



9 March 2021/Sääksvuori & Kanerva

Direct interventions the most effective way to increase vaccination coverage

The distribution of COVID-19 vaccines has started and is expected to continue at least until the end of the summer of 2021. According to expert estimates, herd immunity against COVID-19 probably requires a vaccination coverage of about 60–90%. This memorandum assesses how vaccination coverage can be influenced, in particular, in the working age population, which is not at risk of serious coronavirus disease.

Three types of interventions can be envisaged to allow the authorities to influence vaccination coverage:

- 1. persuasion aimed at influencing citizens' attitudes and beliefs about vaccines;
- 2. measures highlighting the importance of the social context; and
- 3. direct actions affecting human behaviour (Brewer et al., 2017).

On the basis of the research evidence gathered on the subject, it can be stated that:

- 1. Persuasion and communication aimed at changing people's beliefs is ineffective, but not harmful in itself.
- 2. The emphasis on social norms and positive externalities of getting vaccinated may have a minor positive impact on vaccination coverage. However, there is little evidence to support this channel of influence.
- 3. The most effective way to increase vaccination coverage is direct action on behavioural factors. Such actions include direct prompting, personal reminders and making appointments for people (defaults). In a Finnish study, a simple personal reminder was also shown to have a significant effect on people who had not taken any vaccines in previous years (Sääksvuori et al., 2020).

Milkman et al. (2021) tested the effectiveness of various reminder text messages (SMS) in an extensive randomised field trial in the United States. In the study, the greatest impact on vaccination coverage was achieved with message content that highlighted the recipient's personal relationship with healthcare ("We have reserved a vaccine for you") and met the person's expectations for healthcare communication (formal and neutral messages without any surprises, unnecessary colloquialisms or garish visuals).

In addition, simple logistical factors are known to have a significant impact on vaccination coverage. Where and when vaccines are available is crucial. For example, will a nurse come and vaccinate elderly persons still living at home, or will they and the relatives caring for them need to go to the local health centre for the vaccine? For people of working age, vaccination would be easier if it could be done at workplaces or if vaccination appointments were available in evenings and on weekends. The easier vaccination is made, the more likely it is that even poorly motivated or indifferent working-age people will end up getting the vaccine.

Cancer screening programmes in Finland are already based on personal invitations. For example, since the start of the cervical cancer screening programme, deaths from this type of cancer have been reduced by 80%. However, participation in the screening varies between 61–79% at municipal level depending on how the invitation is presented. **Studies show that the highest participation rate is achieved when the personal invitation contains a pre-booked appointment and location.** (Cancer Society of Finland, 2018).





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