

Generating Demand for COVID-19 and Other Life Course Vaccinations: Country Examples

We will begin shortly! In the meantime, please introduce yourself in the chat.

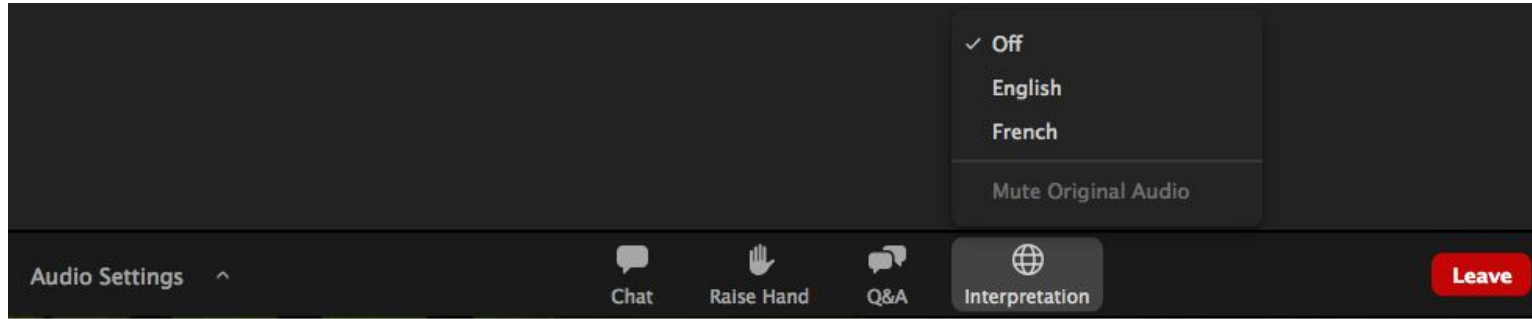
28 September 2023 | Presentation by Knowledge SUCCESS



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Our Speakers



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Agenda

Global Considerations for Demand Promotion	Gloria Lihemo, UNICEF
Generating demand for the COVID-19 vaccine: Reflections from Breakthrough ACTION Liberia	Saratu Olabode-Ojo, Breakthrough ACTION Liberia/CCP
Europe and Eurasia Region: Insights from a behavioral strategy to improve immunization uptake across the life-course: lessons learned from Serbia and North Macedonia	Lisa Oot JSI/MRITE Stefan Mandić-Rajčević, JSI/MRITE
CORE Group Partners Project India	Roma Solomon, CGPP
Question & Answer	All
Closing	Erica Nybro, Knowledge SUCCESS

COVID-19 Integration

**Global
Considerations for
Demand Promotion**

September 2023



Demand Considerations for Integrating Covid-19

Reach

Reaching priority groups remains a major challenge. This necessitates engagement & multistakeholder coordination with a range of new PHC partners, (diabetes, nutrition, aged-care and social services)

Resources

The higher cost of delivering vaccines outside of routine services constraints resources available for demand promotion (HPV example)



Complementarity

Combining complementary interventions with vaccination is not new: Vaccination demand interventions have been combined with Vitamin A, de-worming, ITN, WASH interventions etc.

Positioning

Positioning of C-19 vaccination as part of a wider health agenda- PHC, UHC, Decade of healthy living, health security

Challenges & Opportunities



- **Integration across the life course is the future of immunization**
- **Most countries lack the capacity for evidence-based decision-making around life course immunization**
- **Communities have many competing demands: Understanding what is feasible to integrate and prioritize is key**
- **Tailored strategies are needed to meet the heterogeneity of priority groups**
- **Communication around acceptance of integration by communities**

Framework for demand generation: Listening to Countries

- Provides tools for country thinking on Integration and demand strengthening, framed around building blocks of vaccination demand
- Identifies entry points, documents lessons learned and best practices, measures progress, and relates theory to actual practice.
- Developed from interviews with countries, country experiences and lessons learned



Building Blocks Support For Demand Integration

Behavioural & Social Data (BeSa)



Social data segmented by population can guide strategies to inform decision-makers in designing and implementing integrated services and equip EPI managers to better prepare communities for integrated services.

Coordination & Planning



Countries will need an evidence-based integrated national communications strategy and costed implementation work plans to avoid fragmentation and facilitate the allocation of funding across health sectors

Service Experience



Opportunity to train health workers as service providers trained in IPC and as trusted messengers for clients and communities delivering an integrated package of PHC at different entry points of the life course.

