

The parents' choice of non-vaccination of their children: internet information and social media influence on that

Abstract

The contemporary anti-vaccination movement has reignited in England since the 1990s and has spread out to other countries in Europe, USA, Canada, Japan, Australia, among others, with widespread dissemination of anti-vaccination information on the internet and on social media. In Brazil, even with a successful and extensive National Immunization Program, the information coming from the Internet has played an important role in the issues concerning vaccination in some social groups, such as the strata of highly educated and high income families in large cities. This written project aims to discuss the influence of healthcare information, especially information related to vaccination, which can paradoxically generate a population with much more autonomy over their healthcare decision, and at the same time it provides a sense of expertise in the subject, even when facing superficial information or misinformation.

Keywords: immunization, child care, parents, information, social networking

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Introduction

The first anti-vaccination movements began in Europe, as a response to public measures of smallpox compulsory vaccination in the second half of the 19th century and beginning of the 20th century.¹ The modern anti-vaccination movement, however, reignited in England from 1998, after the publication of Wakefield et al.² which suggested an association of the MMR vaccine (measles, mumps and rubella) with autism and intestinal inflammation, a fact that was later revealed to be fraudulent.³ The article triggered a growing anti-vaccination movement in Europe, USA, Canada, Japan, Australia, among other countries, manifesting mainly through websites and blogs.⁴ In this scenario, the information coming from the internet and social media have played an important role in the problematization of the vaccine by some segments of society.

In Brazil, in the 1970s and 1980s, low vaccination coverage was mostly associated with issues related to the low income people access to vaccines. With the expansion and effectiveness of the Brazilian National Immunization Program (PNI), from the 2000s on, vaccine failures were more associated with issues related to the acceptability of vaccination to parents with higher schooling and higher income in large cities.^{5,6} Even given the specificities of the Brazilian context (such as the epidemiological scenario of immunopreventable diseases and the PNI success), information on vaccines and vaccination on the internet and social media has brought the country closer to different realities similar to developed countries.

The influence of information

Information on vaccines, regarding the diseases situation, severity of the diseases that the vaccines immunize or protect from, the composition of the vaccines, side effects, vaccination schedules, among others, have taken a decision-making place for the parents decision not to vaccinate their children. This has been presented in a study carried out with highly educated parents with higher income and residents in Brazil.⁷

The scientific literature presents studies that analyzed the content of websites with anti-vaccination message, emphasizing the reckless character of the large presence of misinformation and emotional appeal towards lay parents.^{8,9}

The internet and its possibilities offer a huge amount of information concerning the medical and health areas, information that was before exclusivity for professionals, especially physicians. This new conjuncture allows a change in everyone's health care and it allows autonomy-empowerment. It redefines the relationship between health professionals and individuals and groups, where the traditional passive patient position, "blind trust", is replaced by an active attitude of exchange, "informed confidence".¹⁰ Health information available on the internet often has medical jargon that is difficult to understand, a plurality of information or information that is "incomplete, contradictory, incorrect or even fraudulent. For this reason, an average person often finds it difficult to distinguish, for example, the factual information from deceitful information or the unpublished from the traditional",¹¹ in addition to that internet information related to health care can cause distress and uncertainty.

Thus, the "informed patient", who achieves autonomy in health care understandings, may be facing a multitude of quality information, doubtful validity and even a trap, in which the perception of having more health information makes him feel like an expert in the subject, even when there is a possibility of acquiring superficial knowledge. It amplifies our knowledge, our ideas and our possibilities for intervention, but it also often promotes confusing, erroneous perceptions, conflicting, scattered or superficial knowledge. The "expert patient" represents more than the "informed patient" because he or she feels understood the subject.¹¹

In the context of vaccination, the feeling of restlessness or discomfort may lead some parents to seek information and opinions about vaccination and to share the information with others¹² This phenomenon in the field of vaccination, which includes the plurality of information, the imprecision of its quality, and the profile of the

expert parents, revealed the selective way in which some parents processed the information pros and contra vaccination, according to the capacity of subjective capture and Interest of these subjects.^{7,13}

Conclusion

Finally, the Internet and social medias provide access to an exuberant level of information unprecedented in history, unlike other media (such as TV and radio), as there is an active stance on searches and interactions, even if virtually.¹¹ It provides a potential process of individual and group autonomy, but paradoxically, the excess of information is not necessarily associated with the apprehension of knowledge and reflexive and critical posture.

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Conflict of interest

Author declares that there is no conflict of interest.

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