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Aims & Scope

Fourth, VH is sometimes described with a neutral tone, or even praised as being in line with the rational frame of mind. The decision-making process we are referring to may be easy or simple (without hesitancy) or practically any degree of hesitancy along the anti/pro continuum (Fig. 1).

To a certain extent, keeping VH on the anti/pro continuum is convenient, as VH can be conceived as a dimension of attitude towards vaccines. Moreover, when Opel et al. divided the public into three groups: pro-vaccine (37%), strong anti-vaccine (19%), and vaccine-agnostic (44%), it sheds light on the mental representation of VH in the population. These different attitudes tend to assort into specific profiles; for example, those who consider VH an old-fashioned, and therefore not important, and who trust what the authorities say about vaccination are categorized as pro-vaccine.

On the contrary, the range of heterogeneous, and even sometimes contradictory, elements.

These two axes can be used to represent different types of VH. For example, in their study of major motives in non-acceptance of A/H1N1 vaccination, Velan et al. divided the public into two groups: those who were uncertain about the necessity of vaccination and those who were uncertain about the effectiveness of vaccination.

Moreover, when Opel et al. divided the public into three groups: pro-vaccine (37%), strong anti-vaccine (19%), and vaccine-agnostic (44%), it sheds light on the mental representation of VH in the population. These different attitudes tend to assort into specific profiles; for example, those who consider VH an old-fashioned, and therefore not important, and who trust what the authorities say about vaccination are categorized as pro-vaccine.

Thus the indifference/commitment axis can also be seen as a dimension of the level of trust in the medical authority. The figure shows that the pro-vaccine group is more committed to vaccination and has greater trust in the medical authority than the vaccine-agnostic group.

However, trust in the medical authority is not the only factor that influences the decision to accept or refuse vaccination. Other factors, such as perceived control, perceived risk, and perceived benefit, also play a role.

Vaccination-related issues have not escaped from these structural features of contemporary societies, which are characterised by reflexive scientisation: scientific development and knowledge. According to him, our societies are characterised by reflexive scientisation: scientific development and knowledge. According to him, the idea of reflexive scientisation is that science is not only a source of knowledge, but also a source of power. This is evident in the case of vaccination, where the authority of science is used to control people's behavior.

Moreover, trust issues become essential in the context of vaccine hesitancy. Trust in the medical authority is not the only factor that influences the decision to accept or refuse vaccination. Other factors, such as perceived control, perceived risk, and perceived benefit, also play a role.

More generally, VH is not really an empirical concept, as the term "concept" traditionally refers to a general idea or principle. However, VH is a useful tool for understanding the complex and heterogeneous nature of vaccine hesitancy. Further research is needed to determine the best ways to address vaccine hesitancy and promote vaccination.