Vaccine hesitancy refers to delay in acceptance or refusal of vaccines despite availability of vaccination services. Vaccine hesitancy is complex and context specific varying across time, place and vaccines. It includes factors such as complacency, convenience and confidence.\(^1\)

People who delay or refuse vaccines for themselves or their children are presenting a growing challenge for countries seeking to close the immunization gap. Globally, 1 in 5 children still do not receive routine life-saving immunizations, and an estimated 1.5 million children still die each year of diseases that could be prevented by vaccines that already exist, according to WHO.\(^2\)

**Considerations for countries**

Countries need to take into consideration that in low vaccine uptake situations, where lack of available services is the major factor impairing adequate vaccination coverage, vaccine hesitancy can be present but is not the priority to address and should not be the focus of their resources.

Countries should incorporate a plan to measure and address vaccine hesitancy into their country’s immunization programme as part of good practice, using and validating the compendium of potential vaccine hesitancy survey questions as this facilitates inter-country comparisons.

Education and training of health care workers should be carried out to empower them to address vaccine hesitancy issues in patients and parents. In addition, vaccine hesitant behaviours within health care workers should be addressed. Relevant training, of nursing, medical and other health care professional students, needs to be included into academic

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As part of good immunization programme practice, civil society organizations, local communities and health care workers need to be involved in supporting vaccination programs, in enhancing demand for vaccination and in helping to address vaccine hesitancy depending upon the underlying factors.

Country information on vaccine hesitancy and lessons learned should be shared among member states. In addition National Immunization Technical Advisory Groups (NITAGs) may be a valuable resource to address vaccine hesitancy and should give consideration to issues of vaccine hesitancy in their country.

Based on the recommendations of the SAGE Working Group, efforts are now underway to define and develop any additional tools to help understand and develop interventions on hesitancy.[3]