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*Changing the prevention paradigm for
the future: what Europe can do*

The State of Health of Vaccination in the EU
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In a recession period like the current one, I believe that investing in prevention and promotion of an active and healthy lifestyle and in vaccination practices is not only ethically corrected, because health is a universally recognized right, but also a relevant contribution towards the creation of a more sustainable and productive society.

Under this perspective, it is essential to define programmes for the prevention and control of both non-communicable chronic diseases and communicable ones, also by implementing strategies to disseminate and facilitate vaccination practices and the choice of a correct lifestyle, according to the principle of “health in all policies”.

It is highly desirable therefore that, taking into account the scientific evidence of well-established practices of and consolidated primary and secondary prevention, in addition to the therapeutic approach, the total investment in prevention, presently very low, has to increase significantly. We need to impose a radical change. Prevention demands a different attitude towards our lives, which must be reshaped from the age of primary school on.

Health education should get in the practices of daily life and must be included into the school curricula.

This is why, together with the Italian Medicines Agency, the Italian Ministry of Health intends to insert this day into the Agenda of the Semester of the Italian Presidency and, in agreement with the European Union scientific and political orientations, we will bring the theme of Vaccines into the conclusions of the EU Council of next December.

The presence of distinguished speakers also from the United States, whom I have the honor to welcome and thank, demonstrates the global interest in the issue.

Moreover, in order to highlight the great interest of Italy in the vaccination policy, I would like to inform you that in the context of the 12 “Action Packages” described in the GHSA (‘Global Health Security Agenda’), Italy has held a leadership role in the Action Package “Immunization” and also participates in two additional Action Packages, “Antimicrobial Resistance” and “Surveillance”.

The GHSA is an initiative led by the United States of America on 13 February 2014, with the involvement of 40 countries, institutions and specialized agencies such as the European Union (EU), the World Health Organization (WHO), the United Nations Food and Agriculture Organization (FAO), and the World Organization for Animal Health (OIE).

The agenda will propose a shared mechanism of identification of and fight against the epidemic risk caused by new and re-emerging diseases that can spread very quickly due to the increase of global travel and trade.

The threats to health arise from at least five sources:

- The emergence and spread of "new" pathogens;
- The globalization of travel and food consumption;
- The rise of drug-resistant pathogens;
- The risk of accidental or intentional release of pathogens from a number of laboratories for research and development that different countries have implemented;
- The acquisition by terrorists of practices for the development and use of biological agents as weapons.

This leadership comes from the strong awareness of the importance of vaccination as a means of preventing and fighting communicable diseases as well as an awareness that in our country the culture of vaccinations has deep roots and that “our health care system, together with vaccination” is one of the best in the world.

It also stems from the peculiarities of our system, which provides full integration between human and animal vaccine systems, in line with the approach of 'One Health' recommended by research and international agencies. Italy has adopted this approach since the birth of its health system: vaccination of animals represents a fundamental cornerstone of the national vaccine system especially in the light of the epidemic surrounding our country in the Mediterranean area, that the NHS succeeds to curb, thus protecting Italian livestock and ensuring the quality of the entire food chain. This as you know is another crucial element to demonstrate the economical return on investment on health.

In Italy, vaccinations are included in the National Calendar in a broad consultation involving all the institutions and major scientific societies dealing with vaccination activities; they take into consideration in addition to the criteria of effectiveness and safety, also evaluation of socio-economic issues and health technology assessment.

It is of note that the European Commission has always paid attention to the prevention of infectious diseases, promoting the exchange of good practices and experiences related to vaccination programs between the Member States. However, the area of immunizations is characterized by weak political commitments on the part of some Member States. There is often insufficient understanding of the value of vaccination among both health care and public.

Despite the undeniable benefits of routine vaccination programs, we are witnessing on a global level, a gradual increase in the number of parents who show concern about the safety of vaccines and the real need to vaccinate their children who are subject to national recommendations.

These parental doubts, fuelled also by pseudoscience or the inadequacy of some health workers, lead to the decision to postpone the administration of vaccinations or even to reject them, exposing children to an unacceptable risk of contracting preventable diseases which can cause flare-up epidemic involving other population groups.

These and other aspects have been dealt with the “Conclusions on Childhood Vaccination”, adopted by the EU Council on June 2011. The document has marked the path for the strengthening of policies on vaccination within the European Union. In particular, the themes that have been highly stressed are: to maintain a high coverage for childhood vaccinations; to improve the monitoring of preventable diseases thanks to vaccines; to have the means which enable registration at the national level of the vaccinations implemented; and to monitor the coverage rate both at the national and European levels.

