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World-first vaccine rolled out across England amid record levels of infection

Antibiotic-resistant strains of the infection are on the rise

Helen Corbett • Monday 04 August 2025 06:25 BST

England has launched a world-first **gonorrhoea vaccination** programme, aimed at curbing soaring infection rates and tackling **the growing threat of antibiotic-resistant strains**.

Patients getting the gonorrhoea vaccine will also be offered jabs for mpox, human papillomavirus (**HPV**), and hepatitis A and B at their appointment.

► J Infect Dis. Author manuscript; available in PMC: 2025 Feb 5.

Published in final edited form as: J Infect Dis. 2025 Feb 4;231(1):61–70. doi: [10.1093/infdis/jiae383](https://doi.org/10.1093/infdis/jiae383) [↗](#)

Effectiveness of menb-4C vaccine against gonorrhea: a systematic review and meta-analysis

[Winston E Abara](#)¹, [Robert D Kirkcaldy](#)², [Kyle T Bernstein](#)², [Ebony Galloway](#)¹, [Emily R Learner](#)¹

33–42% effective



1. How should we talk about vaccine 'preventable' diseases?

2. How might we promote this vaccine, acknowledging a long-game of honest expectation setting?

**How do we help people choose
protection (even
partial protection)**

**How do we help people choose
protection (even
partial protection)**

**over and over,
over the life-course**

Choosing protection

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1 Make protection make sense.

2 Embed protection in practice.

3 Earn trust before its tested.

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Vaccinations may not be perfect.

But they are worth it.

→ You probably can't make this case by repeating that vaccines are "safe and effective."

Help people (1) consider why vaccines are worth it for them, in part by (2) being willing to share why they are worth it for you.

→ Using terms that resonate with their values, needs, and context.

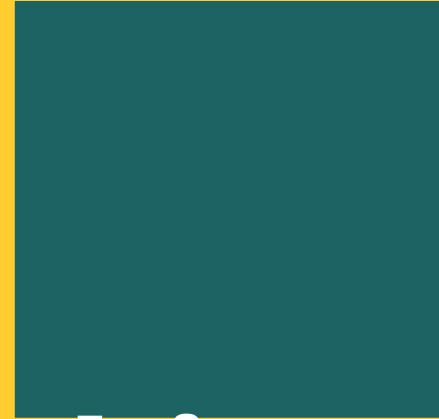
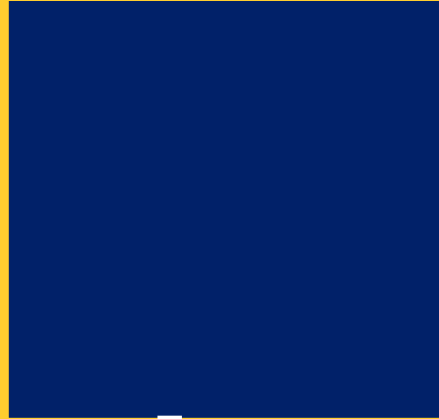


How might we make the case to people that vaccinations are worth it?

What factors might go into individuals' decision calculus?

**What you're
protecting
against**

**Protection
tactic**



Making the 'worth it' case.



**What you're
protecting
against**

**Could it
happen to
me?**

**How bad
would it be if
it happened?**

**Protection
tactic**

**What are the
benefits of
this tactic?**

**What are the
risks and
costs of this
tactic?**

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Wonderful providers in Arkansas!

One of the strongest predictors of whether people get vaccinated is *your* recommendation.



Is everyone familiar with the presumptive approach?

Can someone briefly explain it?

Offer protection as the default.

**Goal: make vaccination into something
expected, not exceptional.**

Offer protection as the default.

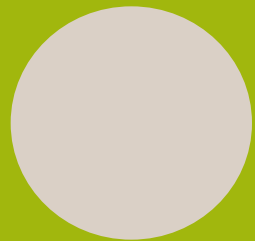
Consider:

- **Personalization of presumption / recommendation**
- **Presumption for the suite of preventative steps taken during a visit**

Presumption → culture

- **Not only one person's job!**
- **Everyone needs to be giving similar messages**

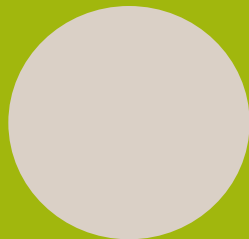
Presumption → culture



Front desk: You're due for [preventative package] today.



Rooming: We'll get [preventative package] set up while you wait.



Provider: We'll go ahead with [preventative package] today (while allowing for questions)



**What else might we do to
demonstrate / enact a culture
of protection?**

Evidence → protective culture

How can we demonstrate the use of evidence-based decision-making in many aspects of protection and prevention, including vaccination?

**Show the evidence behind what you are
'presumt-ing.'**

**Text: We keep all our care up-to-date with the
latest evidence.**

**Subtext: we take evidence into account in
everything we do, including vaccine
recommendations—they are no different.**

**AHRQ's SHARE Approach: displaying or handing out plain-language guideline summaries (e.g., "This year's antibiotic prescribing recommendations for ear infections")
→ patients see evidence integration beyond vaccines.**

Mayo Clinic's "Why We Recommend" cards: short laminated cards at point of care listing 3–4 bullet points about the most recent evidence behind common interventions, including non-vaccine ones, with dates and sources.

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Not just building confidence in vaccines.

Building confidence in you.





Assuming we aren't just giving up on expertise, what might we draw from this result?

When people decide whether to choose protection, they're also deciding whether they believe us.

We can't demand trust in the moment, but we can work every day to be—and show we are—trustworthy.

Trustworthiness reflects values and practices,

such that people believe a relationship is reliable, truthful, and benevolent in situations that involve risk.



**What are some ways we can
'do' trustworthiness, rather
than assuming trust because
of our degrees?**

1 Make protection make sense.

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3 Earn trust before its tested.



**Choosing
protection as
worth it.**