Community Engagement



Investments should also be made to address the complex socio-economic barriers to uptake of PHC services (poverty, gender, race, ethnicity). Communities and health workers should be engaged in co-designing solutions to address barriers and equity gaps

Resources

- [Operational Framework for Demand Promotion- Integration of COVID-19 vaccination into routine immunization and primary health care - The Vaccination Demand Hub](#) French version Coming soon
- [A global agenda for older adult immunization in the COVID-19 era: A roadmap for action, \(2021\) Privor-Dumm et al](#)
- [Considerations for integrating COVID-19 vaccination into immunization programmes and primary health care for 2022 and beyond. World Health Organization and the United Nations Children's Fund \(UNICEF\).](#)
- [Behavioural and social drivers of vaccination helps to understand context-specific needs and guide integration strategies. WHO UNICEF](#)
- [Gender and immunization Checklist, UNICEF GAVI](#)
- [Generating acceptance and demand for COVID-19 vaccines World Health Organization and the United Nations Children's Fund \(UNICEF\).](#)

OPERATIONAL FRAMEWORK FOR DEMAND PROMOTION

Integration of COVID-19 vaccination into routine immunization and primary health care



Generating demand for the COVID-19 vaccine: Reflections from Breakthrough ACTION Liberia



Adolescent focused competition-winners

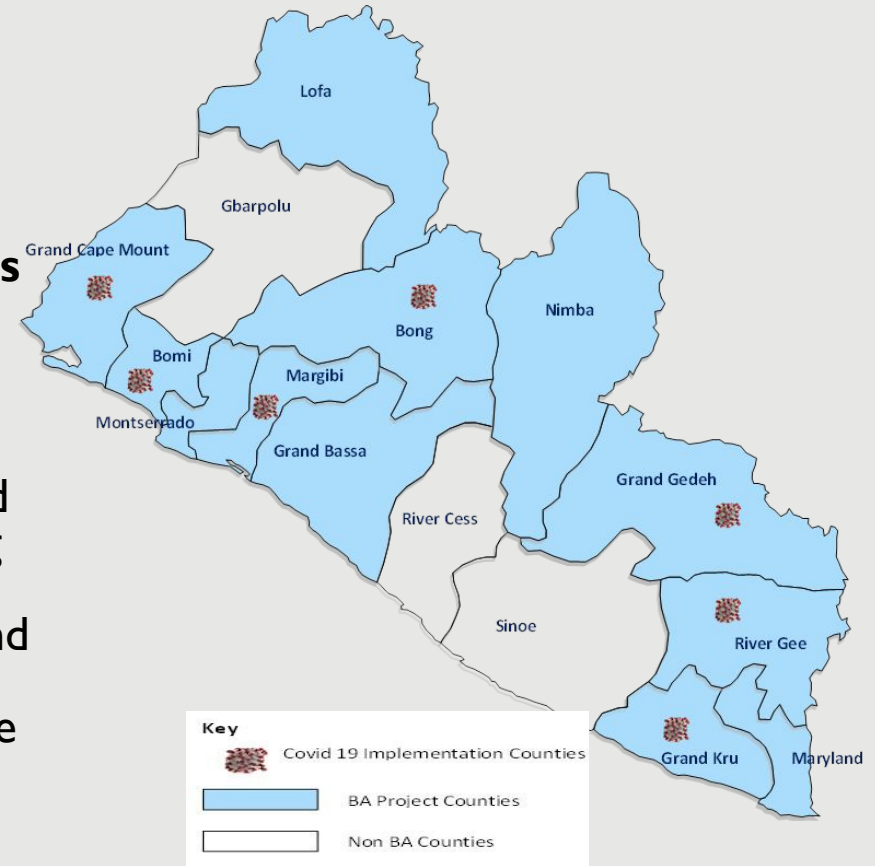


Presentation Outline

- Summary of Breakthrough ACTION Liberia COVID-19 activities
- Strategic approaches to increase demand for COVID-19 vaccine and support integration into routine primary health care services:
 - Coordination to Manage Rumors
 - Using Interpersonal Communication to Address Vaccine Hesitancy
 - Supporting Community-led Community Engagement
- Lessons Learned

