

# Considerable doubt about rubella screening and vaccination intention among unvaccinated orthodox Protestant women

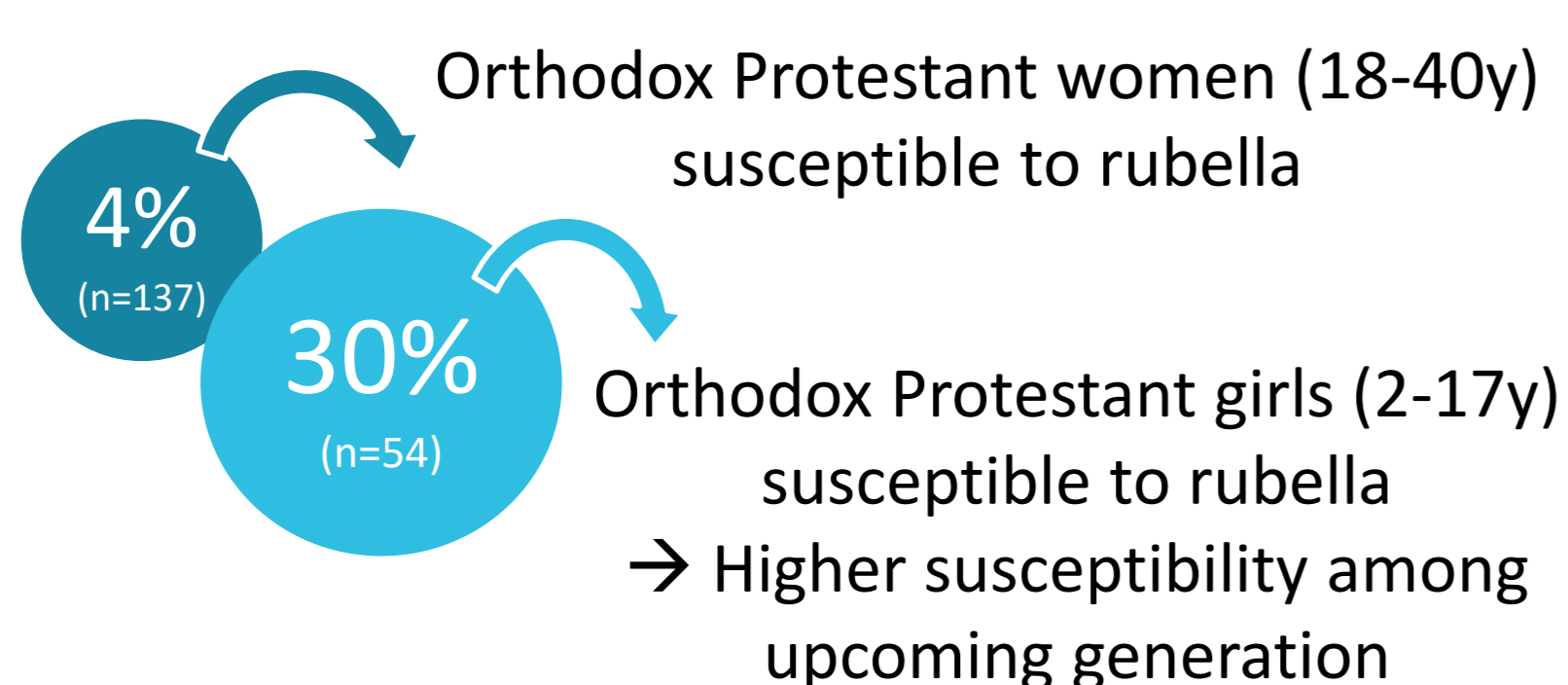
Anne C. de Munter<sup>1,2,3</sup>, Jeannine L.A. Hautvast<sup>1</sup>, Wilhelmina L.M. Ruijs<sup>4</sup>, Robert A.C. Ruiter<sup>5</sup>, Marlies E.J.L. Hulscher<sup>6</sup>

