

Books and electronic media

Vaccine anxieties: global science, child health and society

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Since its very inception, the practice of mass vaccination has frequently met with ambivalence and occasionally encountered open resistance. For many health professionals, this opposition was and remains a mystery. How can parents deny their children a preventive treatment of such obvious individual and public benefit?

The lack of public acceptance of vaccination is often explained as resulting from an information and knowledge deficit. The British social anthropologists Melissa Leach and James Fairhead draw on experiences from their extensive ethnographic fieldwork in the United Kingdom and several west African countries to argue that this attitude overlooks how people themselves understand health and vaccines, and whether a globalized medical technology meets the profoundly personal, social and cultural worlds of infant care. They maintain that the concepts of risk, trust and rumour that have been the cornerstones of existing policies and social science discourse on resistance to vaccination are inadequate and are actually part of the problem. The authors prefer the notion of "anxiety", which can both denote an uneasiness of and a desire for a technology, and encompasses bodily, social and political dimensions. According to them, this term captures well the ambivalence of attitudes and the often deeply personal struggles that people face when making decisions about vaccination.

Leach & Fairhead steer clear of portraying parents as being easily and carelessly influenced by dubious information or as merely following the agenda of an ill-defined "anti-vaccination movement". Rather, they draw on the conceptual tool of "framing" to study the different perceptions of parents and public health practitioners: attitudes towards medical technology can be seen as a kind of story-telling by communities situated

in particular times and places, attempting to deal with potentially troubling challenges in their lives. The "story", the "frame", gives meaning to complex and challenging experiences. In the United Kingdom, for example, attitudes towards vaccination are embedded into a context of personalized perspectives concerning parenting, child development and health. Whereas epidemiology takes a population-based approach to risk, parents facing the decision to have their child vaccinated might view the situation from a different perspective – that of the specific health history of the family and the child and of personal experiences with institutions. Parents do not assess risk on a population level, but in relation to their child. Public health practitioners and many citizens often have views of government, society and of the body that are at odds with one another and to describe those opposing views using concepts such as ignorance of "sound science" seems highly inappropriate to the authors of this book.

In west Africa, traditional ideas about the causes of health and disease affect attitudes towards vaccination, but other factors matter as well. Particularly interesting are the social dimensions of attendance at vaccination sessions. Not only in remote areas, but also in urban areas, vaccination attendance is not just a parental decision, but a matter of community orchestration. This most often encourages attendance, but in some cases can lead to stigmatization, because the state of the child does necessarily reflect the moral status of the mother. Vaccination also has wider political dimensions. International vaccination campaigns are often disconnected from nationally

administered routine services and thus invite suspicions. Routine services represent flows of benefits from a sovereign, benevolent state, and the integration of disease eradication programmes into routine services is seen by Leach & Fairhead as an important step forward.

The authors offer a stimulating, fresh, but not necessarily comfortable, look at the vaccination controversy, and their book should prove valuable reading for a broad specialist and non-specialist audience. Readers will find that familiarity with the terminology of anthropology and modern social studies of science and medicine is, however, helpful. The analysis and the conclusions of the book will not serve as easy ammunition for any side of the debate. The authors emphasize that vaccines save lives, promote child health and reduce disease burden among the poor. But they are adamant that vaccine anxieties need to be taken seriously. Leach & Fairhead maintain that vaccine delivery systems must suit social, cultural and political realities. The ethnographic perspective does suggest several possible means to bridge the gulf that has emerged between parents and what the authors describe as "vaccination technocracies". They recommend that information should not be delivered in a top-down manner, but that a more dialogue-based approach, acknowledging the possible complementarities between "traditional" practices and "modern" medicine, needs to be developed. Acceptance of all parental worries and anxieties is not necessarily called for, but at least more attentiveness to these issues by public health practitioners. ■

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Letters

Please visit <http://www.who.int/bulletin/volumes/86/9/en/index.html> to read the following letters received in response to *Bulletin* papers:

Evaluation of the WHO Assessment Instrument for Mental Health Systems, by Hamada Hamid, Karen Abanilla, Besa Bauta & Keng-Yen Huang responding to a letter from:

Saxena S, Lora A, van Ommeren M, Barrett T, Morris J, Saraceno B. Evaluation of the WHO Assessment Instrument for Mental Health Systems. *Bull World Health Organ* 2008;86:656.

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