



European Confederation of Primary Care Paediatricians  
Confédération Européenne de Pédiatrie Ambulatoire - CEPA

**The ECPCP Velenje statement - how to deal with vaccination hesitancy in the community.  
Strategies and tools for the primary care paediatrician for the achievement of a high vaccine uptake in practice and in the community.**

We are concerned about the recent outbreaks of measles and increasing vaccination hesitancy in European countries. The medical profession and the paediatric team play a crucial role in the community to convince parents and adolescents about the benefits of routine immunizations. Children and adolescents have the fundamental right to receive the best medical care. Therefore, health authorities, parents and the medical profession should undertake all efforts to achieve high immunization coverage in order to prevent and control potentially devastating infectious diseases.

1. **Paediatricians and their associations should support laws and regulations for more mandatory vaccinations** in their countries if the vaccination coverage is insufficient or decreasing. One way to reach high coverage of immunization beside public campaigns from health authorities is requirement of complete vaccinations before enrolment in kindergarten, school and university. Italy has recently introduced compulsory vaccinations since September 2017 and France will start with it from January 2018.
2. **Some providers** (physicians, nurses, midwives) **have doubts** and increase parents uncertainties. Health authorities should take an active role in order to improve the adherence of all health professionals to national guidelines. Legal implications for professional non-adherence to standards should be clarified. Check vaccinations status of health workers regularly.
3. **Participate in campaigns and local health fairs in the community** with own presentations about the purpose of vaccinations. Be active in organizing training of other health care professionals and in informing the public in general. Improve evidence-based knowledge of health workers and teachers about immunizations.
4. **Use every contact** of families with health services as an opportunity to check immunization-status, to talk to parents and adolescents about vaccines and to complete missing vaccinations ( WHO- recommendation). Check the vaccination status of parents. Be aware that one part of the problem of low vaccine coverage is explained by **missed opportunities**.
5. **Take your time** to listen carefully to concerns and fears of parents and adolescents. Provide special appointments to parents who are skeptical and doubtful about vaccinations in order to increase their confidence.
6. Clarify the role of **false contra-indications** for vaccinations such as banal viral infections and other irrelevant problems.
7. **Do not discontinue patient care in case of vaccine refusal** or hesitancy by parents and adolescents. Continuous patient-caretaker dialogue is important for trust in vaccinations. Explain consequences of vaccine-preventable diseases and provide written instructions to parents of non-vaccinated children.
8. Explain to parents and adolescents **the role of media and internet** where fake news, rumors, myths and inaccurate beliefs about vaccinations prevail and persist.
9. **Provide reliable sources of information** in the media and in the internet to parents and the paediatric team.
10. Use population-based and practice-based **vaccine coverage rates** in order to analyze the success of campaigns and other efforts to increase the coverage. Electronic registers can facilitate the documentation.