

## MARKETING, ADVERTISING AND PR

### **Moralizing Messages and Vaccine Hesitancy in Kazakhstan**

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Routine childhood immunization (RCI) remains one of the most effective public health interventions for preventing infectious diseases and reducing child mortality worldwide. Despite the demonstrated effectiveness and widespread availability of vaccines, vaccine hesitancy has emerged as a significant challenge to public health systems. Vaccine hesitancy refers to the delay or refusal of vaccination despite the availability of vaccination services and is influenced by factors such as confidence, complacency, and convenience (MacDonald, 2015). In Kazakhstan, routine childhood vaccines are provided free of charge through the national immunization schedule, yet concerns regarding vaccine safety, trust in institutions, and exposure to conflicting information continue to influence parental decision-making. Research among highly educated mothers in Kazakhstan suggests that concerns about vaccine safety, trust, and information sources play an important role in shaping parental perceptions of childhood vaccination (Abdirakhman et al., 2024).

The rapid growth of digital media has transformed how parents access and evaluate health information. In Kazakhstan, social media platforms, messaging applications, and online communities have become important sources of information about childhood vaccination. Recent behavioral insights research conducted by UNICEF Kazakhstan (2023) found that parental vaccination decisions are strongly influenced by trust in information sources and perceptions of message credibility. Consequently, public health campaigns face the

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dual challenge of providing accurate information while maintaining public trust and engagement among audiences with varying levels of vaccine confidence.

Communication plays a central role in public health efforts to promote immunization. Routine childhood immunization campaigns frequently frame vaccination as a civic responsibility intended to protect both individual and community health. While such framing seeks to encourage positive health behaviors, research in health communication suggests that messages perceived as prescriptive, judgmental, or moralizing may reduce receptivity among hesitant audiences and hinder constructive dialogue (Leask et al., 2012). Psychological Reactance Theory provides one explanation for this phenomenon by proposing that individuals resist persuasive messages when they perceive their freedom of choice to be threatened (Dillard & Shen, 2005). In vaccination contexts, such reactions may contribute to feelings of being judged, reduced trust in public institutions, and lower willingness to engage with future health communication.

This study examines how vaccine-hesitant parents in Kazakhstan perceive and emotionally respond to online routine childhood immunization campaign messages. The research is informed by Risk Communication Theory, which emphasizes the importance of trust, transparency, and emotional responses in shaping public engagement with health-related information. From this perspective, communication effectiveness depends not only on the accuracy of information but also on how messages are interpreted by audiences and whether they foster trust in the institutions delivering them.

The study addresses three research questions: (1) What emotional responses do vaccine-hesitant parents report when exposed to online routine childhood immunization campaign messages? (2) How is perceived moralizing or prescriptive tone associated with institutional trust? and (3) What is the relationship between perceived stigma, institutional trust, emotional responses, and openness to vaccination messaging? Based on existing research, the study hypothesizes that perceived moralizing communication will be associated with lower institutional trust and higher perceptions of stigma. Greater institutional trust is expected to be associated with increased openness to vaccination messages, while emotional responses are expected to influence openness to communication beyond the effects of trust alone.

The study employs a quantitative cross-sectional survey

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design. Data will be collected through an anonymous online questionnaire administered to vaccine-hesitant parents residing in Kazakhstan who have delayed or refused at least one routine childhood vaccine for their child during the previous five years. Participants will be recruited through parenting-related social media communities and online forums using purposive and snowball sampling techniques. Given the sensitivity of vaccine hesitancy, an anonymous online survey is considered both ethically appropriate and methodologically advantageous because it may encourage more candid responses than face-to-face interactions.

The survey instrument will combine semantic differential scales and Likert-type measures. Participants will evaluate examples of publicly available routine childhood immunization campaign messages currently used in Kazakhstan. Semantic differential scales will assess perceptions of communication tone using dimensions such as judged-respected, pressured-autonomous, moralizing-neutral, and manipulative-transparent. Additional multi-item scales will measure institutional trust, perceived stigma, and openness to vaccination messaging. Institutional trust is particularly important because confidence in health institutions has consistently been identified as a key factor influencing vaccine acceptance and public engagement with immunization programs (Larson et al., 2018).

Data analysis will be conducted using SPSS. Descriptive statistics will summarize participant characteristics and key study variables. Internal consistency of multi-item scales will be assessed using Cronbach's alpha. Correlation analyses will examine relationships among perceived communication tone, emotional responses, perceived stigma, institutional trust, and openness to vaccination messaging. Multiple regression analyses will then assess the predictive influence of communication tone, emotional responses, and trust on openness to vaccination messaging. Because the study uses a cross-sectional design and non-probability sampling, findings will be interpreted as identifying associative rather than causal relationships.

Several measures will be implemented to ensure validity and reliability. The questionnaire will be developed on the basis of established theoretical and empirical research and will undergo pilot testing prior to full deployment. Ecological validity will be enhanced through the use of

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authentic immunization campaign materials currently circulating within Kazakhstan's digital communication environment. The anonymous survey design will help minimize social desirability bias and encourage honest reporting of attitudes and emotional reactions.

The study is expected to contribute to both scholarship and practice. Academically, it extends research on vaccine hesitancy by examining how communication tone, emotional responses, and institutional trust shape parental engagement with immunization campaigns in a Central Asian context. Practically, the findings may assist public health organizations in developing communication strategies that are more empathetic, transparent, and responsive to parental concerns. Previous research suggests that trust-building and dialogue-oriented approaches are more effective in communicating with vaccine-hesitant parents than approaches that rely primarily on persuasion or moral obligation (Limaye et al., 2021). By identifying communication practices that encourage trust rather than resistance, this study aims to support the development of more effective and socially responsive immunization campaigns in Kazakhstan.

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