Basic information

2017/2951(RSP) RSP - Resolutions on topical subjects	Procedure completed
Resolution on vaccine hesitancy and the drop in vaccination rates in Europe **Subject** 4.20.01 Medicine, diseases	

Key players

European Parliament	**Committee responsible**	**Rapporteur**	**Appointed**
	ENVI Environment, Climate and Food Safety	SOMMER Renate (PPE)	25/10/2017
		GENTILE Elena (S&D)	25/10/2017
		PIECHA Bolesław G. (ECR)	25/10/2017
		MEISSNER Gesine (ALDE)	25/10/2017
		KONEČNÁ Kateřina (GUE/NGL)	25/10/2017
		AFFRONTE Marco (Verts/ALE)	25/10/2017
		D'ORNANO Mireille (EFDD)	

European Commission	**Commission DG**	**Commissioner**
	Health and Food Safety	ANDRIUKAITIS Vytenis Povilas

Key events

Date	Event	Reference	Summary
18/04/2018	Debate in Parliament		
19/04/2018	Decision by Parliament	T8-0188/2018	Summary
19/04/2018	Results of vote in Parliament		
19/04/2018	End of procedure in Parliament		

Technical information

Procedure reference	2017/2951(RSP)

Procedure type	RSP - Resolutions on topical subjects
Procedure subtype	Debate or resolution on oral question/interpellation
Legal basis	Rules of Procedure EP 142-p5
Stage reached in procedure	Procedure completed
Committee dossier	ENVI/8/11391

Documentation gateway

European Parliament

Document type	Committee	Reference	Date	Summary
Amendments tabled in committee		PE616.893	31/01/2018	
Motion for a resolution		B8-0188/2018	18/04/2018	
Motion for a resolution		B8-0195/2018	18/04/2018	
Text adopted by Parliament, single reading		T8-0188/2018	19/04/2018	Summary

European Commission

Document type	Reference	Date	Summary
Commission response to text adopted in plenary	SP(2018)401	30/08/2018	

Resolution on vaccine hesitancy and the drop in vaccination rates in Europe

2017/2951(RSP) - 19/04/2018 - Text adopted by Parliament, single reading

The European Parliament adopted a resolution tabled by the Committee on the Environment, Public Health and Food Safety on vaccine hesitancy and the drop in vaccination rates in Europe.

Parliament noted that **vaccination prevents an estimated 2.5 million deaths** each year worldwide and reduces disease-specific treatment costs, including antimicrobial treatments. Accordingly, it noted with concern that epidemiological data on the current vaccination situation in Member States show **important gaps in the acceptance of vaccines** and that the vaccination coverage rates necessary to ensure adequate protection are insufficient. Members were concerned that growing and **widespread vaccine hesitancy** has assumed worrying proportions. In this connection, it pointed out that Europe is currently facing avoidable **measles outbreaks** in a number of countries owing to vaccine hesitancy.

The resolution called on Member States and the Commission to **reinforce the legal basis for immunisation coverage**. It pointed out that, according to objective 1 of the European Vaccine Action Plan 2015–2020, introducing an appropriate legislative framework is crucial to defining national priorities.

Increasing coverage: Parliament called on the Commission to:

- facilitate a more harmonised and better aligned **schedule for vaccination** across the EU, to share best practices, to explore, together with Member States, options for establishing an EU platform for the monitoring of the safety and effectiveness of vaccines, to ensure even coverage across Europe, to reduce health inequalities and to help boost trust in vaccines;
- establish **targeted vaccination initiatives**, such as a ‘European influenza vaccination day’, which could be used each year to launch the vaccination campaign in line with the 75 % coverage target laid down in the Council recommendations on seasonal influenza.

It welcomed the forthcoming launch of a Joint Action co-funded by the EU’s Health Programme aimed at increasing vaccination coverage.

Testing and assessment: Members pointed out that vaccines are rigorously tested through multiple stages of trials before being prequalified by the WHO and approved by the European Medicines Agency (EMA), and regularly reassessed. Recalling that researchers must declare any conflicts of interest, Parliament proposed that researchers subject to a conflict of interest be **excluded from evaluation panels.** In addition:

- the confidentiality of the deliberations of the EMA’s evaluation panel should be lifted;

- the scientific and clinical data which inform the conclusions of the panel, and whose anonymity is guaranteed in advance, should be made public.

Transparency: noting the importance of transparency in building and maintaining public trust in medicines, Parliament called for greater transparency in:

- the production of vaccines and for measures to reassure European citizens;
- the process of evaluating vaccines and their adjuvants, and the funding of independent research programmes on their possible side- effects.

Public awareness: Members emphasised the need to provide citizens with inclusive, factual and science-based information. They called for **dialogue with stakeholders** from civil society, grassroots movements, academia, the media and national health authorities in order to combat unreliable, misleading and unscientific information on vaccination.

Procurement of vaccines: Parliament was concerned at the **limited budget** allocated specifically to vaccination in some Member States, as well as the high prices and wide variations in price of some life-saving vaccines. It strongly supported the Joint Procurement Agreement, which gives Member States and the Commission a framework to jointly procure vaccines, thereby pooling the purchasing power of Member States.

Members noted that the **cost** of a full vaccines package for one child, even at the lowest global prices, increased by a factor of 68 between 2001 and 2014. This price increase was held to be unjustifiable and incompatible with the Sustainable Development Goal of ensuring healthy lives and promoting wellbeing at all ages.