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Falling Vaccination Rates in MEDCs

World Health Assembly (WHA)

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Introduction

The decrease in the vaccination rates is among the most prominent cases of contemporary public health problems in developed nations. Following decades of gaining ground in eliminating and managing infectious diseases, some MEDCs currently face declining immunization rates. Though these countries have well-developed health care systems and vaccines are accessible, despite it, they are experiencing an increasing vaccine hesitancy due to misinformation, mistrust of authorities, and political polarization.

This has caused the re-emerging of some of the preventable diseases like measles and whooping cough. The decreasing vaccination levels weaken herd immunity and put at risk a more susceptible population, as well as causing more burden to the healthcare systems. Even social media has contributed to the spread of misinformation and the arguments about personal freedom and the role of the collective in the fight against the virus only worsened the attitude of the population towards vaccination efforts.

The effects are not just limited to national health. With the globalized world, vaccination rates decline in MEDCs may cause cross-border outbreaks and undermine world health security, as well as public confidence in science and institutions. This not only transforms the problem into a medical issue but also a wider societal and political issue.

Thus, the important issue among developed countries is to reverse the decreasing coverage of vaccination. The protection of the health of the population, herd immunity, and decades of medical achievements are all necessary. This report looks at the reasons behind this trend, the global response, and how a large-scale immunization can be reinstated.

Definition of key terms

Disinformation

Such information is intentionally false, and it is meant to be misleading. With regard to vaccines, the disinformation campaigns have contributed to the increased skepticism of the people towards science and health institutions.

Herd Immunity

The indirect form of protection against a disease through the establishment of the high percentage of a population vaccination to prevent the transmission. The reduction of vaccination rates in MEDCs erodes herd immunity and puts vulnerable populations at risk.

Immunization Coverage

The percentage of people who have taken certain vaccinations. The decrease in the coverage rate in the MEDCs endangers the health of the population and leads to the outbreak.

Misinformation

Facts or information that are falsified or misrepresented, usually spread via social media that makes people not have confidence in vaccines. In developed countries, an important factor causing vaccine hesitancy is misinformation.

Outbreak

An abrupt surge in the number of occurrences of a condition in a locality or a society. In developed nations, there is direct correlation between declining levels of vaccination and outbreaks of measles and other diseases.

Preventable Diseases

Controllable or even preventable infectious diseases, e.g. measles, polio or whooping cough. Diseases that are preventable have resurfaced in MEDCs due to decreasing rates of vaccination.

Public Health Campaigns

Raising health behaviors like vaccination through coordinated efforts by governments or the health organizations. Improving scepticism and opposition have called their functionality into question in MEDCs.

Vaccine Hesitancy

The unwillingness or denial to take vaccines even when they are available is defined as vaccine hesitancy The reluctance in MEDCs is usually associated with misinformation, lack of trust in the authorities, and fear of insecurity or personal liberty.

General Overview

The drop in the rates of vaccination among MEDCs (More Economically Developed Countries) is a complex phenomenon impossible to be explained by one factor. Although these nations typically possess the finances, developed health care systems, and infrastructure to afford mass immunization, several social, political, and cultural forces have played a role in declining coverage. To find the answer to this problem, it is necessary not only to consider the medical and scientific issues, but also the social views, political background, and international considerations.

Causes of the Declining Vaccination rates

Vaccine hesitancy is also one of the most critical causes of the decrease in vaccination rates. The confidence in governments, scientific organizations and drug companies has been undermined in most MEDCs. The misinformation and disinformation that is prevalent on social media platforms has contributed to this distrust. As an example, alternative facts like vaccinating children leading to autism or vaccinating children with harmful substances, have become viral on social media, even though this has been confirmed in numerous scientific studies that have been debunked. Misinformation is particularly effective in a digital community where people tend to stay in so-called echo chambers, and they are affirmed in their existing beliefs without being introduced to the other side of the argument.