Although the autonomy of the Member States in the definition of the Vaccination Calendar has been reaffirmed, it underlines the critical importance of shared objectives and methods for the control, elimination or eradication of infectious diseases - that can be prevented by vaccines within the European Union. The Ebola case demonstrates the need to find global and comparable solutions.

Among the key actions, several have been highlighted:

a) free access to vaccines included into the Vaccination Calendar and covered by the NHS with priority given to the most vulnerable population groups;

b) request for informed dissent to the parents who refuse the vaccines scheduled in childhood and the check of the immunization status at entry in pre-school or primary school. (In Italy, this action has not been introduced yet);

- c) availability of new and additional opportunities to be vaccinated with the aim of improving accessibility of this relevant preventive mean (for example: Immunization Days or Vaccine Campaign in the schools, and in wider terms, the simplification of the access to vaccination, by overcoming bureaucratic, social, and cultural barriers;
- d) efficient informative campaigns based on logic and innovative strategies to combat the anti-vaccination lobbies.

In addition, the national vaccines programs do not take into account the status of population ageing and by consequence, the different epidemiology at the EU level.

The European Commission has translated the harmonization principles of the vaccines policies in the Decisions of October 2013 that concerns serious transnational threatens to Health (Decision of the European Parliament and Council n. 1082/2013/UE).

It seems to me that it is sound policy to insert the information on vaccination into programs of primary prevention, which are directly related to lifestyle, in order to contribute to the prevention of chronic non-communicable diseases which represent more than 86% of death and 77% of years lost of healthy life.

I firmly believe that it is necessary to implement a set of actions directed:

- to affirm the crucial role of the promotion of health and of prevention as features of the development and growth of our society and of welfare sustainability, in particular in light of new demographic dynamics and in line with the approach “One Health” that I have mentioned above.
- to adopt public health approach that guarantees equity and a reduction of disparities;

- to express the cultural vision in values, objectives, and methods of public health (matured even through experiences of two previous PNP) of a “prevention, promotion and protection of health” that considers populations and individuals at the centre of interventions with the purpose of achieving the highest possible level of health.
- to base the interventions needed for prevention, promotion and protection of health on the best efficient practices equally implemented, and these practices must be set up in order to reduce inequalities;

- to accept and manage the challenge of cost-effectiveness of interventions, of innovation, and of governance;
- to pursue the development of competences of experts, population, and individuals for an adequate and responsible use of available resources.

In a landscape so complex and full of challenges, a cross-cutting approach among policy-makers, industries, non-governmental organizations, associations, and academics is needed; however, it is also critical to integrate health in such diverse areas as education, environment, tax systems, research, social affairs, and foreign affairs to provide coherent answers for all of our citizens, in light of total transparency.

Indeed, the inter-sectoral collaboration allows development of relevant action on the determinants of health in a more efficient, effective, and sustainable way than those that could be implemented within the health sector alone. Primary and secondary prevention helps people to live longer and healthier; the goal should be matching or reducing as much as possible the distance between life expectancy and healthy life expectancy: this is the objective that the EU should commit itself to achieve.

In order to provide influential and documented information to the citizen, two primary strategies have been identified:

- First, the monitoring of websites and social networks, to understand the real worries and concerns about vaccinations in the population, and to provide evidence-based answers, accessible and understandable by people without medical culture;

- Secondly, the use (even at the institutional level) of social media (Facebook, Twitter, YouTube, etc.) as effective tools to spread the right vaccination culture.

Indeed, it is important to promote active and targeted communication to the different stakeholder groups, overcoming the traditional passive communication channels, whose are insufficient to ensure the maturation of conscious and correct choices.

Another critical aspect is continued support of the expertise and skills of the healthcare professionals to improve and assure success of the very important dialogue with the citizenry.

The technical and scientific training, including communication skills and soft skills with the people, should start at university, with a greater focus on prevention and vaccinations in particular, and then should continue throughout one's professional development. Appropriate communication is a fundamental dialogue tool with the citizen—it must be structured through an evidence-based approach of effectiveness and best practices of social marketing that the health sector should learn and adapt to its context.

It is clear that only through a new alliance between institutions and stakeholders, including scientific societies, and only through a new ethic of communication and relation with the public, is it possible to ensure that people have access to vaccinations, which are an essential service for public health although sometimes difficult to understand due the logic of care giving that enhances the relationship between the patient and the physician.

Bringing the theme of the immunization in the political agenda of the Council at the end of the Italian Presidency of the EU in December will increase the value of the services offered for immunization and vaccines, both human and animal, through integration in the health systems of each EU member country.