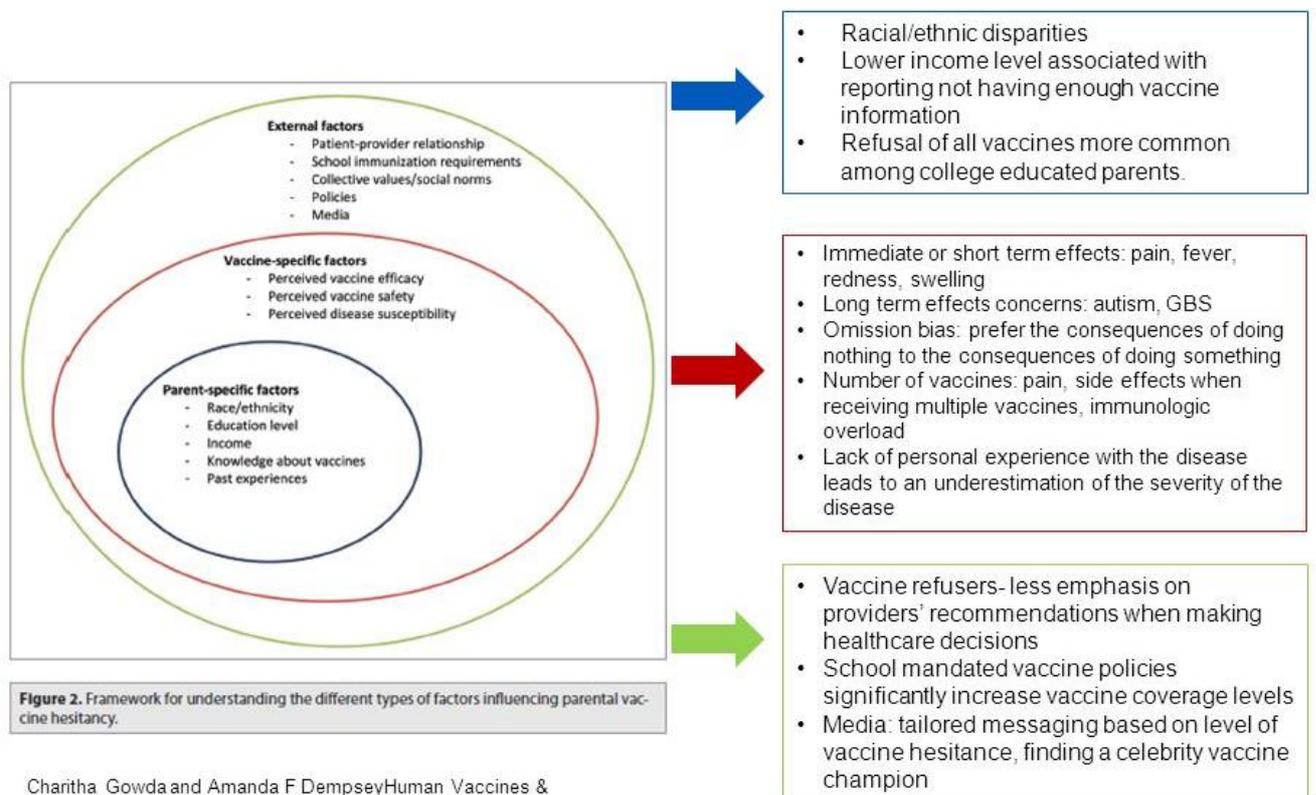


Figure 2. Framework for understanding the different types of factors influencing parental vaccine hesitancy.

Charitha Gowda and Amanda F Dempsey *Human Vaccines & Immunotherapeutics* 9:8, 1755–1762; August 2013

(Rhode Island department of health)