Political polarization is another cause factor. Vaccination in certain nations has turned into a political or partisan and not merely a scientific or medical concern. Of course, especially in the context of the COVID-19 pandemic, the process of vaccination tended to be politicized, with the willingness to be vaccinated being associated with affiliations to specific political parties or leaders. Moreover, the situation regarding personal liberties and the necessity to regulate them by the government has fueled the opposition to compulsory or highly encouraged vaccination plans.

Also involved are cultural attitudes. There are more societies where individual choice is given more emphasis than collective responsibility. Although the concept of herd immunity is based on mass adoption, the prevalence of individual freedom may lead to a decrease in the overall coverage. Moreover, the issue is also complex because religious or philosophical beliefs discourage vaccination.

Public Health Consequences

The drop in immunisation has produced the effects which can be seen and measured. Medical conditions that were previously believed to be well contained like measles and whooping cough have returned in MEDCs. WHO reports indicate that the number of measles outbreaks is on the rise in some European nations whereby vaccination coverage had dropped below recommended levels. Not only are these outbreaks more harmful to vulnerable populations like infants, the elderly, or immunocompromised people, but they also cause extra burden to the health systems that have to address preventable diseases in addition to other health-related issues.

One of the gravest dangers of declining vaccination coverage is the wearing down of herd immunity. The whole protection against the spread of diseases through the vaccination of the population is weakened when large groups of people are not vaccinated, which gives the opportunity to spread the outbreaks of diseases faster and among a greater number of people. This is a blow to years of advancement in immunization efforts worldwide, and a setback that will roll back gains achieved that previously dramatically lowered deaths in childhood, as well as rates of infectious diseases.

Global Implications

Even though the problem is most evident in the case of MEDCs, its consequences go well beyond their boundaries. The world is highly interconnected and diseases that start in a country can easily travel to other countries. The low vaccination rates among the MEDCs raise the chances of cross-border epidemics, which pose a threat to international health security. This is especially alarming in cases like measles which are highly contagious and can be spread easily via international traveling.

Besides, the drop in vaccination rates is part of an even greater crisis of trust in scientific expertise and governmental health bodies. Vaccine hesitancy also threatens to not only delay disease prevention, but also destabilizes the trust that people place in medical inventions in the future. This has long-term implications on global health programs, including readiness to the next pandemic or embrace of new therapy and technology.

Greater Social and Political Aspects

The declining immunization rates make it clear that this is not only a health problem, but a social and political one. Anti-vaccine activism has shown the power of misinformation turning into a structured movement that shapes the opinion of the society and policy. Although these movements have varied motives, they have managed to bring people together in matters concerning individual freedom, parental rights, or distrust towards the government. This, in its turn, has complicated government attempts to raise vaccination coverage, as even such measures as mandates or restrictions tend to be met with an emphatic public opposition.

Moreover, social media has changed the face of health communication in society. On one hand, it gives a platform of disseminating accurate information, on the other, it enhances the dissemination of misinformation in an unprecedented magnitude. Government, NGO, and social media companies efforts to reverse this trend are still going on, but no sign of success has appeared yet.

Conclusion

In general, the misinformation, political polarization, cultural values, and institutional mistrust also have a complicated overlap leading to the declining vaccination rates in MEDCs. The results are severe: the revitalized preventable diseases, the damaged herd immunity, and the threats to global health security. The medical solutions will be not enough to address the problem- coordinated efforts which would include transparent communication, more vigorous control over misinformation and individual freedoms and collective responsibility in the form of public health strategies are required.

