



WP: 6 Translate research evidence to policy recommendations

D6.2 Co-identification of potential obstacles and challenges

Information package for participants in the policy lab for practices addressing general population

If you have any queries please contact:

Angelos Kassianos angelos.kassianos@cut.ac.cy

Bianca Ferraiolo b.ferraiolo@cittadinanzattiva.it



Co-funded by
the European Union



Programme Thursday 19th March 2026

Policy lab: challenges for COVID-19 vaccine promotion with a focus on practices addressing general population

09.00 - 09.15 hrs	Welcome and Round of Introductions
09.15 - 09.30 hrs	Summary of pre-liminary findings of the co-OPERATOR project
09.30 – 10.50 hrs	A step-wise approach to identify and understand challenges and opportunities <ul style="list-style-type: none">• Setting the challenges• Exploration of the policy landscape• Identify and understand challenges for implementation• Identify and understand opportunities for implementation
10.50 - 11.00 hrs	Information on next steps and Closing

Brief

Background

The COVID-19 pandemic has revealed important obstacles when promoting vaccinations. Whilst most people wanted to get vaccinated, approximately one in five individuals were likely to be hesitant. In addition, vaccination strategy/policy, targeted population, accessibility to immunization service delivery and trust in healthcare professionals and policymakers who decide on the needed vaccines may impact on vaccine uptake. Policymakers still struggle to understand what motivates or hinders people to get vaccinated. Tailored campaigns are proposed to target the psychological dimensions that can hinder vaccination uptake. Moreover, the role of healthcare professionals is paramount in the general public's decision to vaccinate. Recommendations by healthcare professionals was among the strongest predictors of getting vaccinated during the pandemic. In the US, the Center for Disease Control and Prevention prioritizes training for healthcare professionals to effectively communicate with patients about vaccines. When messages are clear and credible in a language the target group can understand, this is associated with higher acceptability of vaccines. Still, healthcare professionals remain one of the most trusted advisors in vaccination decisions, highlighting the importance of their engagement in the fight against vaccine hesitancy and shall be at the forefront of efforts to counteract disinformation and to improve health literacy (and vaccine literacy in particular) among patients and citizens at large.

Therefore, tackling the decline in vaccination confidence is one of the key areas for action. To do so, it is imperative for actions to help decision-makers to first understand what hinders and help both the people to get vaccinated and the healthcare professionals to provide expert advice and inform their vaccination campaigns. A citizen-centered approach is paramount in this endeavor, as it may help policy makers, public health experts, scientific community, and civil society organizations to better understand needs and barriers and, in turn, to design adapted and more effective solutions to increase vaccine uptake. This may be of even greater relevance in the aftermath of the COVID-19 pandemic due to the disruptions it has caused in the



Co-funded by
the European Union



vaccination services in various EU/EEA countries. These cross-country efforts are important as vaccine hesitancy is a complex behavioural phenomenon, that can be potentially influenced by a wide range of factors, such as geography, religion, sociocultural context/background, education, and literacy.

Research setting

Against this background, our co-OPERATOR project aims to develop and pilot a knowledge hub, virtual observatory and training system in participating countries. This proof-of-concept study is currently collecting, organizing, and disseminating knowledge, best practices, and resources related to stakeholders' strategies used and needs towards vaccination against COVID-19 with an emphasis on advancing communication, knowledge skills whilst recognizing and tackling systemic barriers and facilitators for promoting vaccination messages to the population.

In the context of co-OPERATOR, this policy lab aims to translate evidence from the co-OPERATOR project into actionable vaccination policies to address COVID-19 and flu vaccine hesitancy in the EU. Particularly, as a first step, the focus is on validating and discussing challenges identified in the context of different member states. There will be two iterations of the policy lab, one targeting practices addressing citizens and one addressing healthcare care professionals. We aim for an exchange of views in each policy lab of citizens representatives, healthcare professionals, decision-makers and public health experts.

Reviews of the published literature, recent EU funded projects and policy documents of the EU, WHO and other International Organisations were conducted to set the basis for the policy lab.



