

Research-cum-action project on vaccine communication in Switzerland:

Swiss Regional Heterogeneity of Vaccination Values and Beliefs

EXECUTIVE SUMMARY

This report documents the implementation and outcomes of the project "Swiss Regional Heterogeneity of Vaccination Values and Beliefs Phase II and Phase III," conducted by Swiss Tropical and Public Health Institute under contract with the Federal Office of Public Health (BAG/FOPH). The project generated new evidence on maternal vaccination communication in Switzerland and developed a practical training tool to support healthcare providers in vaccine counseling during pregnancy, directly advancing Switzerland's National Vaccination Strategy goals.

Project Purpose and Objectives

The project employed a research-cum-action methodology combining empirical research with practical intervention development. Phase II focused on evidence generation through two complementary assessments: a qualitative needs assessment of prenatal healthcare providers examining their experiences, training, and communication practices regarding maternal vaccination, and collaboration with the Swiss Infant Feeding Study (SWIFS) 2024 to assess pregnant women's experiences with maternal vaccination advice and vaccine uptake. Phase III focused on adapting an evidence-based tiered communication training for use in Switzerland and disseminating it to prenatal care physicians.

Key Activities

The healthcare provider needs assessment involved semi-structured interviews prenatal healthcare providers, including both midwives and gynecologists. Interviews explored providers' education in vaccination and communication, organization of prenatal vaccination services, communication approaches used with pregnant patients, and support needed for effective vaccine counseling.

The maternal vaccination assessment integrated questions into SWIFS 2024, a nationally representative survey of 1,269 postpartum women across all Swiss language regions. The survey assessed whether mothers received vaccination advice during pregnancy, their uptake of influenza and pertussis vaccines, and reasons for accepting or declining vaccination.

Based on findings from both assessments and feedback from 18 participants at the National Vaccination Strategy Workshop in June 2024, the project team adapted the MI4MI (Motivational Interviewing for Maternal Immunization) training developed by Prof. Dr. Sean T. O'Leary at the University of Colorado for use in Switzerland. The adaptation involved substantial modifications to ensure cultural appropriateness, particularly regarding presumptive communication approaches. The final 3-part asynchronous online training in German was completed in October 2025 and distributed to gynecologists in German-speaking Switzerland through professional networks.

Main Findings

The healthcare provider assessment revealed critical insights into professional identity differences between midwives and gynecologists that shape vaccine counseling. Midwives

emphasized patient autonomy and informed choice, often avoiding personal recommendations, with several reporting they were taught that vaccine recommendation was "not their responsibility." In contrast, gynecologists positioned themselves as active vaccine advocates from a public health perspective. Both groups reported receiving general communication training but no specific training on vaccine communication or addressing vaccine hesitancy.

The SWIFS 2024 collaboration provided the first nationally representative data on maternal vaccination in Switzerland. While 85% of mothers reported receiving vaccination advice during pregnancy, uptake varied substantially by vaccine: 70% received pertussis (Tdap) vaccination during pregnancy compared to only 22% for influenza vaccination.

Both assessments converged on an important finding: healthcare provider recommendation is the single most powerful driver of maternal vaccine acceptance, with 82-91% of vaccinated mothers citing provider recommendation as a key motivator. Conversely, lack of provider recommendation was cited by 32-43% of non-vaccinated mothers.

Project Outputs

The project successfully produced multiple deliverables: two major research reports (Master's monograph documenting the healthcare provider needs assessment, SWIFS 2024 final report including maternal vaccination findings); two research datasets with secure long-term storage; survey instruments (healthcare provider interview guide, SWIFS maternal vaccination questions translated to four languages); one complete 3-part tiered communication training tool in German hosted on publicly accessible platforms (YouTube and Genially); training distribution materials; and a manuscript in preparation for submission to Swiss Medical Weekly analyzing SWIFS maternal vaccination data in greater depth.

Dissemination activities included presentations at two National Vaccination Strategy Workshop sessions in June 2024 with 18 participants providing feedback, and distribution of the completed training to gynecologists in German-speaking Switzerland through professional networks in October 2025. The project established productive collaborative partnerships with the SWIFS research team at ZHAW and Swiss TPH, and with Prof. Dr. Sean T. O'Leary's MI4MI team at the University of Colorado.

Key Conclusions and Recommendations

The tiered communication training developed through this project provides prenatal care physicians with evidence-based techniques for initiating vaccine discussions using culturally adapted presumptive approaches and employing motivational interviewing when patients express hesitancy.

Midwives face both substantial knowledge gaps (vaccination described as marginal in their education, no confidence addressing hesitancy) and professional identity barriers (viewing neutral, non-directive stance as appropriate practice). These barriers cannot be addressed through communication skills training alone but require foundational vaccine education and professional role reconceptualization.

The project recommends further evaluation and refinement of the tiered communication training with physician end-users, followed by professional production of final versions in German, French, and Italian for inclusion on the E-VACTS platform.

Future work should focus on midwives' distinct training needs, addressing both foundational vaccine knowledge and reframing promotion of maternal vaccination as a core component of high-quality prenatal care compatible with midwives' professional values.