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Vaccines and the War on Science

Now entering its third year, the global effort to combat the COVID-19 pandemic has reinvigorated a centuries-long discourse on vaccination. At the time of this writing, approximately half of the world’s population has been fully vaccinated against the virus (though very few have received increasingly necessary booster doses), with huge geographic and sociodemographic variations. Within the United States, challenges to mandatory vaccination policies have been elevated to the Supreme Court, and in much of the country, up to one-third of the population are estimated to be “hesitant” or “unsure” about vaccination.[1]

In *Vaccine Hesitancy: Public Trust, Expertise, and the War on Science*, Maya J. Goldberg explores this phenomenon of vaccine hesitancy and refusal in the global North. Divided into two parts, the first half of the book outlines (and calls into question) the dominant discursive framework surrounding vaccination. In the second half, Goldberg proposes an alternative configuration, recharacterizing the phenomenon of vaccine hesitancy as a crisis of public trust and redrawing “the lines of responsibility away from a wayward or misguided public, toward a reexamination of integrity and relationships in science and medicine” (p. 17).

She focuses first on the trope of an “ignorant public” in conflict with a supposedly unproblematic “science.” The public, alleged by public health professionals and scientific literature to be easily susceptible to misinformation and anti-science propaganda, are portrayed as dismissive of scientific claims and reticent to accept “truth” as presented to them by the relevant expert authorities. Goldberg posits that this reading of the situation not only exacerbates public concern but shields scientific and governmental institutions from culpability and recognition of the failure of their own outreach practices. The second chapter, in contrast with the previous focus on supposed public scientific illiteracy, examines a reverse causal pathway, proposing that misperceptions
about vaccines reflect negative attitudes about scientific authority in general. Goldberg does not overtly disagree with this premise but describes a recent profusion of publications accepting this “cognitive shift” whose conclusion—that vaccine-hesitant individuals suffer from impermeable cognitive biases that render intervention useless—is inaccurate at best.

The third chapter calls into question an oft-cited refrain that “expertise” is no longer valued or that the opinion of “experts” is no longer prioritized in decision-making processes. Here, Goldberg identifies once again that this predominant narrative portrays a blameworthy, anti-intellectual public as the enemy of science and reason, enforcing an “us/them” mentality between the experts, as vigilant defenders of science, and the publics, ... threatening the future of humanity” (p. 77). Underscoring the importance of understanding science as socially situated, Goldberg proposes that expertise is not “dead” but is instead undergoing a process of recalibration, as traditional expertise is called into question and new ways of knowing emerge. Chapter 4 synthesizes the reframing of the assumptions of the “war on science” as described in the previous chapters and further articulates the complex relationship between science, policy, and values. Proposing that the public debate over science policy controversy is generally a “proxy for value conflicts and differing visions of democracy,” Goldberg sets the stage for the second section of the book, within which she outlines her alternative, “crisis of trust” framework for understanding and ameliorating vaccine hesitancy (p. 91).

Previous work has acknowledged the important role of trust in vaccine uptake, but chapter 5 examines attempts to clearly define and operationalize this metric, illustrating the complex relationship between science, trust, and the public. Identifying common sources of mistrust and underscoring the differentiation between “trustworthy” and “trusted,” Goldberg encourages a shift toward trust and relationship building, away from intervention focused on education and the identification of epistemic failing. The final chapter returns to the question of expertise, describing the ascendency of “maverick” figures like Dr. Andrew Wakefield, the researcher whose discredited findings first implied a link between vaccination and autism. Suggesting that the reverence for these figures is a direct consequence of the undermined credibility of scientific institutions, Goldberg posits to “experts” and authorities that the “maverick” should serve as a signal to “reflect on their own shortcomings in earning the public’s trust” (p. 167).

Goldberg concludes with recommendations for points at which public trust in vaccines can be impacted, both negatively and positively, from provider-patient interactions to vaccine mandates to pharmaceutical industry influence on healthcare practices. Her closing paragraph, stated to have been written in the fifth month of the COVID-19 pandemic, underscores the critical importance of the work, positing that trust is the “center of effective [pandemic] response” (p. 185).

The text was finalized shortly before the development and distribution of the COVID-19 vaccine. In a short preface, Goldberg considers the continued relevancy of her theses and states, in the context of the new pandemic, that vaccine hesitancy will “undoubtedly feature in yet unknown ways” (p. ix). Of course, she was right, and as public health officials and political authorities grapple with messaging and intervention to promote vaccination worldwide, the crisis of trust has become increasingly grave. While the majority of the text focuses on childhood vaccination and the parent as the hesitant or recalcitrant actor, their concerns and the analysis Goldberg constructs remain applicable. In the wake of a rapidly evolving virus, an ever-changing scientific consensus, and progressively evident structural failure, the number of factors the public must consider when making decisions about their health continues to expand.
alongside an ever-growing distrust of authority and expertise.

_Vaccine Hesitancy_ is eminently readable, though occasionally repetitive. Goldberg applies and describes complex philosophical concepts in a way that can be easily understood by those without any background in the subject, rendering the work particularly useful to the public health experts and relevant authorities who in fact have the power to implement the alternative framework proposed. Beyond this, the premises Goldberg proposes, namely the reevaluation of the role of “science” in policy debate, are valuable to a diverse spectrum of scholars, particularly those historians and social scientists focused on science, technology, and medicine.

Note


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