Summary of Breakthrough ACTION COVID-19 Activities

- **Breakthrough ACTION Liberia** is the country buy-in to USAID's flagship social and behavior change program aimed at improving demand, access, and use of health promoting behaviors.
- **Breakthrough ACTION Liberia supports 7 counties** on COVID-19, including Grand Gedeh, Bong, Margibi, Grand Kru, River Gee, Bomi, Grand Cape Mount
- **Partners with the Government of Liberia** - Ministries of Education, Health, and Agriculture and a wide range of implementing partners at the national and subnational level, including media institutions, youth, schools, and community leaders
- **Focuses on strengthening capacity** to use SBC to increase immunization rates

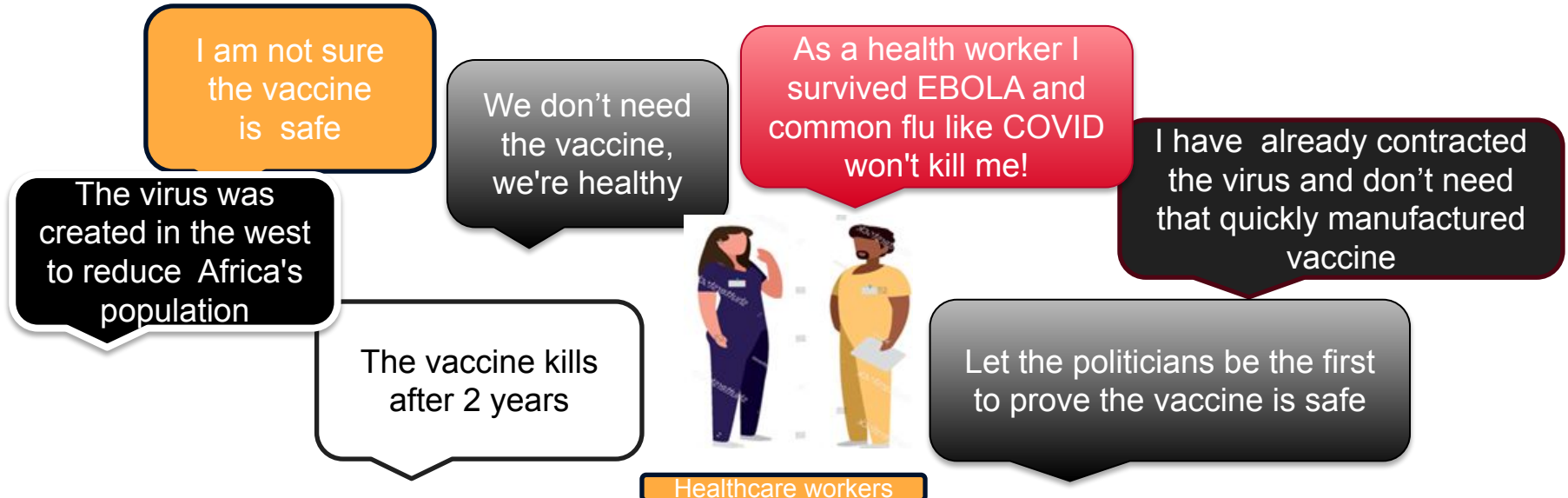


Coordination to Manage Rumors

Timing: March 2021- Liberia received its first batch of COVID-19 vaccines

Key Challenge: Limited national guidance focused on vaccinating healthcare workers and older adults first. Rumors emerged and spread quickly negatively impacting vaccine uptake.

Key Approach: BA Liberia coordinated among partners to promote a joint approach to rumor management, including standardized communication materials (e.g. talking points) and debunking rumors via mass media campaigns and advocacy meetings.



Use Interpersonal Communication to Address Vaccine Hesitancy

When: September 2021: Liberia aims to vaccinate 40% of the population by March 2022

Key Challenges: Vaccine hesitancy has spread across the country disrupting routine services (such as ITN distribution). Even health workers expressed vaccine hesitancy which slowed COVID-19 vaccine uptake.

Key Approach: To generate demand, Breakthrough ACTION used a multi-faceted approach centered on interpersonal communication. A myriad of voices and testimonials were instrumental in building trust in the vaccine.



Community-led Community Engagement

When: June 2022: Integration into routine immunization is a priority- as is expanding to new populations (ie. youth)

Key Challenges: As the vaccination target increased, it became essential to focus on new areas of the country, including hard to reach areas.

Key Approaches: To increase uptake, Breakthrough ACTION mobilized community members and oriented them on best practices for leading engagement among their networks via community engagement sessions and street theater performances.