Summary of findings

Mapping best practices

Survey and Literature Review Results

Among the 22 practices included in the final analysis, the types of practices/actions were distributed as follows: 7 education campaigns (32%), 7 community engagement initiatives (32%), 4 media campaigns (18%), 3 health system interventions (14%), 3 technology-based interventions (14%), 1 policy change (5%), and 1 incentive program (5%). **Of the 22 practices, 18 are relevant for this policy lab as they don't solely target healthcare professionals.**

Among the 22 practices, 14 (64%) targeted specific populations, focusing on various demographic groups. These included practices aimed at older adults over 65, socially vulnerable groups, young adults aged 18-30, adolescents aged 12-18, and those over 16, with specific attention to those visiting hospitals and nursing homes. Several practices also targeted specific subpopulations such as healthcare professionals, migrants and homeless individuals, undocumented migrants, students, and pregnant women with children. The remaining 8 practices (36%) were designed to target the general population, aiming to reach a broader audience without focusing on specific demographics or subpopulations.

The practices employed various mediums of delivery: online methods were the most common, used in 10 practices, followed by in-person interactions in 7 practices. Media platforms were utilised in 4 practices, personal contact in 1 practice, and telephone outreach in 1 practice.

Of all the practices mapped, only 1 measured the outcomes with both a survey and focus groups, reporting obstacles and challenges. This practice was the training module “Communicating with patients about COVID-19 vaccination”, developed by the Vaccine-preventable Diseases and Immunization Programme (VPI) of the WHO Regional Office for Europe⁶¹.

EU/EEA countries' practices to enhance vaccination coverage and confidence regarding COVID-19 and Influenza vaccines mapped

Source	EU/EEA Country	Description of the practice	Link
ECDC	Ireland	SciComm is an initiative that uses a network of science communicators to create a dialogue and answer young people's questions and concerns, with the aim of fostering trust and thereby increasing vaccine uptake in young people. The goal was to reach young people in online communities where they are already active, and engage them in an area from which they have felt excluded. The network actively posts content and interacts on social media (Facebook, Instagram, Tik Tok), thereby engaging with young people across the country, sharing experiences, answering questions, and responding to misinformation/disinformation concerning COVID-19 vaccination.	link
ECDC	Italy	In Tuscany, vaccination sites have been used for individuals who do not have a health card as a means of facilitating access for undocumented migrants.	link



		In Sicily, national health authorities have partnered with civil society organisations for the vaccination of migrants, and are using cultural mediators to communicate on vaccination services.	
ECDC	Germany	The Vaccination Week intervention, using the hashtag ‘#HierWirdGeimpft’ (‘vaccination taking place here’), focused on making vaccination easily available in frequently accessed areas (e.g. places of worship, youth clubs, sports clubs, markets) to facilitate opportunistic access to vaccine, and thereby boost coverage before the autumn.	link
ECDC	Czech	Regional municipalities have mobile teams deployed to reach individuals with limited mobility, as well as in communities having difficulties reaching vaccination centres. GPs in low coverage areas has also been collaborating in attempts to vaccinate their patients by offering increased accessibility.	link
ECDC	Spain	Vacunabuses (Vaccination buses) is a partnership between the health authority of Madrid and the Spanish Red Cross. The intervention consists of 18 mobile teams working across public and private higher education institutes, open for drop-in vaccination until the end of the first month of school. The aim is to increase coverage in low-coverage populations and not to be dependent on achieving vaccination through centres at students’ primary residence locations.	link
ECDC	Germany	The Robert Koch Institute publishes a weekly set of Q&As using a risk communication approach and highlight the risk of COVID-19 and the benefits of the vaccine. Questions for particular vulnerable groups (e.g. pregnant women) or groups of interest (e.g. children) are also included.	link
ECDC	Netherlands	An online interview was conducted with a paediatrician who chairs of the Dutch Paediatrics Association and who is involved in the country’s Outbreak Management Team. He addressed questions of parents on the risk of COVID-19, and the benefits of vaccination. There have also been partnerships established between education establishments, education associations and health institutes to provide information on the risk of COVID-19 for young people and children, and the benefits of vaccination.	link
ECDC	Poland	A team was set up by the National Health Fund to call individuals who have not yet been vaccinated, as identified through medical records. Individuals are asked why they have not been vaccinated, and they are engaged in a discussion, focused on the risks versus the benefits of vaccination.	link
ECDC	Austria	A website provides updates on vaccination strategy with links on where and how to get vaccinated, with information on COVID-19 and vaccination. The format includes short videos, interviews with healthcare workers (as a trusted source), a series called ‘Science Busters’, and a series called ‘Consultation Hour’, in which experts are interviewed about vaccination. These outputs are all tailored to particular concerns identified in different communities.	link



