ELSEVIER

## Contents lists available at SciVerse ScienceDirect

## Vaccine

journal homepage: www.elsevier.com/locate/vaccine



Letter to the Editor

## Reply to "Preparing for the next public debate: Universal vaccination against hepatitis B"

In a recent article the National Immunization Programme Review Committee of the Health Council of the Netherlands (NIP-HCN) discusses the universal vaccination of infants against hepatitis B (HBV) [1]. In 2009 the Health Council issued an advice to commence universal vaccination of infants, to be combined with a catch up programme for adolescents [2]. Due to the public controversy over vaccination against human papilloma virus (HPV) and influenza A/H1N1 in 2009 [3], the NIP-HCN explores the crucial question what lessons can be drawn from this controversy in order to "prepare for a potential public debate that might arise when implementing universal vaccination against Hepatitis B" [1, p. 8960]. This foresight exercise is an admirable step in preempting public controversies, demonstrating the reflexive abilities of the NIP-HCN regarding its societal role. However, in these reflections some aspects regarding public communication merit further attention.

Firstly, the authors express a concern for the 'credibility' of sources of health education, and the solution is to act responsively to parents that face a decisional conflict. Providing two-sided information and addressing the thorny issues is preferred in aiding parents and in supporting the public reliability of health authorities. The question is whether, in the public's view, a single source that is promoter of a particular standpoint can perform such a dual communicative role convincingly.

Secondly, this responsive communication strategy "supports parents in making their own, well-considered choices". However, this praise-worthy approach to medical decision making is compromised by the practical organization of HBV vaccination as a combination vaccine without an opt-out possibility for HBV. By stating that "in a public programme it is inevitable that many choices are made on a collective level by policies are subject to democratic, not to individual consent" [1, p. 8963], the NIC-HCN faces the danger of creating internal friction in the programme. Parents are supported to make an informed choice on balanced information, but a negative choice cannot be realized without compromising the DKTP and Hib vaccines offered in combination. For some parents, this may stimulate, rather than ease discomfort over vaccination and the role of health educators.

Finally, credibility to a significant extent depends on the noncommunicative dimensions, as was demonstrated in psychological experimentation on attitudes towards HPV vaccination: "the experts whom laypersons see as credible ... are ones whom they perceive to share their values" [4]. Although the authors acknowledge the diversity of elements that composed the HPV and H1N1 controversies, such as conflicting expert information [5], the role of the media seems to be overstated as shaping parents attitude towards vaccination. The NIP-HCN should focus more on the cultural aspects of various communicators, rather than a single medium.

To conclude, the NIP-HCN's approach to HBV addresses a number of significant issues, but in communicating on HBV and in aiding parents to make an informed and autonomous decision, cultural dimensions of health communication and the technical limitations of the programme should be addressed explicitly and with great care if unnecessary controversies are to be avoided.

## References

- Houweling H, Conyn-van Spaendonck M, Paulussen T, Verweij M, Ruitenberg EJ. Preparing for the next public debate: Universal vaccination against hepatitis B. Vaccine 2011;29(48):8960-4.
- [2] Health Council of the Netherlands. General vaccination against hepatitis B revisited. Report 2009/03E. The Hague: Health Council of the Netherlands.
- [3] Rondy M, Van Lier A, Van de Kasteele J, Rust L, De Melker H. Determinants for HPV vaccine uptake in the Netherlands: A multilevel study. Vaccine 2010;28(9):2070-5.
- [4] Kahan D. Fixing the communications failure. Nature 2010;463:296–7.
- [5] Van Rijswoud E. Flu: weighing up conflicting expert information. Nature 2009:460(7255):571.

Erwin van Rijswoud <sup>a,b,\*</sup>
<sup>a</sup> ELAN, Faculty of Behavioural Sciences, University of
Twente, P.O. Box 217, 7500 AE Enschede, The
Netherlands

<sup>b</sup> Institute for Science, Innovation & Society, Radboud University Nijmegen, The Netherlands

\* Correspondence address: ELAN, Faculty of Behavioural Sciences, University of Twente, P.O. Box 217, 7500 AE Enschede, The Netherlands. Tel.: +31 053 4891055; fax: +31 053 4894755. E-mail address: e.vanrijswoud@utwente.nl

> 30 November 2011 Available online 14 December 2011