Vaccine Ambassadors

Main Idea:
Orient Vaccine Ambassadors to build trust, promote benefits, explain side effects, and link community members to vaccine locations.

Result
Over 130 pastors, chiefs, religious youth & women leaders, transport unions, and health workers were trained as vaccine ambassadors conducted over 2000 community engagement sessions

Street Theater Performances

Main Idea:
Conduct street theater performances to promote COVID-19 vaccine uptake and malaria prevention. County Health Teams, community health assistants, local cultural troops, and musicians to roll out the performances.

Result
The 24 performances debunked rumors, promote ITN use, and increase access to COVID-19 vaccines through mobile vaccination teams. Contributed an additional 1,001 vaccinations (479 men and 522 women) via mobile campaigns conducted during street performances.

Lessons Learned

- **Rumors can spread fast. Essential to **prioritize multi-sectoral coordination**, especially when national guidance is still under development.**
 - **Challenge:** Process to developing national guidance can take time.
 - **Action:** BA prioritized coordination among key partners (at national and subnational level) to promote frequent communication as the vaccination environment evolved. Partners were able to collaborate on implementation and flag issues to avoid duplication.
- **Interpersonal communication enables programs to **use a myriad of voices**. It can also be paired with digital and mass media approaches. It is most critical that all voices, even personal testimonials, align with a central key message.**
 - **Challenge:** Vaccine hesitancy spread widely. Influential voices were not advocating for the vaccine..
 - **Action:** Disseminate key messages and work with influential leaders to contextualize and circulate standardized messages within their networks.
- **Communities members are a valuable resource. With limited, non-financial support and incentives, **communities can be a catalyst for change in their own backyards**.**
 - **Challenge:** The government put in place an expansion to increase the national vaccination rate. This placed a strain on existing health workers and resources.
 - **Action:** Orient volunteers who already work in hard to reach areas. Ensure they have the basic skills to address vaccine hesitancy, engage in interpersonal communication and make referrals to clinics for vaccination services.

Thank you!

Learn More About Our Work

Operational Framework for Demand Promotion -
Integration

<https://www.technet-21.org/en/component/resources/main/16975-operational-framework-for-demand-promotion-integration?Itemid=1758>

The COVID-19 Communication Network (CCN) contains a wealth of SBC materials and guidance. Breakthrough ACTION Liberia has placed several materials on the CCN.

<https://covid19communicationnetwork.org/covid19resource/liberia-healthy-life-campaign/>

OPERATIONAL FRAMEWORK FOR DEMAND PROMOTION

Integration of COVID-19 vaccination into routine immunization and primary health care

The graphic features a photograph of four women in traditional headwraps and dresses standing on a metal staircase. They are holding informational cards. The background is a plain, light-colored wall with a small electrical outlet.

CDC **Gavi** **+ C IFRC** **unicef**

USAID **Vaccination Demand Hub** **World Health Organization**

POLL

MOMENTUM Routine Immunization Transformation and Equity

Europe and Eurasia Region:
Insights from a behavioral
strategy to improve
immunization uptake across the
life-course: lessons learned
from Serbia and North
Macedonia

September 28, 2023



USAID
FROM THE AMERICAN PEOPLE



MOMENTUM Routine Immunization Transformation and Equity

Objectives in Europe and Eurasia Region:

Bosnia & Herzegovina, Moldova, North Macedonia, Serbia

1

Increase demand for and uptake of COVID-19 vaccination among priority populations.

2

Address mis/disinformation through social and behavior change (SBC) and media-focused strategies.

3

Foster opportunities for learning within and across countries.

Methods

Use of behavior integration approach to design, implement, and evaluate activities.

Behavior integration:

- Focuses on what people must do to overcome obstacles to a behavior.
- Identifies factors which affect the behavior.
- Designs or adapts interventions that are linked clearly to the behavior.

Phase 1: Formative Research

Phase 2: Behavior Profiles

Phase 3: Validation

- **Quantitative data:** Premise survey (Serbia, Moldova), published research, grey literature (World Health Organization project in Serbia).
- **Qualitative data:** stakeholder and key informant interviews, interviews with priority populations.