OVERVIEW OF THE ISSUE

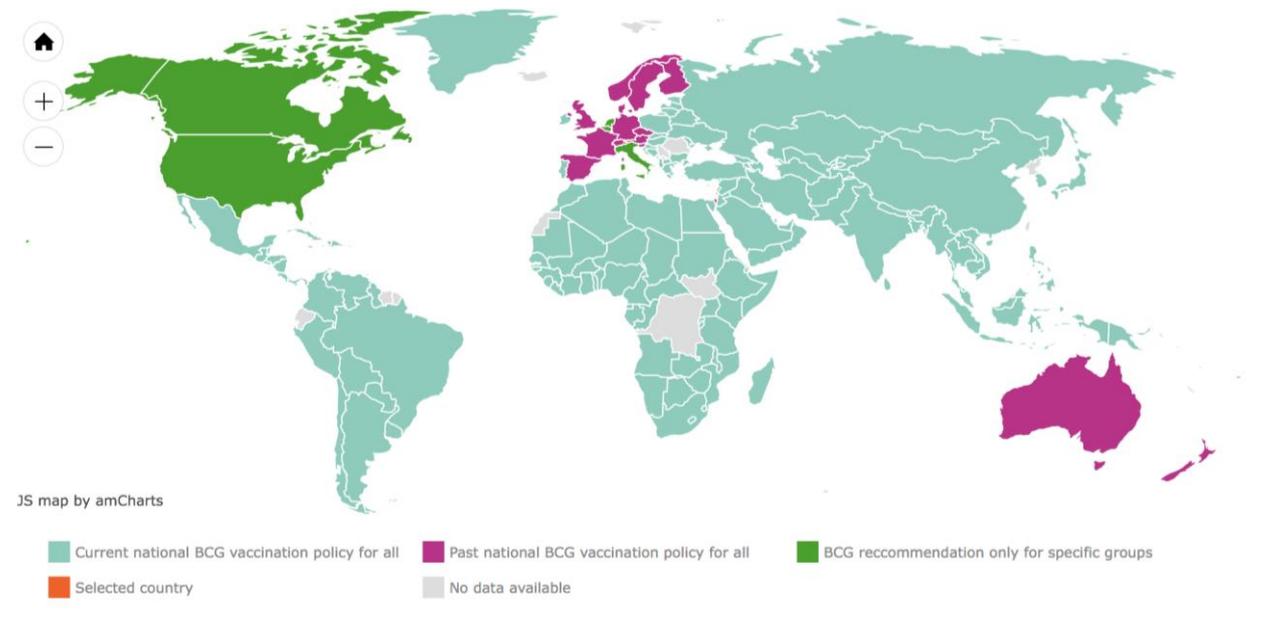
Some countries focus on educating their population about the health benefits of vaccination leaving then the choice to the people; others prefer offering financial incentives to boost compliance rates or making vaccinations mandatory to ensure high coverage rates.

A study conducted by ASSET (Action plan on Science in Society related issues in Epidemics and Total pandemics) on immunisation rates in the EU countries in the last years for 3 main vaccines (polio, measles and pertussis containing vaccines) indicates there isn't any clear relationship between vaccination coverage and government policies on mandatory vaccinations.

What surprisingly emerges from the study is that countries where a vaccination is mandatory do not always reach better coverage than neighbouring countries where there is no obligation.

Most of the problems in vaccine development are economic: the majority of the diseases most demanding a vaccine affect mainly poor countries. Pharmaceutical firms and biotechnology companies have no incentive to develop vaccines for these diseases, because of the low revenue potential. Difficulties of some healthcare systems in reaching all children are involved in immunisation rates.

A DATABASE OF GLOBAL BCG VACCINATION POLICIES AND PRACTICES



A database of global BCG (tuberculosis) vaccinations policies and practices

PREVIOUS SOLUTIONS AND GOALS

The **Global Vaccine Action Plan (GVAP)** — endorsed by the 194 Member States of the World Health Assembly in May 2012 — is a framework to prevent millions of deaths by 2020 through more equitable access to existing vaccines for people in all communities. The plan is intended to "strengthen routine immunization to meet vaccination coverage targets; accelerate control of vaccine-preventable diseases with polio eradication as the first milestone; introduce new and improved vaccines and spur research and development for the next generation of vaccines and technologies".

In 2006, the World Health Organization and UNICEF created the **Global Immunization Vision and Strategy (GIVS)**, whose ultimate goal is to reduce the level of vaccine-preventable illnesses and deaths by at least two thirds compared to 2000 levels, in order to achieve the Millennium Development Goal for child health.

GIVS has four key objectives:

- to immunise more people against more diseases;
- to introduce a range of newly available vaccines and technologies;
- to integrate other critical health interventions with immunization;
- to manage vaccination programmes within the context of global interdependence.

