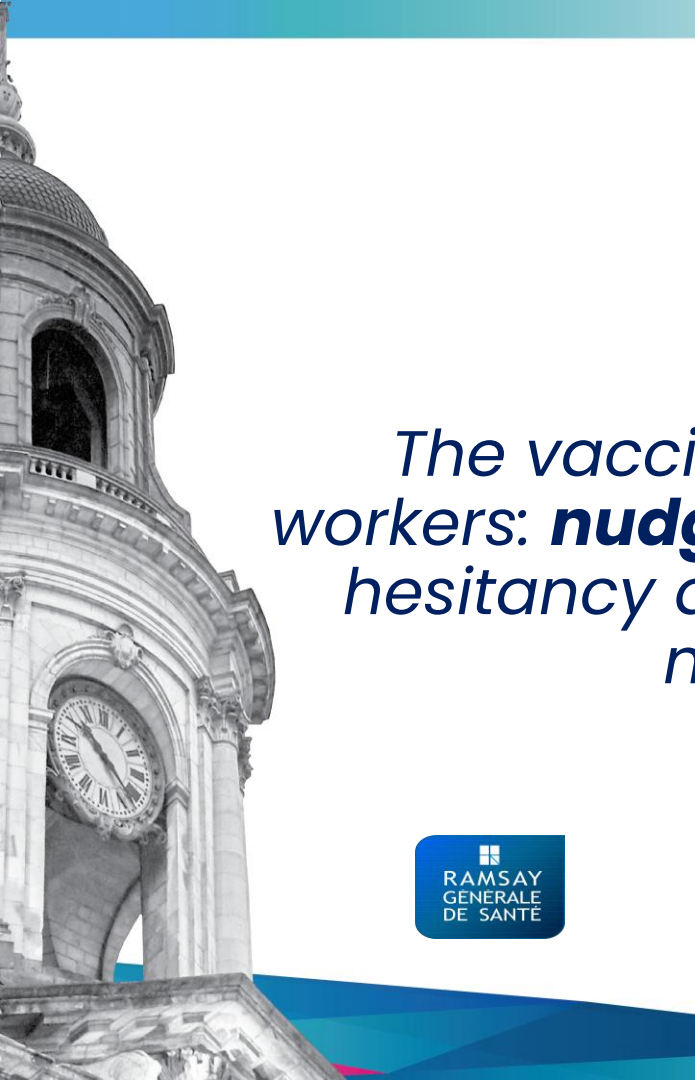

EHMA 2025

Taking action to improve health for all

*The vaccination issue in healthcare workers: **nudging** as a strategy to manage hesitancy and reflections on decision-making autonomy*

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Objectives

- Evaluate the impact of **cognitive biases** and heuristics on choice architecture related to **vaccine hesitancy**;
- Present existing proposals for **managing HCWs' hesitancy**;
- Evaluate the effectiveness of **nudging*** in reducing HCWs' vaccine hesitancy;
- Analyze the impact of nudges on **individual autonomy of choice**.

*** "gentle pushes" that can predictably influence the decision-making process, bypassing the physiological cognitive biases of human beings (*Thaler R. and Sunstein C., 2008*)**

Methodology

The stated objectives have been achieved by means of a

scoping review

(*Pubmed, Embase and gray literature sources*)

***Main Reference Book: Thaler R.H., Sunstein C.R. *Nudge: improving decisions about health, wealth and happiness*. New Haven, CT: Yale University Press, 2008.**

Results

✓Impact of cognitive biases on choice architecture related to vaccine hesitancy

- Due to cognitive economy, humans **do not behave as perfect rational decision makers**, especially under conditions of risk and uncertainty (*Kahneman D., 2013*);
- Biases occur **predictably** in particular circumstances: **frequency estimation**, **causal inferences** *versus* temporal *consecutio* (*Kahneman D., 2013*);
- Cognitive biases can **unconsciously influence HCWs' arguments** against vaccination, even in a population of «experts» (*De Vries R. et al., 2022*).

Results

✓Present existing proposals for HCWs hesitancy's management

- **Structured information campaigns**, to counter false beliefs and build more awareness (*Zuo C. et al., 2022*) → slightly increase (5-10%) vaccination adherence if carefully planned (*Zhao X. et al., 2021*);
- **Mandatory vaccination**: sharply increases (+80%) vaccination coverage (*Plutino M., 2017*), but → sense of threat to individual freedom, distrust in hospitals' health policies, repercussions on professional belonging feelings (*Okpani A. et al., 2024*);
- **Economic Incentives**: moderately increases (15-20%) vaccination coverage (*Doherty T. et al., 2024*), but → important ethical implications, for example economic needs as a lever (*Mohapatra S., 2017*).

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Results

✓Evaluate the effectiveness of nudging in reducing HCWs' vaccine hesitancy

- **Nudging campaigns** increase (about 50%) vaccination adherence with a good degree of acceptance by HCWs (*De Vries R. et al., 2022*), but → ethical implications (*Zorzetto S. e Ferraro F., 2019*: stealth manipulation of people's behavior?);
- Interventions of great sustainability and feasibility (*Benartzi S. et al., 2017*): arrows and signage, technological reminders (*Munscher R., 2016*), **mobile vaccination stations** in the wards, **peer vaccination** (*De Vries R., 2022*), narrative videos and testimonials (*Renosa M. et al., 2021*).

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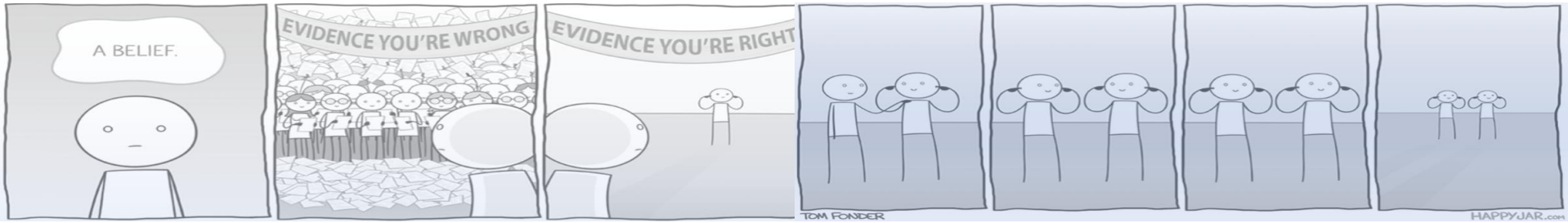
Results

✓Analyze the impact of nudges on individual autonomy of choice

- **Liberal paternalism** of nudging is not coercion, but rather an invitation to follow a certain behavior to **optimize individual choice**, for oneself and for others, in conditions of information complexity and risk of biases *(Thaler R. and Sunstein C., 2008);*
- Liberal paternalism does not exercise manipulation on freedom of choice, provided that the **"Principle of Publicity"** (*John Rawls, 1971*) is not violated;
- There is no doubt that people can make mistakes and learn from them, but this is permissible only when **no harm is caused** to oneself or others (*John Stuart Mill, 1859*).

THANK YOU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