ECDC	Spain	Several mass media campaigns have been used in Spain to disseminate information on the benefits of COVID-19 vaccination, and these have also addressed common concerns. One such campaign focused on explaining the safety of vaccines, and used advocates from the Spanish Agency for Medicines and Health Products (AEMPS) to prime or speak to individuals who may not have been vaccinated due to information circulating about the fact that the COVID-19 vaccines were developed too quickly. Another campaign, #yomevacunaseguro, presents personal pleas from young people, older adults and scientists on why it is important to be vaccinated.	link
ECDC	Netherlands	The National Institute for Public Health and the Environment has invested in big data analytics to identify the most frequently searched-for questions regarding vaccination and vaccines and to analyse the content of vaccine-critical websites. They use these analyses to produce accessible and easily-understood information aimed at countering common misinformation claims published online. The monitoring team also responds directly to misinformation on vaccination online, depending on its source and reach. Finally, they have a Misinformation Thinktank, coordinated by the Ministry of Health, where experts volunteer to debunk vaccine misinformation using their own personal social media accounts.	link
ECDC	Sweden	The information campaign from the Swedish public health authority, together with other organisations, included messaging based on the principle of ‘Protect yourself and others’ in various media. The information was also translated into several languages. A further campaign, with videos and posters translated into several languages, contained the message ‘Together towards better times’ (e.g. joy of meeting friends and family again). Materials also included short videos with vaccination experts explaining the importance of vaccination as a means of controlling disease spread, returning to normal life, and ending the pandemic.	link
ECDC	Poland	In July 2021, a lottery with in-kind and cash prizes was launched for those who get vaccinated. Municipalities also competed to achieve the highest vaccination rates. The 500 first municipalities that managed to vaccinate 75% of their population were to receive cash prizes, and the 49 municipalities that reached the highest vaccination rate in their respective region would also receive a cash prize.	link
WHO	Sweden	The Vaccine Bus is a mobile service operated by Healthcare Region I Stockholm that reaches out to groups that have difficulties accessing vaccination through the digital booking system. The Swedish Red Cross House in Stockholm, a social centre for irregular migrants and other vulnerable groups, invited the Vaccine Bus to come to the House and deliver vaccinations..	link
ECDC	Estonia	The Estonian Health Board (EHB) is responsible for vaccination monitoring and the collection of country-wide statistics. While Estonian is the official national language, there is a large Russian-speaking minority in the country: about 30% of the population speak Russian as their main language. All communications of the EHB are therefore produced in both Estonian and Russian to ensure access to information. The EHB recognises the issue of online vaccine misinformation and works actively on the subject. The agency’s communications department	link



		implements continuous albeit non-systematic monitoring of the (social) media landscape, particularly online groups and pages, to identify and respond in a timely fashion to vaccine misinformation. The team is also responsible for the upkeep of the national vaccine information website (www.vaktsineeri.ee).	
ECDC	Spain	In Spain, the Ministry of Health is responsible for the implementation and monitoring of national immunisation programmes.. While it does not employ a specific strategy for countering misinformation, the Ministry does use various measures for addressing the issue. This involves vaccination experts as well as the press department. The Ministry applies a predominantly reactive approach to online vaccine misinformation. Particularly when a piece of misinformation becomes widespread, the Ministry responds by debunking and publishing correct information via their website or, in urgent cases, holding press conferences to address the issues. The Ministry also works on search engine optimisation (SEO) to ensure that official information sources are easy to find and widely accessible to the public.	link
ECDC	Romania	The National Institute of Public Health is responsible for vaccine-related communications. Given the limited capacity of its communications unit, the Institute currently does not have a system for monitoring online vaccine misinformation. Information around vaccine communication (safety, effectiveness, etc.) is published through an online information portal for parents. The Institute also supports a Facebook group where experts can answer questions of the public.	link

Narratives and framing of challenges and solutions in policy documents and EU funded projects

Policy documents

In total, 16 policy documents were included that focussed on COVID 19 vaccination hesitancy and/or vaccination promotion respectively, published in or after 2020 and that had focus on European countries.