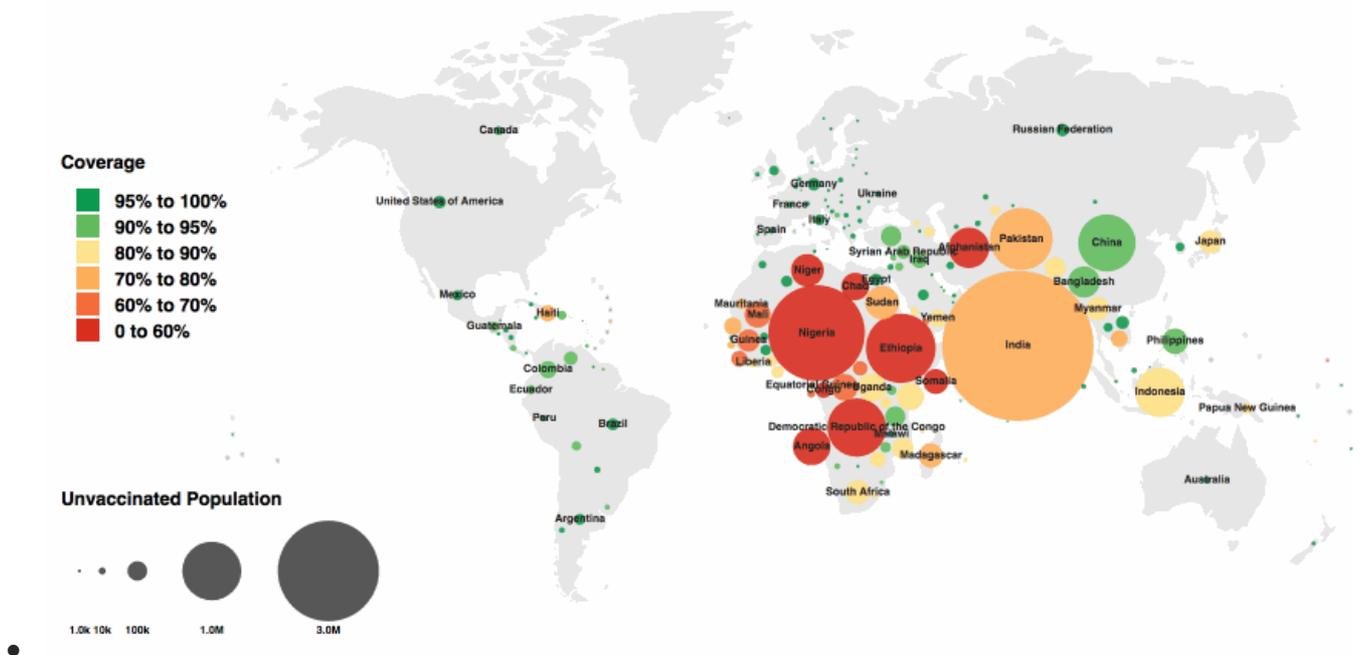
WHO EUR Guide to **Tailoring Immunization Program (TIP)** framework, whose goal is to increase coverage of child vaccination in the WHO European Region, helps to "identify and prioritize vaccine hesitant populations and subgroups, diagnose the demand and supply-side barriers to vaccination in these populations and design evidence-informed responses to vaccine hesitancy appropriate to the setting, context and hesitant population". The TIP is currently being adapted in order to make it globally usable.

According to the **Systematic Review of Strategies to Address Vaccine Hesitancy**, the most effective interventions should address the specific reasons under vaccine hesitancy. Strategies include:

- Engagement of religious or other influential leaders to promote vaccination in the community
- Social mobilisation
- Mass media
- Improving convenience and access to vaccination
- Mandating vaccinations / sanctions for non-vaccination

- Employing reminder and follow-up
- Communications training for HCW
- Non-financial incentives
- Aim to increase knowledge, awareness about vaccination

2000 Coverage and Unvaccinated Population for dtp1



USEFUL LINKS AND VIDEOS

<https://www.youtube.com/watch?v=L9dh35xyDtE>

http://www.who.int/immunization/monitoring_surveillance/data/en/

http://www.who.int/immunization/monitoring_surveillance/data/gs_gloprofile.pdf?ua=1

<http://www.asset-scienceinsociety.eu/reports/page1.html>

<https://youtu.be/rAGHXMq9ttw>

BIBLIOGRAPHY

http://www.who.int/immunization/programmes_systems/vaccine_hesitancy/en/

<http://www.emro.who.int/entity/vpi/index.html>

http://www.who.int/immunization/global_vaccine_action_plan/GVAP_doc_2011_2020/en/

http://www.who.int/immunization/policy/position_papers/en/

<https://www.historyofvaccines.org>

<http://www.asset-scienceinsociety.eu/reports/page1.html>