



# **Background**

Strong demand for immunization in communities across Africa is vital to ensuring children get the life-saving vaccines they need. In general, research shows that demand for immunization in Africa is high¹ but lack of access to services or bad experience with them lowers people's likelihood of seeking immunizations.² Further complicating matters is the difficulty of delivering vaccines to hard-to-reach populations, which often thwarts efforts to attain higher coverage levels and achieve equity objectives.³

To increase community demand, officials must start by developing an understanding of public trust in immunization. This can be measured with surveys on knowledge, attitudes, beliefs and practices. These indicators need to be fully adopted and prioritized by countries in order to measure progress. Once the level of public trust is fully understood, significant improvements in vaccination coverage are possible if individuals and communities:

- Better understand the benefits of vaccines and the risks associated with low immunization coverage
- Are encouraged to seek services
- Are empowered to make demands on the health system
- Participate in the planning and implementation of the immunization programmes within their communities

Global and regional plans and resolutions address demand creation, including the Global Vaccine Action Plan (GVAP), which states: "Individuals and communities [should] understand the value of vaccines and demand immunization as both their right and responsibility." In 2014, the 64th session of the WHO Regional Committee for Africa adopted AFR/RC64/R10, calling upon member states to mobilize, involve and empower communities to effectively demand immunization services. In addition, the Eastern Mediterranean Vaccine Action Plan for the period 2016-2020 (EMVAP) called for developing and implementing comprehensive communication and social mobilization strategies to do the following:

- Increase awareness about the risks of vaccinepreventable diseases
- Educate communities about the benefits of vaccines and the relative minimal risks of vaccination
- Enhance trust in vaccines and immunization



# Role of Communities in Coverage and Demand

## **Situation Analysis**

Most countries have developed communication and social mobilization strategies to increase demand for immunization services as well as to encourage care givers to utilize existing services. However, community engagement and participation are usually limited to short-term successes, such as mobilization during immunization campaigns or new vaccine introductions.

Structural issues are more difficult to overcome, such a≠s a lack of health education staff, particularly at the sub-national levels. Demand creation interventions for routine immunization have been compromised due to a lack of both human and financial resources.

There is also a lack of data to monitor the effectiveness of demand-creating activities. The existing data management systems do not incorporate indicators for communication strategies and community demand for immunization, nor is there a systematic monitoring of community engagement and participatory processes promoted by countries for demand creation.

While demand creation is a crucial issue, accountability on the supply side of immunization is also important. Once communities demand vaccinations, the health system must be able to provide these needs. It is thus critical to build strong, reliable and trustworthy healthy systems in order to achieve and sustain increased immunization coverage.

## **Strategies**

Countries across Africa have adopted a mix of communication and demand creation strategies consisting of mass media messages, interpersonal communication, social mobilization and advocacy. With the Reaching Every District (RED) / Reaching Every Child (REC) approaches, countries are gradually moving towards engaging community participation in planning and implementation of immunization activities to link services with communities. Despite this progress, these activities need to be scaled up.

<sup>1</sup>Why children are not vaccinated: a review of the grey literature Michael Favin a,\*, Robert Stein glass b, Rebecca Fields c, Kaushik Banerjee d, Monika Sawhney e. International Health , An official journal of the Royal Society of Tropical Medicine and Hygiene, Vol 4, No 4, Dec 2012

<sup>2</sup>Reasons related to non-vaccination and under-vaccination of children in low and middle income countries: Findings from a systematic review of the published literature, 1999–2009 Jeanette J. Rainey a, Margaret Watkins a, Tove K. Ryman a, Paramjit Sandhu a, Anne Bo a, Kaushik Banerjee b,1. Vaccine 29 (2011) 8215–8221 <sup>3</sup>Global Vaccine Action Plan 2011-2020

# Key barriers to demand include:

- Inadequate knowledge about the number of times a child needs to be vaccinated
- Fear of side effects
- Poor reception from health workers
- Religious beliefs
- Traditional practices
- Distance to health facilities

For community ownership to thrive, there are several key pieces that must exist:

- Accountability and sustenance of immunization programmes
- Community engagement
- Participation in programmes

There are many tactics to pursue these goals, such as new vaccine introduction, immunization weeks, mother and child health weeks and vaccination campaigns. Unfortunately, these tools are often applied in an ad hoc manner. These efforts will have a greater impact if they can be scaled up and made into long-term initiatives.

Engagement with civil society organizations, faith based organizations, religious leaders, and community structures has also been crucial to create demand for the immunization services. These actors have a major role to play in enhancing demand as well as encouraging accountability for the supply of quality service in response to what communities demand.

The pre-service and in-service curriculum for health workers should include specific modules on demand creation. Interpersonal communication training is recognized as an important capacity building area for health workers. Midlevel managers need to be trained in creating an enabling environment for promoting community engagement and encouraging feedback for improvement of service quality. Use of new technologies such as message dissemination through text messages is increasingly prevalent.

#### **Lessons Learned**

Addressing vaccine hesitancy and the negative influence of antivaccine groups has been a challenge in convincing care-givers to utilize immunization services. Influential champions of modern medicine and immunization need to be identified and put to use promoting immunization as a key strategy for child survival and health. Engaging and mobilizing polio survivors as ambassadors can have a powerful influence not only to promote immunization but also to respond to anti-vaccine sentiments.

Demand creation for immunization services is more effective when addressed in the overall context of health system strengthening. Community engagement in planning, implementing and monitoring immunization programmes has resulted in better and more realistic planning, defaulter tracing and monitoring. Innovative use of technologies for demand creation has been effective in reaching young populations with key messages and should be continued not just for message dissemination, but for monitoring, polling and gathering health worker feedback.

Integration of immunization messages into broader child survival programmes has been efficient to promote child health holistically. Budgets from more ad hoc strategies (such as immunization weeks) can be reallocated to promote routine immunization more broadly.

To meet and sustain demand, responsive and efficient supply delivery mechanisms are equally important.

# Supply side barriers include:

- Irregular vaccine supplies and resources
- Health workers not opening vials unless there are 10 children for some vaccines
- Irregular vaccine
   Absent vaccinators
  - Vaccinators not providing information or engaging with parents and families cautiously
  - Long wait times

For sustained demand, the supply side must be responsive in the face of community demand. In particular, efforts should be made to address vaccines stock outs, long waiting times and health workers' attitude discouraging care-givers from bringing their children in for vaccination. Inadequate numbers and limited human resources for community engagement and social mobilization can compromise the implementation of initiatives that attempt to increase community demand. In particular, there is often a lack of dedicated staff to coordinate communications with the public.

### **Way Forward**

Ministries of Education, Local Governance, Community
Development and other relevant ministries should be engaged in
ensuring that no child misses out on crucial immunizations. The
following recommendations could aid in both demand creation
and creating more responsive supply side infrastructure:

- Communities need to be engaged in planning, implementing and monitoring immunization service delivery in order to ensure strong ownership and accountability. It is important to empower communities and individuals on their rights and responsibilities to sustain immunization service delivery.
- Ministries of Health should set community engagement and demand creation targets. In addition, these ministries need to create indicator-based monitoring systems to track this progress.
- Governments should ensure that demand creation interventions are adequately resourced.
- EPI programmes should include a clear component on demand with adequate human and financial resources in the multiyear plans.
- The private sector should be engaged in leveraging resources for vaccines as well as for demand creation.
- Civil Society Organizations should be consulted and involved with immunization programme planning, especially in the demand creation component.
- Communication and demand creation indicators should be incorporated into existing data management systems, which will benefit the overall process of demand creation. Examples of this include engaging mobile phone companies to help spread information on vaccines.

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