The following **challenges** for practices addressing general population have been identified:

- information manipulation and interference, including disinformation, has threatened the effective response to the pandemic and undermined public trust in the institutions dealing with the COVID-19 pandemic
- lack of public confidence/trust in governments associated with lower vaccine uptake
- public health authorities lacking sufficient resources to carry out vaccination services (skilled workforce, finances, logistics)

Proposed solutions (however, sometimes rather recommendations than a fully worked out solution!)

- identify and respond to information gaps, engage in countering information manipulation and interference activities
- be quick/proactive with providing citizens with objective, accurate, factual and targeted information
- Put in place specific community engagement arrangements using trusted messengers
- vaccination services should easily accessible for target populations, free of charge and with physical proximity



Co-funded by
the European Union



- PH authorities to increase social media presence

EU funded projects

In total, 6 projects were included that focussed on COVID 19 vaccination hesitancy and/or vaccination promotion respectively, funded by different funding schemes of the EU. These are:

1. The European Cohorts of Patients and Schools to Advance Response to Epidemics (EuCARE)
2. Modelling the Impact of Human Behaviours on Infections Spread (IMMUNE)
3. The problem of European misperceptions in Politics, Health, and Science: causes, consequences, and the search for solutions (DEBUNKER)
4. Jiu-Jitsu with misinformation in the age of covid: using refutation-based learning to increase vaccine uptake and knowledge among healthcare professionals and the public (JITSUVAX)
5. Addressing vaccine hesitancy in Europe (VAX-TRUST)
6. The anti-Bacterial innovative vaccine training network (BactiVAX).

The following **solutions** that address or are relevant to practices for general population have been developed or are currently researched by these projects:

- Online learning resource for “empathetic refutational interview technique” for HCP (JitsuVAX)
- online game that seeks to improve people’s ability to recognise manipulation strategies (JitsuVAX)
- Potential of digital media literacy intervention to better discern between mainstream “real” news and untrustworthy “fake” news. (DEBUNKER)
- Use of aggregated survey data at the regional level in Europe on attitudes and behaviours to explain vaccination uptake (DEBUNKER)
- Insight into diverse vaccine discourses within citizens to adapt interventions to beliefs (VAXTRUST)
- Critical role of trust-building relationships among children, parents, and HCPs (VAXTRUST)



The policy lab: A step-wise approach to identify and understand challenges and opportunities
If you can, we kindly ask you to note down your initial thoughts and bring them to the Policy Lab. These will serve as the starting point for our discussion.

1. Setting the challenge for Policy Lab
 - a. *Are the identified challenges also applicable to your country? Why? Why not?*
 - b. *Are there other challenges that we should consider during the Policy Lab?*

2. Understanding the policy landscape (evidence exploration)
 - a. *Are the identified solutions also used in your country? Why? Why not?*
 - b. *Are there other solutions that we have not identified yet?*

3. Brainstorm: Identifying challenges and opportunities for implementation and transfer between European countries
 - a. *Do you see other challenges in implementing/transferring the identified best practices?*
Think of
 - i. *priorities, needs of vaccine-hesitant people?*
 - ii. *tailoring practices to specific groups?*
 - iii. *the country's context (e.g. local conditions, local attitudes, policies & Laws, financing)?*
 - iv. *practical management (e.g. roles and responsibilities, milestones, goals)?*
 - v. *stakeholder involvement?*
 - vi. *evaluation of the outcomes and reporting?*

 - b. *Do you see opportunities for implementing/transferring the identified best practices?*
Think of
 - i. *priorities, needs of vaccine-hesitant people?*
 - ii. *tailoring practices to specific groups?*
 - iii. *the country's context (e.g. local conditions, local attitudes, policies & Laws, financing)?*
 - iv. *practical management (e.g. roles and responsibilities, milestones, goals)?*
 - v. *stakeholder involvement?*
 - vi. *evaluation of the outcomes and reporting?*

4. Next steps