TO THE EDITOR:

We would like to discuss a study called “Factors underlying denial of and disbelief in COVID-19,” which looks into what influences or encourages doubt and unfavorable opinions concerning COVID-19. In that study, the authors point out that a number of steps must be taken to promote vaccination and to reduce instances of denial and skepticism regarding COVID-19, and that governments should put in place a number of strategies to control the disease, while taking into consideration the psychological and social ramifications of those policies.

In order to increase immunization rates and provide doubters with reliable information, it is essential to increase public confidence in authorities, experts, and scientists. For a variety of reasons, local COVID-19 control efforts may encounter support or opposition. The most noteworthy of those reasons is apprehension about vaccination, which has been linked to mistrust of the local health care system. The willingness of a person to support public health initiatives depends on how much they trust their local public health response to a crisis.

How much a person trusts their local public health response to a crisis determines how ready they are to adhere to public health measures for disease epidemic management during the COVID-19 pandemic. There is proof that people’s attitudes toward vaccination vary based on their background and environment. People’s decisions seem to change as their local environment changes. It is essential to comprehend the sad events that followed. To that end, the impacts of COVID-19 vaccination, local public health measures against COVID-19, and varying local epidemic stages should all be investigated using a longitudinal study design.

CONFLICTS OF INTEREST

None declared.

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TO THE EDITOR:

We received the correspondence regarding our recently published article and we thank you. We read this well-written correspondence carefully and are glad that the authors are in agreement with our findings and conclusions.

As is widely acknowledged in the literature, there is not only one reason for disbelief or hesitancy toward COVID-19 or toward the available vaccines developed to protect humanity from this disease. Nevertheless, disbelief and hesitancy have been documented as a worldwide phenomenon affecting all countries.

Fortunately, according to Lazarus et al.,(1) COVID-19 vaccine acceptance increased over the last year in most of the 19 countries studied in 2020 and 2021. However, even though the reported level of acceptance rose to 75.2% in the 23 countries studied in 2021, it remains below the level required to tackle the pandemic successfully.(1)

Consequently, each country needs to investigate the reasons behind the disbelief in COVID-19 and the vaccine hesitancy and act accordingly, because the factors associated with this phenomenon vary considerably from country to country. Some of these factors include gender, age, income, health condition, and place of residence.(2)

Also, circulating misinformation had a negative impact on each national health care system’s attempt to implement scientifically sound strategies to confront the COVID-19 pandemic. As a result of misinformation, people may become confused and hesitant, suspect vaccine efficacy, and, consequently, avoid vaccination. As has been suggested elsewhere,(3) we strongly believe that primary care needs to be supported and used as a pillar to inform people about and restore their trust in the health care systems and scientific achievements altogether.

Finally, we advocate that cooperation among nations and exchange of information, research findings, and good practices are essential to effectively control this pandemic.

CONFLICTS OF INTEREST

None declared.

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