



Baltic Engagement
Centre for Combating
Information Disorders

RESEARCH BRIEF ON VACCINE HESITANCY

**TRUST, TIMING, AND
MISINFORMATION: WHY
VULNERABLE LIFE
PHASES MATTER**

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THIS BRIEF IS BASED ON THE PEER-REVIEWED
RESEARCH ARTICLE **“EXPLORING SUBJECTIVE
UNDERSTANDINGS AMONG VACCINE-HESITANT
INDIVIDUALS: FINDINGS FROM A Q METHODOLOGY
STUDY”** BY KRISTINA SEIMANN, ANDRA SIIBAK & MARIT
NAPP (PUBLISHED IN HUMANITIES AND SOCIAL
SCIENCES COMMUNICATIONS).

KEY INSIGHT

Vaccine hesitancy is not a result of ignorance – it is often rooted in mistrust, personal experiences, and moments of vulnerability. Research shows that health misinformation gains traction during key life transitions (e.g. pregnancy, diagnosis, early parenting), especially when trust in public institutions is low and alternative health beliefs are strong.

What the Research Shows

- **Hesitancy is nuanced:** People hesitant about vaccines are not a homogenous group. Their reasons range from health concerns to ethical questions to a desire for autonomy.
- **One-size-fits-all doesn't work: Standard public health campaigns miss those with deep-seated doubts or alternative worldviews.**
- **Emotional context matters:** Life stages like pregnancy or caregiving are high-stress periods where people are more susceptible to persuasive misinformation.
- **Trust deficits:** Institutional mistrust towards government, pharma, or healthcare system is a recurring theme and major driver of hesitancy.
- **Alternative belief systems:** Many hesitant individuals trust natural or alternative health approaches over conventional medicine.
- **Misinformation thrives in silence:** When institutions fail to address people's concerns compassionately and clearly, false information fills the gap.

Recommendations

For Public Health Providers & Doctors

- **Listen First, Inform Later:** Build rapport before offering facts. Avoid dismissive phrases that may sound patronising.
- **Target Vulnerable Moments:** Engage proactively during transitional life phases when individuals are most information-seeking and emotionally open.

- **Engage Trusted Messengers:** Partner with midwives, family doctors, and even holistic health providers who have credibility in hesitant communities.
- **Address the “Natural” Argument:** Frame vaccines as complementary to healthy lifestyles—not as synthetic impositions.
- **Segment Your Messaging:** Craft audience-specific communication based on belief patterns and concerns (e.g. child safety vs. bodily autonomy).

For Policymakers and Health Authorities

- **Support Trust-Based Outreach:** Fund initiatives that engage communities long-term, not just during crises.
- **Back Interdisciplinary Research:** Health hesitancy is sociocultural—go beyond epidemiology.
- **Boost Health Literacy:** Focus on emotional and informational resilience, especially in schools and parenting programmes.

FURTHER READING

- Seimann, K., Siibak, A. & Napp, M. [Exploring subjective understandings among vaccine-hesitant individuals: findings from a Q methodology study](https://doi.org/10.1057/s41599-025-05799-4). *Humanit Soc Sci Commun* 12, 1578 (2025). <https://doi.org/10.1057/s41599-025-05799-4>
- [Handbook against disinformation: recognise and resist](#)

What is BECID?

BECID – the Baltic Engagement Centre for Combating Information Disorders – brings together expertise in fact-checking, media literacy, and journalism across the Baltics. We conduct fact-checks in collaboration with Delfi/Delfi Meedia, monitor disinformation narratives and campaigns under the leadership of investigative journalism organisation Re:Baltica, and promote media literacy through the Baltic Centre for Media Literacy (BCME). We also develop methodologies to effectively counter disinformation. Learn more: becid.ut.ee