"Social representations of vaccination and health-related behaviours in a life course perspective – implications for (behavioural) public interventions."

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The growing awareness of changes in the perception of social determinants of health and the need to take into account their impact at every stage of life has caused that this topic was also taken up as part of social research. Additionally, we observe an increasing number of abstaining from mandatory vaccinations and an insufficient number of people in the high-risk groups taking voluntary vaccines. These factors combined justify deepening reflection on the social basis of preventive health behaviours such as vaccination. In the context of the epidemic threat associated with the COVID-19 pandemic, the development of evidence-based solutions aimed at increasing the demand for vaccination and creating a population resistance to infectious diseases has become a major problem of global public health.

Therefore, the main goal of the project is to answer the question how different understanding of vaccination is related to health behaviours and the decision to use vaccinations and how does it that change in the life course. The study consists of three key elements. The first of them is the reconstruction of social representations – understood as systems of ideas, values, thoughts, images and knowledge shared by members of the community along – and the mechanisms of their creation within the family networks of people making different decisions about vaccinations. Second one includes identification of non-rational and contradictory elements in the process of perceiving vaccination. The third element is the analysis of changes of social representations of vaccination and associated health-related behaviours from the life course perspective. Combining the analysis of the above issues will allow us to better understand the phenomenon of vaccination use and enables us to develop an approach for creating public interventions related to it, so that they take into account the perspective and the stage of life of people to whom they are targeted.

To accomplish the above-mentioned goal, we propose **the following research questions**: (1) What social representations of vaccinations exist in groups of people making different decisions about vaccinations? (2) How are social representations of vaccination shaped within the family network? (3) What non-rational and contradictory elements of social vaccination representation influence the decision-making process regarding vaccination in the Polish context? (4) How do the social representations of vaccination and associated health-related behaviour patterns change from the life course perspective? Attention was also paid to how the COVID-19 pandemic affected vaccination perceptions and how this effect could be used to create more effective public interventions in vaccination.

To provide an answer for the above questions we use a qualitative perspective which allows us to capture the respondents' view of the problem being analysed. With purposive sampling and the snowball method we recruit approximately 80 people at different life stages (young without children, parents and grandparents retirees) We also taking into account controlling two sub-groups of respondents: taking voluntary seasonal influenza vaccination and not using them. We carry out individual in-depth interviews with biographical elements and surveys with selected participants.

In the material obtained in this way, we analyse ways of using the language to express opinions about vaccinations. It allows us to recreate the elements of representation and the mechanisms of their creation. The material will also be analysed for heuristics and cognitive errors that may affect health behaviour. Taking into account the life course perspective and selecting respondents from the same family networks enable checking the intergenerational impact on vaccination decisions. It also allows us to control the dynamics of representation in the context of transformation periods associated with changes in the role in the labour market and the family.

To combine the results of the analysis, we create the conceptual map which presents relations between vaccines' representations, heuristics linked to them and different vaccination decision. It also groups them in terms of life stages and sociodemographic characteristics. The map can be used to choose profiles of groups to which behavioural health interventions can be addressed. As the final result of the project, we prepare the recommendation on how to construct effective behavioural intervention in the health area that incorporates the perspective of groups to whom it is targeted.