Major parties involved

Anti-vax movement

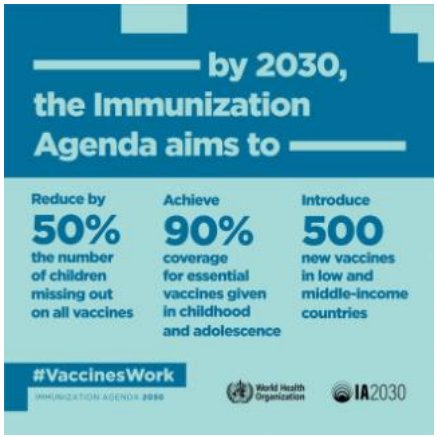
Anti-vaxxers are people who are completely opposed to vaccinations. The group of anti-vaxxers contains a lot of different people with different reasoning. These reasons range from conservatism or religion to distrust in government or believing conspiracy theories. Most people know the movement from the Covid-19 demonstrations, but it isn't new. The movement already existed in the 19th and 20th centuries. Even then activism was used to express their opinions and to "warn" people for vaccines. Between the anti-vaxxers a lot of conspiracy theories, misinformation and purposeful disinformation is being spread. This led to hesitation to take vaccinations, especially with the growing social media platforms and the COVID-pandemic. The movement could be dangerous for the health of others and affect the trust in governments and health systems.

ECDC

The European Centre for Disease Prevention and Control is an organisation of the EU. They collect data, conduct research, provide scientific advice and health training, exchange information and coordinate other bodies operating in the field. After the COVID-19 pandemic, there was a lot of misinformation about vaccines. ECDC has explored strategies to counter this misinformation. They developed methods and training programs to help authorities on this issue.

United Nations (UN): Immunization Agenda 2030 (IA2030)

The UN has different health institutions working in various health fields. Two main agencies, UNICEF and WHO, created in 2020 the Immunization Agenda 2030 in collaboration with other partners, such as Gavi and the Bill & Melinda Gates Foundation. The agenda focuses on the effectiveness, efficiency and accessibility of the immunisation systems. With 7 different strategies, the Immunizatin Agenda covers the key areas to improve. These areas include the health care system, vaccine surveillance and supply chains.



USA

The USA has been a big country in the field of vaccinations. With a large vaccine schedule, a big vaccine industry and a lot of collaboration with global projects, where they also served as a big funder. However, while most MEDCs are promoting vaccines and trying to combat misinformation, the USA is recently turning against vaccines with skepticism and decreasing vaccine promotion and distribution. The Trump administration consists of vaccine critics in high health positions, like the Health Secretary, Robert F. Kennedy Jr. With the Make America Healthy Again (MAHA) programme, the government is cutting in vaccination support and research. On 1 September 2025 Trump expressed scepticism about the success of vaccines, demanding clear information from the Centers for Disease Control and Prevention (CDC) On 22 September 2025 Donald Trump even linked a specific vaccine to autism, a conspiracy theory that is common among Anti-vaxxers and has already been debunked by multiple researchers. He also made other claims about vaccines without evidence.

Timeline of events

19th century	The earliest forms of vaccination programs and the development of multiple vaccines
1980	Smallpox is the first disease completely defeated through vaccinations.
2002	Researchers link the measles vaccine to autism; this becomes a main conspiracy theory in the anti-vax movement. Other researchers later debunked the theory.
28 September 2004	Creation of the European Centre for Disease Prevention and Control (ECDC)
August 2019	Pinterest is the first social media platform to take action against misinformation about vaccinations.
2020-2022	The COVID-19 pandemic emphasises the need for immunisation with vaccines. It also shows how vaccines could be implemented fast and efficiently.
August 2020	Creation and launch of the Immunization Agenda 2030 (IA2030)

Possible solutions

National vaccination schedules

Vaccination programs are the key to immunisation of a country. Without good and easy accessibility to vaccines, the rate will decrease. A lot of counties have some sort of schedule. The exact content differs per country depending on different factors such as the healthcare system, resources and disease burden. Most countries rely on a voluntary system. They recommend vaccines for certain diseases, but you don't have to get them. To increase vaccination rates, governments could make these programs more attractive. For example, they could promote them more through campaigns, expand the number of facilities to make them more accessible, or governments could take away the costs with tax money or through insurance companies. It is also important to make the system easy to use for citizens. Governments could create vaccination records, send reminders for appointments and communicate future doses.