Results (Serbia)

PREMISE Surveys - 1,228 respondents

Key Findings

- Compared to the general population, ***vaccine acceptance was significantly lower among pregnant women (PW) ($p < 0.05$) and people with chronic disease ($p < 0.01$)***. Within the group of respondents reporting some chronic disease almost 40% were unvaccinated, while in the population of PW, 67% did not take the vaccine.
- Compared to those vaccinated who have a chronic health disease, those who were unvaccinated and who have a chronic disease were ***less likely to believe that the vaccine is safe*** ($p < 0.01$), were ***less confident in health workers directly involved in the vaccination process*** ($p < 0.01$), and put ***less trust in their health provider recommendation*** ($p < 0.01$).
- Already-vaccinated PW were more inclined to put trust in health workers directly involved in the vaccination process ($p < 0.01$) and to do whatever their health provider recommends about vaccines ($p < 0.01$), while ***unvaccinated PW had more vaccine safety concerns*** ($p < 0.01$).

Results: qualitative research

- We learned from participants that COVID-19 is one of many priorities in their busy lives.
- We heard from immunization stakeholders that priority populations for COVID-19 vaccines are the same as for flu vaccines (elderly, people with chronic diseases of any age, and PW) - alignment with general immunization strategies.
- Patients listen to their healthcare providers' advice, but were not getting advice from their providers to get vaccinated.
- Patients wrongly believe they are not eligible due to allergies or a chronic health condition.
- There is a lack of quality and reliable health information provided to patients by their providers regarding COVID-19 and COVID-19 vaccination.
- Healthcare providers indicated a lack of information and training from reliable sources, fueling their hesitance.

Phase 1: Formative Research

- Quantitative data: PREMISE survey (Serbia, Moldova), published research, grey literature (World Health Organization project in Serbia).
- Qualitative data: stakeholder interviews, key informants, organizations working in the field of public health, professional organizations.

Phase 2: Behavior Profiles

- **MOMENTUM** Routine Immunization Transformation and Equity team created behavior profiles using the [Think | BIG](#) platform.
- Leverage motivators, reduce barriers, and involve supporting actors to encourage the behavior change.
- Propose strategies which address specific barriers and motivators, with the help of key supporting actors.
- Develop an action plan.

Phase 3: Validation

Results: building a behavior profile

Based on an analysis of quantitative and qualitative data, we identified the following elements of the behavior profile:

Priority Behaviors (*behaviors we/MOH want the priority population to implement*):

- Patients with chronic diseases get the COVID-19 vaccine.
- PW get the COVID-19 vaccine.
- Healthcare workers get the COVID-19 vaccine.
- Primary healthcare physicians recommend the COVID-19 vaccine.
- Secondary and tertiary level specialists recommend the COVID-19 vaccine.

Supporting Actors (*who can help encourage this behavior?*):

- Institute of Public Health, Ministry of Health, pharmaceutical regulatory agency, professional chambers, health professional associations, patient organizations, civil society and community based organizations, and media/journalists.

Critical Factors (*what factors need to be considered when designing interventions*):

- Time for counseling, legal obligation, trust in institutions, data availability, safety concerns, efficacy concerns, trust in health care providers, prejudice, knowledge about vaccines, side effects, contraindications, and interpersonal communication.

Behavior profiles

Key Populations and Behaviors to Address		
As part of a healthy lifestyle...	Serbia	North Macedonia
PW of any age get the full course of the COVID-19 vaccine.	X	
People aged 45+ with a chronic health condition (such as hypertension, COPD, etc.) get the full course of COVID-19 vaccine.	X	X
PW with a chronic health condition (such as hypertension, COPD, etc.) get the full course of the COVID-19 vaccine.	X	
Primary health professionals provide the full course of the COVID-19 vaccines to PW and/or patients with chronic health conditions when indicated as appropriate by patients' specialists.	X	X
Medical specialists recommend a full course of the COVID-19 vaccines for PW and/or patients with chronic health conditions when appropriate.	X	X
Serbian primary health professionals provide the full course of the COVID-19 vaccine to PW and/or patients with chronic health conditions when indicated as appropriate by patients' specialists	X	X

Our formative research suggested we should reposition COVID-19 vaccination within a broader health framework

- **Reframe** the conversation **around healthy lifestyles**, with COVID-19 as part of the conversation and part of a vaccination package across the life course.
- **Address both sides** of the equation - to receive and to recommend/provide:
 - Continuing medical education (CME) course for providers.
 - Collective engagement sessions for target community populations (PW, people living with chronic disease).
- **Target** specific **audiences** that **can benefit** from the vaccine as part of a healthy lifestyle; emphasize the importance of vaccination among these groups.

