How to ensure a context-specific response to events that may erode trust

How to use this document
This document proposes an algorithm for analysing vaccine safety events and other events that have the potential to erode confidence in vaccines and health authorities. Analysing events is necessary to determine the appropriate communication response. The document describes three overall kinds of events and a process to help you determine whether these events may have low, medium or high impact on trust in vaccination and health authorities. The communication response should be planned according to this. The algorithm will allow you to ensure context-specific responses that may prevent a situation from escalating. Use the algorithm as a routine procedure whenever an event occurs.

How was this document developed?
This document is part of a WHO series of supporting documents concerning events that could erode confidence in vaccination. Such events can be related to vaccine safety, adverse events following immunization, changes in the vaccination programme, negative public debate, outbreaks or pandemics. All documents were developed based on scientific evidence, laboratory research and fieldwork within psychology, social and behavioural science and communication and lessons learnt in countries. For an introduction to the theoretical background and evidence, refer to the WHO publication Vaccination and trust, available here: www.euro.who.int/vaccinetrust. The supporting documents are intended for use by national • ministries of health • centers for disease control • immunization programmes • regulatory authority institutions.
How to ensure a context-specific response to events that may erode trust

When and when should national immunization authorities actively respond to an event which may potentially erode confidence in vaccines or health authorities? Use the guidance below to analyse the event and determine your response.

Situations where confidences may erode

Many events have the potential to erode confidence in vaccines and health authorities. They include:

- **unwanted events** that are rightly or wrongly connected with vaccination, such as vaccine safety and adverse events following immunization, which may create feelings of insecurity and distrust.

- **changes in the immunization programme**, such as introducing a new vaccine, replacing one vaccine with a new kind of vaccine, conducting vaccination campaigns, suspending a vaccine or temporarily recalling a vaccine, which may create uncertainty in the public.

- **public and media debate on vaccination**, including personal social media stories, critical media reports or new critical scientific studies.

When and how should you respond?

Such events are quite common, so the communication response must depend entirely on the event and its context:

- Not all events escalate into a crisis.
- Not all events require a communication response.

The dilemma can be illustrated as in Fig. 1.

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The following pages can be used to analyse when to communicate, and what level of communication is appropriate.

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[Fig. 1]
The immunization communication dilemma

**Informing the public** allows authorities to convey their messages early on, which may prevent a situation from escalating.

**Over-communicating** about events that are minor or might not be related to vaccination may create unnecessary public concern and needlessly damage public confidence.
**Table 1. Analysing the event to determine the communication response**

<table>
<thead>
<tr>
<th>Step 1: Define the type of event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unwanted events that are rightly or wrongly being associated with vaccines and vaccination Adverse Events Following Immunization (AEFIs)</td>
</tr>
<tr>
<td>Changes or new developments in the vaccination programme Introducing a new vaccine, suspending or replacing a vaccine or conducting vaccination campaigns</td>
</tr>
<tr>
<td>Critical public, media and scientific debate on vaccination Personal social media stories, media reports or new scientific studies</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Step 2: Understand the details of what happened</th>
</tr>
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<tbody>
<tr>
<td>Low impact event E.g. report of an infant that developed a rash following vaccination</td>
</tr>
<tr>
<td>Medium impact event E.g. increasing no. of reports of infants developing rashes following vaccination with some social media debate.</td>
</tr>
<tr>
<td>High impact event E.g. reports of many infants developing rashes following vaccination with considerable negative media attention.</td>
</tr>
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<table>
<thead>
<tr>
<th>Step 3: Assess the potential impact on trust in health authorities</th>
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</thead>
<tbody>
<tr>
<td>Low impact event Consider three overall categories:</td>
</tr>
<tr>
<td>Medium impact event</td>
</tr>
<tr>
<td>High impact event</td>
</tr>
<tr>
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<tr>
<th>Step 4: Define the communications response</th>
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<tbody>
<tr>
<td>Low impact event Routine communication, however keep a close eye on the public debate and make sure you have: Communication strategy and contingency plan Effective AEFI monitoring and reporting system Strong links with media partners</td>
</tr>
<tr>
<td>Medium impact event Do not communicate to a wider public audience yet, however start preparing: Gather more facts Engage stakeholders, incl. spokespersons Develop messages and share them with your allies, e.g. with stakeholders that may be contacted by media or public</td>
</tr>
<tr>
<td>High impact event Respond immediately: Gather your group Understand the problem Liaise with key stakeholders Communicate externally</td>
</tr>
</tbody>
</table>

See Table 2 for guidance on assessing level of impact

Gather information to understand what happened, where, how? How serious is it? What may be the cause? Consult:
- The AEFI monitoring and reporting system.
- Experts from the immunization programme and Ministry of Health.
- Local health workers.
- Laboratory, monitoring, surveillance, procurement and logistics staff.
- National Regulatory Authority.
- Relevant ministries, such as ministries of education or children.
- Immunization experts and advisers.