The vaccination programs could also be made fully or partially mandatory, forcing citizens to take a vaccination. This is mostly implemented for children's programmes. They are required to protect themselves against the most dangerous or common diseases, such as Measles, hepatitis B and rubella. Mandatory schedules guarantee a growth in vaccination rate, eventually reaching the immunisation goal. A downside to this strategy is that the freedom of citizens is restricted. People can get scared that the government would misuse this power, especially because it affects their health or the health of their children.

Vaccination requirements

Vaccines could also be promoted without forcing citizens to take them through vaccination requirements for certain public services. Travel restrictions are already commonly used in high-risk countries, mainly in Africa. MEDCs don't require any vaccinations to travel to, but they do strongly recommend them. Other restrictions could be implemented for health care facilities, sports clubs, libraries, community centres, public schools or other public spaces.

Germany has already implemented these requirements for schools. To enter kindergarten or school, children are required to have a measles vaccination. Teachers and staff also need to be vaccinated. If the requirements are not met, they risk a fine of €2,500. Schools or kindergartens are logical places for restrictions, because children are more vulnerable to diseases and these places are at a high risk for disease transmission. If one child gets a transmissible disease, it could affect the whole school and slow down education

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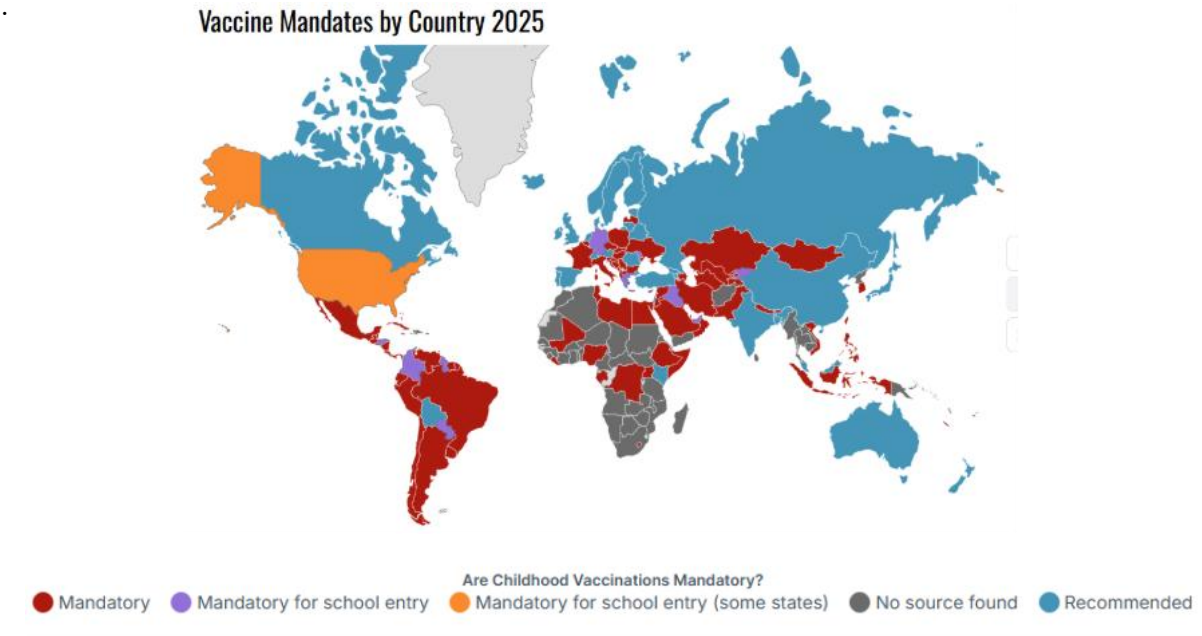