Phase 1: Formative Research

- Quantitative data: PREMISE survey (Serbia, Moldova), published research, grey literature (World Health Organization project in Serbia).
- Qualitative data: stakeholder interviews, key informants, organizations working in the field of public health, professional organizations.

Phase 2: Behavior Profiles

- Creation of behavior profiles using the Think | BIG platform.
- Leverage motivators, reduce barriers, and involve supporting actors to encourage the behavior change.
- Propose strategies which address specific barriers and motivators, with the help of key supporting actors.
- Develop an action plan.

Phase 3: Validation

- **Validate the approach.**

Results: validation

We validated the proposed approach was through a series of participatory workshops with relevant stakeholders.

The series of workshops focused on the following:

1. Concept testing of key messaging, healthy lifestyle approach, fit with national priorities, key messages, and visual symbols.
2. Development of effective messages that can promote vaccine uptake for specific priority populations.
3. Development of a CME curriculum for healthcare workers (physicians, pharmacists, and nurses) which includes three sections.
 - a. Healthy lifestyles.
 - b. Immunization and COVID-19 vaccination.
 - c. Quality health service (person-centered care).
4. Development of a community engagement approach for CSOs and CBOs.
5. Capacity building and training of local public health/health promotion practitioners for a sustainable vaccine acceptance.

CME course

PRESERVE OUR HEALTH

Vaccinate—get your COVID-19 vaccination

As a person with a chronic health condition, you want the very best for yourself and your family. Preserving your health shows your family how much you love them.



Advice from your health care professionals	Action you can take
VACCINATE and reduce your risk of getting COVID-19 and post-COVID-19 conditions.	
People who have allergies to penicillin, eggs, latex, pollen, or other allergens, can safely get the COVID-19 vaccine.	Vaccinate and protect yourself. Ask your doctor how getting the COVID-19 vaccine can protect you, even if you are allergic to penicillin, latex, pollen, or other allergens.
COVID-19 vaccines can offer added protection to people who had COVID-19, including protection against being hospitalized from a new infection.	Vaccinate and get added protection. Even if you have had COVID-19, consult your doctor about how getting the COVID-19 vaccine offers added protection.
Getting the COVID-19 vaccine is safe and effective for people with heart conditions, lung disease, diabetes, obesity, or other conditions that increase the risk of severe illness from COVID-19.	Vaccinate and protect yourself from increased risk of COVID-19 if you have a heart or lung disease, diabetes, or obesity.
People with weakened immune systems have the same possible side effects of the COVID-19 vaccine as others. However, their immune response can be weaker and may need an additional dose.	Vaccinate and empower your immune system to stop COVID-19.
People who have obesity, diabetes, asthma, chronic lung disease, or sickle cell disease, or those who are immunocompromised may be at increased risk of getting very sick or dying from COVID-19.	Vaccinate and prevent serious illness or death from COVID-19 if you have a high-risk condition, such as obesity, diabetes, asthma, or chronic lung disease.
Getting the COVID-19 vaccine is safe and effective for people with cancer or who have survived cancer.	Vaccinate and protect yourself. If you have cancer or have survived cancer, consult your doctor about how getting the COVID-19 vaccine can protect you.

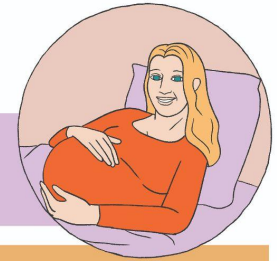


TODAY IS A GOOD DAY TO START.

PRESERVE OUR HEALTH

Vaccinate—get your COVID-19 vaccination

As an expectant mother, you want the very best for your unborn child. Preserving your health will preserve the health of your unborn child.



Advice from your health care professionals	Action you can take
VACCINATE and reduce your risk of getting COVID-19 and post-COVID-19 conditions.	
People who have allergies to penicillin, eggs, latex, pollen, or other allergens, can safely get the COVID-19 vaccine.	Vaccinate and protect yourself. Ask your doctor how getting the COVID-19 vaccine can protect you, even if you are allergic to penicillin, latex, pollen, or other allergens.
COVID-19 vaccines can offer added protection to people who had COVID-19, including protection against being hospitalized from a new infection.	Vaccinate and get added protection. Even if you have had COVID-19, consult your doctor about how getting the COVID-19 vaccine offers added protection.
There are COVID-19 vaccines that are safe and effective in pregnant women, including individuals with existing chronic conditions or high-risk pregnancies.	Vaccinate. Ask your doctor about COVID-19 vaccines that are recommended for pregnant women.
Antibodies from the COVID-19 vaccine are transferred to your baby and can help protect it after birth.	Vaccinate and protect yourself and your baby. Ask your doctor how getting the vaccine during pregnancy can protect your baby.