Obtain this information as quickly as possible.

The assessment of impact must be done continuously as events unfold. How events impact trust depends on context and culture. The following would normally increase impact level:
- Uncertainty.
- Emotions, fears.
- New vaccine.
- Mass immunization campaign.
- Extensive media attention.
- Children/pregnant women involved.
- Credibility of the story and its source.
- Similarities to past events that caused a crisis.

See Table 2 for more detail on the different kinds of events

Do not delay implementing your communications response.

To READ MORE refer to:
- Four immediate steps when responding to an event that may erode trust
- Death as an AEFI
- Tips for spokespersons
- How to prepare a message map
- The questions journalists always ask in a crisis

[https://euro.who.int/vaccinetrust](https://euro.who.int/vaccinetrust)
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### Table 2. Events and impact levels

<table>
<thead>
<tr>
<th>Event</th>
<th>Description</th>
<th>Level of impact on trust in vaccines</th>
<th>Remember</th>
</tr>
</thead>
</table>
| Unwanted events that are rightly or wrongly being associated with vaccines and vaccination (AEFIs) | • Includes:  
- unwanted events that are rightly associated with vaccination,  
- unwanted events that are wrongly associated with vaccination. | Of LOW impact when...  
- Event is not serious or dramatic.  
- Event is serious but not relevant in the context (e.g., reaction in another country with a vaccine not used in the country).  
- Event gets no attention in the media or public. | • It is advisable always to be prepared to respond to these events with holding statements and trained spokespersons.  
- Such events can be the cause of insecurity or anxiety in the public and may be broadly publicized.  
- Any response should be transparent and explain how the event is being investigated and how information will be shared.  
- Monitoring of media and public reactions is critical. |
| | Of MEDIUM impact when...  
- Event is serious.  
- Event is relevant in the context (e.g., in the country or in another country with a vaccine used in the country).  
- Event gets no media attention at this stage, but media attention could be anticipated. | Of HIGH impact when...  
- Media attention is high and public reactions strong.  
- Event is serious.  
- Event has unknown cause.  
- Event is memorable or dramatic.  
- Event happens during a change in immunization programme (below).  
- There are clusters of reactions (more than one).  
- There are reactions among children, teenagers, pregnant woman. | |
| Changes or new developments in the vaccination programme | • Includes:  
- introducing a new vaccine,  
- replacing one vaccine with another vaccine,  
- conducting vaccination campaigns (Supplementary Immunization Activities),  
- suspending a vaccine,  
- temporarily recalling a vaccine.  
- Can be a planned measure to improve population protection against diseases or improve safety and efficacy  
- Can be a precautionary measure in a situation of uncertainty.  
- Can take place in another country, but relate to a vaccine used in the national immunization programme. | Of LOW impact when...  
- Vaccines are replaced with only slightly reconfigured products.  
- There is no public attention. | Of MEDIUM impact when...  
- Vaccines are replaced, and there is no or very little public attention.  
- Vaccine replacements are usually of medium impact. | Of HIGH impact when...  
- There is negative media coverage.  
- There is significant public concern and a lack of understanding of reasons behind the event.  
- Cultural sensitivities create negative response, e.g., concerning the country of origin of new vaccine.  
- Change is related to vaccine safety (e.g., unwanted events happen during programme changes, or replacement was the result of an adverse event following immunization) (see above).  
- New vaccine introduction, vaccine recalls, vaccine suspensions and vaccination campaigns are usually of high impact. | |
| Public, media and scientific debate on vaccination | • Includes:  
- factual media accounts of scientific publications,  
- unverified rumours,  
- personal social media stories,  
- critical media reports,  
- new critical scientific studies.  
- Can be factual, partly factual, anecdotal or untrue.  
- Can be national or international. | Of LOW impact when...  
- Story receives little to no public attention.  
- Story does not play on emotions or fears.  
- Story is not believable  
- Research has low credibility.  
- Research is unlikely to receive public attention. | Of MEDIUM impact when...  
- Story receives some public attention.  
- Story triggers some emotional fears.  
- Research receives some public attention.  
- Story is plausible. | Of HIGH impact when...  
- Story receives significant public attention; taps into emotional fears.  
- Story has high readership/viewership.  
- Source is credible and influential.  
- Research receives significant public attention and spreads fast.  
- Source has high credibility or influence.  
- Story relates to a sensitive issue (e.g., pregnant women, infants).  
- Story is published/spreads during changes in the vaccine programme (see above). | |

Debates on the safety or necessity of vaccines are common, esp. on social media. In most cases, it is not recommended to respond in public.  
Scientific research from less credible sources, questioning the benefits or safety of vaccination, are not rare. Often they will not create any public reaction and a public response is not advisable.  
When response is required, it should be kept in mind that misperceptions are not debunked just because someone explains the facts.