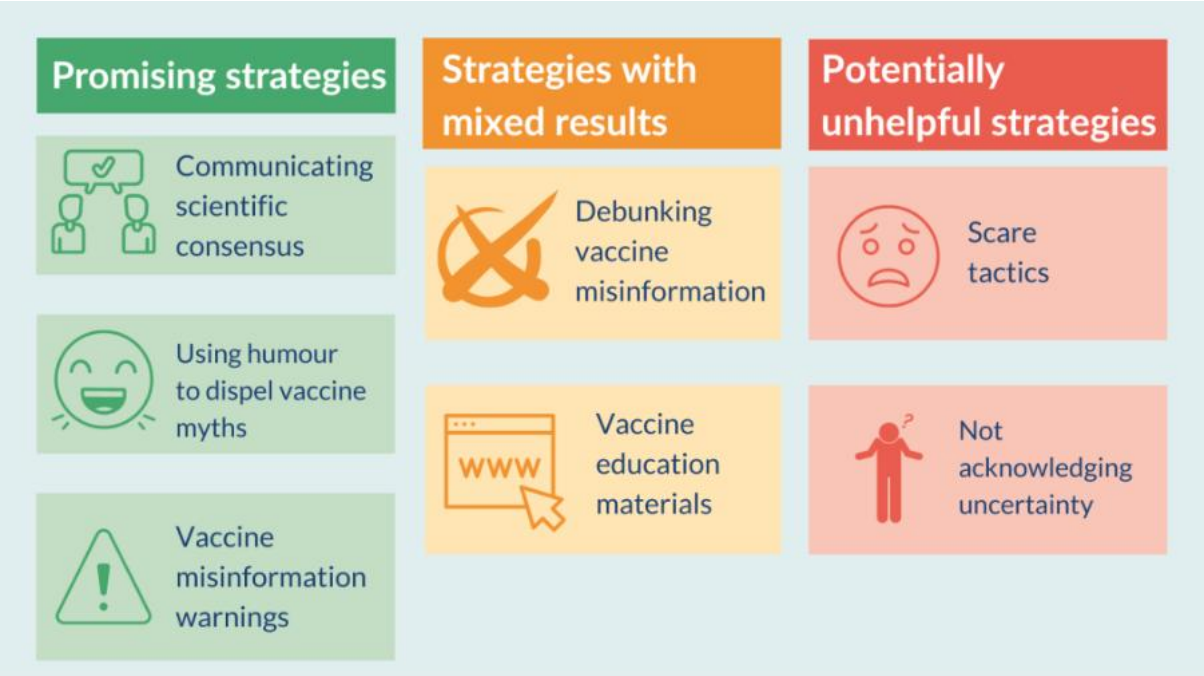
Education and awareness campaigns

A lack of education or knowledge can lead to distrust in the health care system. Therefore, it is important to inform citizens about the advantages and importance of vaccinations. This can be achieved with informative posters, advertisements or through media sources. They should focus on building trust and spreading factual information backed by research.

Misinformation is a lot harder to combat. On social media, a lot of misinformation is being spread rapidly. People can get stuck in a bubble with only the same opinions, limiting their perspectives. They are going to believe in the conspiracy theories about vaccinations. For example, claims that vaccines contain chips or cause autism. This leads to distrust in governments and the health care system. To combat this a sophisticated approach is needed. Research shows that disproving false claims, vaccine education and scare tactics are not enough to combat misinformation. The strategies should also create factual and professional information in combination with stories that connect with the audience.

Using social media content is a great way to reach this audience. Creating short explanation videos or factual posts could create awareness. It is important to create content that is likeable and fits the needs of social media users. A great way is to use existing creators to promote vaccines with an advertising campaign. These figures have already built trust and can have a big influence on people.

A more structural approach to combat misinformation is to change the way it is being shown on the platforms. Social media platforms can boost reliable sources, add warnings to posts with unreliable information about vaccinations or remove misinformation. In 2020, this approach was implemented by multiple platforms. Meta, the parent company of Facebook and Instagram, reached more than 150 million people with elevated posts in collaboration with the WHO and UNICEF. Other companies such as TikTok, YouTube and Twitter also took action.



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