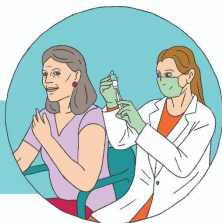
TODAY IS A GOOD DAY TO START.

Collective Engagement key messages

PRESERVE OUR HEALTH

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As a person with a chronic health condition, you want the very best for yourself and your family. Preserving your health shows your family how much you love them.



Action you can take

VACCINATE and reduce your risk of getting COVID-19 and post-COVID-19 conditions.

Vaccinate and protect yourself. Ask your doctor how getting the COVID-19 vaccine can protect you, even if you are allergic to penicillin, latex, pollen, or other allergens.

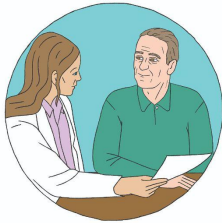
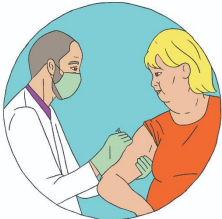
Vaccinate and empower your immune system to stop COVID-19.

Vaccinate and get added protection. Even if you have had COVID-19, consult your doctor about how getting the COVID-19 vaccine offers added protection.

Vaccinate and protect yourself from increased risk of COVID-19 if you have a heart or lung disease, diabetes, or obesity.

Vaccinate and prevent serious illness or death from COVID-19 if you have a high-risk condition, such as obesity, diabetes, asthma, or chronic lung disease.

Vaccinate and protect yourself. If you have cancer or have survived cancer, consult your doctor about how getting the COVID-19 vaccine can protect you.



TODAY IS A GOOD DAY TO START.

PRESERVE OUR HEALTH

Practice a healthy lifestyle

As an expectant mother, you want the very best for your unborn child. Preserving your health will preserve the health of your unborn child.



Eat healthy—Eat lots of fruits, vegetables, lean meat, and healthy fats

Quit smoking—Take slow sips of water to help clean out your system. Take deep breaths to distract and delay your cravings. Get some exercise to distract yourself. Set yourself a “quit date.”



Get healthy sleep—Sleep at the same time every day, get at least seven hours of sleep, relax before going to sleep, and limit exposure to bright lights and electronics before bedtime.



Complete regular screening—Check your blood pressure, cholesterol, and diabetes. Have the following screenings based on age, gender, and lifestyle.
Women 20+: pap smear cervical cancer screening.
Women 40+: mammogram.



Exercise regularly if you have been exercising, or do light exercise (walking, etc.).

Moderate intensity aerobic activity—anything that gets your heart beating faster—150 minutes per week—walk, dance, or swim.
Muscle-strengthening activity—any activities that make your muscles work harder than usual—two days a week—weights and core.

Vaccinate—Get those vaccines that protect you and your unborn child at this crucial time—COVID-19, TT, and TDAP. Your doctor may recommend vaccines for hepatitis A and B, meningitis, or pneumonia.

Reduce stress—Practice relaxation techniques, visit a therapist, and set goals.



TODAY IS A GOOD DAY TO START.



What have we learned to date?
Recommendations from programming in Serbia and North
Macedonia

Recommendations and conclusions

- 1) **Be creative in using available data and evidence to inform programming; fill gaps with targeted research.**
 - Use available data; as needed, collect additional qualitative and quantitative data.
 - Use your data to identify barriers, motivators, and key supporting actors and their actions.
- 2) **Decision-support tools, such as the ThinkBIG platform, can help to efficiently make sense of behavioral data.**
 - Use of the ThinkBIG online platform helped design an evidence based strategy to increase COVID-19 vaccination.
- 3) **Validate your strategy before implementation.**
 - Co-design your strategy with key stakeholders.
 - Validate the approach through user testing (i.e. members from Institutes of Public Health, health providers).
 - Ensure the strategy aligns with priority and needs within the country.
- 4) **Vaccination is just one of many technical areas health providers and communities are concerned about.**
 - Framing vaccination as part of an overall healthy lifestyle may help to increase vaccination demand across the life course.
- 5) **It's important to continuously collect data to inform/adapt the program based on participant feedback.**
 - Early signals indicate varying learning preferences among doctors based on seniority in CME trainings. This could impact our program adaptations as we gather more feedback.