## Conclusions

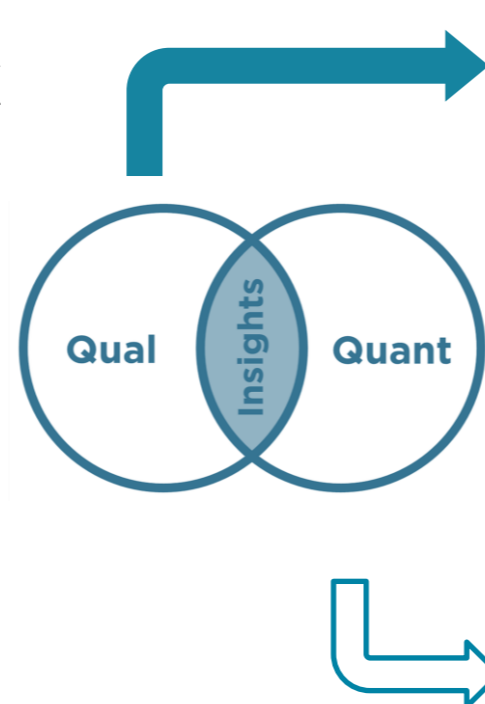
- Many unvaccinated orthodox Protestant women consider themselves unsusceptible to rubella
- Perceived non-susceptibility is mostly based on their parents' statement on childhood diseases
- More than half of the women is undecided about accepting rubella susceptibility screening
- More than half of the women is undecided about accepting rubella vaccination
- Women need clear information to make deliberate, informed screening and vaccination decisions

## Introduction

- Unvaccinated women who are susceptible to rubella are at risk of infection during future pregnancies, and thus at risk of congenital rubella syndrome in their unborn child
- In the Netherlands, rubella outbreaks occur periodically in the under-vaccinated orthodox Protestant community



Source: National Institute for Public Health and the Environment, epidemiology department



This poster presents the results of a mixed-methods study that aimed to gain insight in and determine:

- personal experience with rubella
- perceived rubella susceptibility
- intention to accept rubella screening
- intention to accept rubella vaccination

**Interviews** conducted March-August 2017

**10** unvaccinated orthodox Protestant women aged 23-34y

Recruitment: key persons and snowball sampling

Data analysis: thematic analysis in Atlas.ti

**Online survey** conducted Oct 2018-Jan 2019

Recruitment: midwife practices, child health clinics, (social) media and snowball sampling

**167** unvaccinated orthodox protestant women aged 18-40y

- 78% is married/has partner;
- 65% has child(ren) and/or is pregnant;
- 93% has moderate or high education level

Data analysis: descriptive analysis in SPSS

## Results

### Personal experience with rubella

- Survey: **74%** had personal experience with rubella **61%** had had rubella (self-reported)\*
- Interviews: Few women remember having rubella as child. Rubella was not considered as something happening at present due to the absence of outbreaks

### Perceived rubella susceptibility

- Survey: **69%** considered herself not susceptible\*, **24%** was unsure about her susceptibility, **7%** considered herself to be susceptible

**Personal experience and perceived susceptibility:**  
"My mother wrote them (childhood diseases) all down in a booklet. You just got ill and that was part of it, you had measles or you had rubella and then you were happy, then everyone was happy that you had had it, because then you had antibodies."



#### Vaccination intention:

"If you would often read it is very dangerous to have rubella in your pregnancy, then you would think about it. But not now."

### Intention to accept rubella screening

- Survey: **56%** was undecided about accepting rubella screening. **23%** would certainly refuse and **21%** would certainly accept screening.
- Interviews: 2/10 women received rubella antibody screening. Screening not actively requested by women themselves.

### Intention to accept rubella vaccination

- Survey: **55%** is undecided about accepting rubella vaccination. **41%** would certainly refuse and **4%** would certainly accept vaccination.
- Interviews: No current rubella outbreak, having had 'all childhood diseases' and various religious arguments were reasons mentioned not to accept rubella vaccination.

## Recommendations

- **Health care providers:** Provide adequate information on rubella and possible imminent outbreaks to unvaccinated women. Support decision-making in order to stimulate women to make a deliberate and informed decision on rubella screening and, if necessary, subsequent vaccination.
- **Future research:** Investigate rubella perception and screening and vaccination intention among other under-vaccinated subgroups.

### Affiliations

<sup>1</sup> Radboud university medical center, Radboud Institute for Health Sciences, Department of Primary and Community Care, Nijmegen, The Netherlands

<sup>2</sup> GGD Gelderland-Zuid, Department of Infectious Disease Control, Nijmegen, The Netherlands

<sup>3</sup> GGD GHOR Nederland, Utrecht, The Netherlands

<sup>4</sup> National Institute for Public Health and the Environment, Centre for Infectious Disease Control, Bilthoven, The Netherlands

<sup>5</sup> Maastricht University, Department of Work & Social Psychology, Maastricht, The Netherlands

<sup>6</sup> Radboud university medical center, Radboud Institute for Health Sciences, IQ healthcare, Nijmegen, The Netherlands

**Funding** This research study was supported by the research fund of the Dutch National Institute for Public Health and the Environment (RIVM), the Netherlands, for local Public Health Services

### Contact

Anne de Munter

[Anne.deMunter@radboudumc.nl](mailto:Anne.deMunter@radboudumc.nl)



Radboudumc

