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Communicate! Increasing Vaccination Readiness through Targeted Risk Communication in Lambaréné, Gabon

Inhalt

Effective health communication is essential for addressing One Health challenges, including infectious disease outbreaks. However, psychological research underlying communication interventions predominantly originates from the Global North, raising questions about cross-cultural generalizability, particularly given the ongoing replication crisis in psychology.

This randomized controlled trial conceptually replicated a health communication intervention (Horne et al., 2015) in Lambaréné, Gabon, a distinct cultural context from original research context with high disease burden (i.e., Malaria). Using a 2 (Disease: COVID-19 vs. Malaria) x 2 (Type: Risk communication vs. Myth debunking) + 1 (Control) factorial design, 720 adults received video interventions on vaccination risks/benefits or myth debunking, followed by assessment of vaccination readiness.

Both risk communication and myth debunking significantly increased vaccination readiness for COVID-19 and Malaria versus control (COVID-19: $F(2,276) = 11.70, p < .001$; Malaria: $F(2,295) = 5.51, p = .004$). Notably, myth debunking, which was ineffective in the original US study, proved effective in Gabon.

These findings underscore the need for context-specific replication studies and caution against transferring Global North evidence to other settings. Adapting health communication to local contexts is crucial for effective One Health interventions globally.

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health communication, vaccination readiness, myths, risk communication

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No, I am not a Junior Scientist.

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