

Pushed to the fringe: Vaccine hesitancy in parents and pregnant women

Abstract

Background

Immunisation is universally accepted as one of the most significant public health initiatives in recent times. However, vaccine hesitancy is an increasing problem in middle- to high-income countries and has overtaken vaccine access as the primary barrier to uptake. Vaccine hesitancy has been identified as one of the top threats to global health by the World Health Organisation. Pregnant women and children are some of the most at risk of serious sequelae from acquiring vaccine preventable diseases. Hence, pregnant women and parents of young children are the focus of this thesis.

Aim

The aim of this study was to explore the values, beliefs and choices made by pregnant women and parents regarding their hesitation or decision not to vaccinate their child or children, to determine the factors that influence this decision-making and to give a voice to vaccine-hesitant parents. Additionally, this thesis sought to explore when vaccine-hesitant parents and pregnant women make immunisation decisions, to discover from whom vaccine-hesitant parents and pregnant women obtain the bulk of their immunisation information and education, to explore the factors that influence vaccine choices, and to gain an understanding of the experiences of vaccine-hesitant parents and pregnant women.

Methods

This research consisted of three predominantly qualitative elements and data sources combined in the same study, underpinned by Durkheim's deviance theory, and informed by an ethnographic and netnographic methodology. Netnography is an extension of the ethnographic studies, however, it is not interchangeable. Data collection included an exploratory online survey, in-depth semi-structured interviews and a netnographic study of the discourses on a purpose-designed social media platform. The studies were undertaken to obtain a deeper understanding of the decision-making underpinning vaccine hesitancy and to give a voice to vaccine-hesitant parents and pregnant women.

Main findings

The main findings of this thesis include the negative impact of vaccine safety concerns on vaccine uptake. Additionally, vaccine-hesitant parents reported feeling socially isolated, marginalised, bullied and pushed to the fringe of society. The online environment, specifically social media, subjected vaccine-hesitant parents to cyberbullying and false narratives (See Glossary), which had a negative impact on vaccine decision-making. Most importantly, this research identified the critical timing for healthcare professionals to provide accurate and timely immunisation information that was reliable, thereby potentially preventing the need for seeking information from less reliable spaces.

Conclusion

The problem of vaccine hesitancy was investigated using three elements in the one research project, each designed to address the research objectives in the most appropriate way and provide triangulation of the results. The findings of this research make a significant and original contribution to knowledge about the sociocultural influences on vaccine-hesitant parents. The use of multiple methodologies explored this problem from differing perspectives, and by adopting netnography as methodology investigated the problem in a novel way. Similarly, the use of deviance as the theoretical underpinning for this research provided a unique perspective on vaccine hesitancy. The implications of these findings are multifactorial

but include the need for improved undergraduate immunisation education in nursing, midwifery and medicine. The significance of this research is that it provides a unique understanding of vaccine hesitancy with the potential to improve vaccine confidence among parents and pregnant women.