CME trainings

Three trainings conducted between August - mid-September; 41 people trained to date; anticipated to train about 300 providers in the next 2 months.

Knowledge improvement

- **Serbia: 100% of participants** (n=22) agreed that the training **improved their knowledge and understanding** of COVID-19 vaccines, healthy lifestyles, and quality client services.
- **North Macedonia: 100% of participants** (n=13) agreed that the **training improved their knowledge and understanding** of COVID-19 vaccines, healthy lifestyles, and quality client services.

Learning techniques

Which techniques helped to increase participants' knowledge of COVID-19 vaccines? (select all that apply question)

- **Serbia: Case studies: 86%** (n=19); **Role plays: 77%** (n=17); **Self-assessment quizzes: 59%** (n=13)
- **North Macedonia: Role plays: 92%** (n=12); **Self-assessment quizzes: 85%** (n=11); **Case studies: 77%** (n=10)

Confidence

- **Serbia: 59% of participants (n=13) reported feeling very confident** in applying what they learned to their work; **36% (n=8) reported feeling confident**, and **5% (n=1) reported feeling somewhat confident**.
- **NM: 85% of participants (n=11) reported feeling very confident** in applying what they learned to their work; **15% (n=2) reported feeling confident**.

Collective Engagement events

326 community members attended **23 community events** in Macedonia where they engaged in activities to increase their understanding and confidence around COVID-19 vaccination.

- Data collection is currently in progress
 - We are gathering insights to assess the effects of the community engagement events on vaccine uptake in key populations.



THANK YOU

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CORE Group Partners Project India

Roma Solomon
28 Sep. 2023

The CORE Group Partners Project

(Formerly known as CORE Group Polio Project), a USAID-supported project implemented by a consortium of nine NGO partners and coordinated by a secretariat.

It works in 15 districts through District, Block and village level community mobilizers in Assam, Haryana, and Uttar Pradesh states.

Communication partner of the government in polio eradication.

Also, supporting routine immunisation in children & TT in pregnant women

Promoting COVID vaccination

Strategies for demand generation

1. Community Volunteers - CMCs
2. Strengthening communication capacities of government frontline health workers on...
 - a. IPC skills
 - b. Use of communication tools to conduct effective and interesting meetings
 - c. Development of area maps
 - d. Duelist preparation



1. Involvement of influential people
2. School involvement
3. Mid media - Rallies, E-rickshaws coupled with street theatre/ magic shows, and information booths



Demand generation for adults

1. Influencers formed into Community Action Groups (CAGs) in each village
2. Barbers' meetings
3. Tea shop meetings
4. Fathers meetings
5. Cowin App



Understanding the science of vaccination through **No - cost indigenous tools**

1. Strength in unity
2. Empty and filled glass/bottle game
3. Turmeric & mud game



Contributed to government efforts in

- Successful elimination of polio through social mobilization.
- COVID-19 Pandemic Response.
- Catching up of immunization coverage through post-COVID special immunization campaigns.
- Measles Rubella campaigns coverage in high-risk areas.
- Vaccination of zero-dose children in high-priority sub-centers



Q&A / Discussion

Additional Integration Activities and Resources

Essential Resource Collections

- Integrating COVID-19 into primary Health Care
- Resilient Supply Chains
- Reaching High Priority Populations with the COVID-19 Vaccine
- Data Management & Digital Health

Integrating COVID-19 Vaccination into Primary Health Care

September 2023



VIEW COLLECTION

Resilient Supply Chains During Public Health Emergencies

August 2023



VIEW COLLECTION

7-Part Integration Blog Series

- Topics include:
 - Developing a COVID-19 Vaccination Integration Strategy in Uganda
 - Integrating COVID-19 Vaccination Services into a UHC System in the Philippines
 - Integrating COVID-19 Vaccine Demand Generation Activities into Primary Health Care: Examples from Liberia and Nigeria
 - Integrating COVID-19 vaccine and PLHIV Care in Kenya
 - And more!



Photo credit: Wolff Mugos

Global Health: Science and Practice Journal Supplement

Coming in December 2023

Will include integration experiences with:

- Integration planning
- Supply chain management
- Electronic data management
- Demand generation and misinformation
- And much more



Thank you!

Contact Knowledge SUCCESS with any questions:

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