



VACCINATION ACCEPTANCE
RESEARCH NETWORK

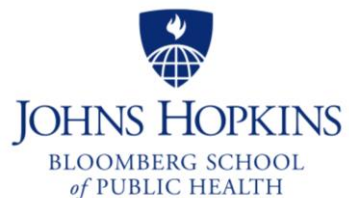
SABIN VACCINE INSTITUTE

Establishing an Understanding of Community- Level Misinformation and the Role of Community Health Workers in Vaccine Acceptance in India

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Our Team

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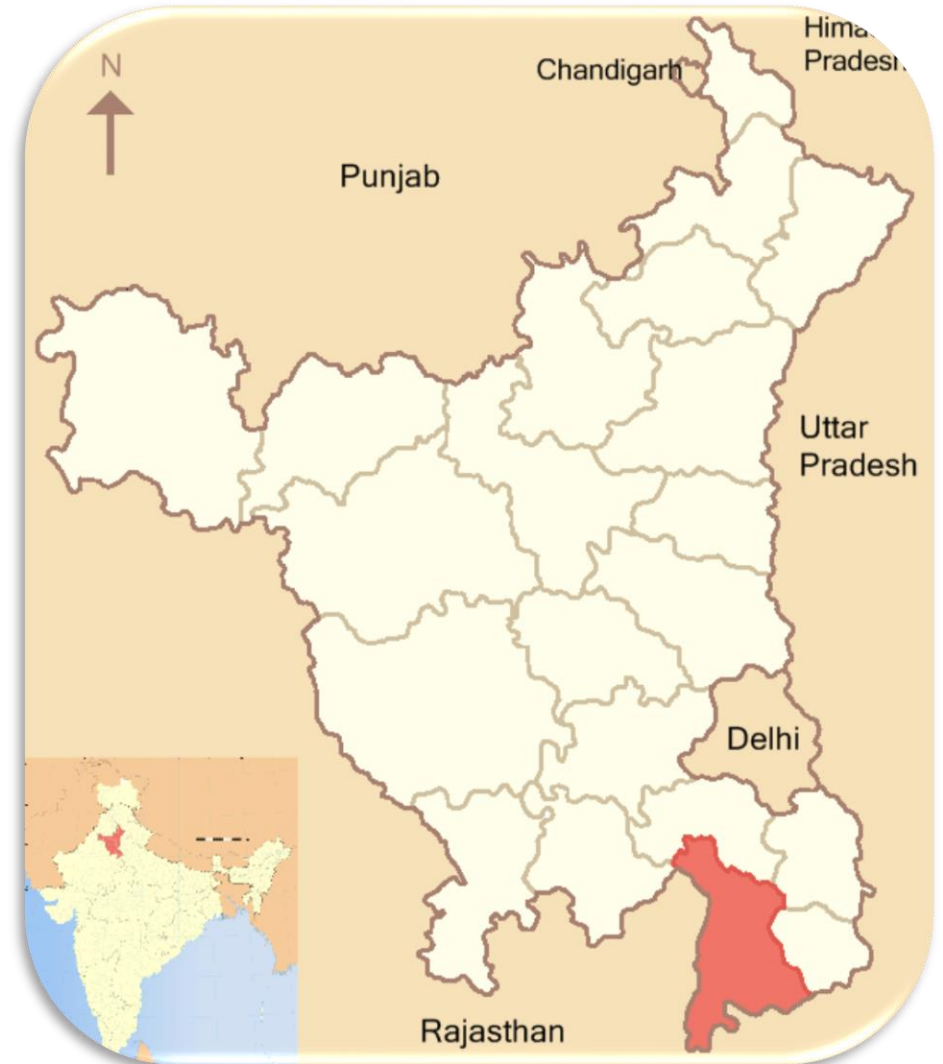
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Project Setting: Mewat, Haryana State, India

- Population: 1.09 million, 88% rural villages.
- Female literacy: 36%; Male literacy: 78%
- Level of immunization (NFHS-4 and 5)
 - **2015: 13.1%** Children 12-23m fully immunized (BCG, measles, and 3 doses each of polio and DPT)
 - **2019: 53.8%** Children 12-23m fully immunized (BCG, measles, and 3 doses each of polio and DPT)





Background

- Changes to vaccine access during the COVID-19 pandemic [1].
- Interventions with Community Health Workers (CHWs) have reported an increase in the proportion of fully vaccinated children, with a mean increase in coverage rates of 27%[2].
 - Interventions have been limited in India, and they have traditionally not relied on the skills and knowledge of CHWs.
- Community based participatory research (CBPR): empower all members of a community to take a leading role in developing strategies and coordinating interventions.

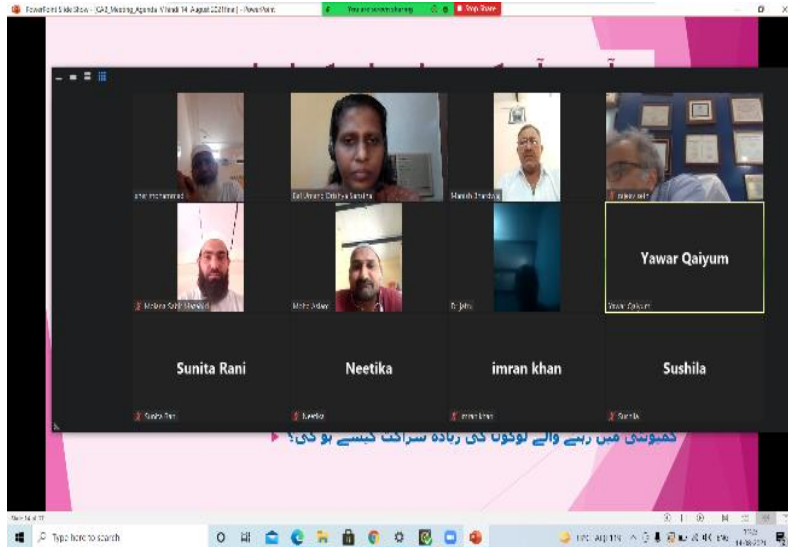
Community-Based Participatory Research

- CBPR facilitates full and equal participation in research by community members, organizations, and academic researchers to improve community health and well-being across multiple levels, including individual, group, community, policy, and social change.
- This approach emphasizes collaborative learning, transferring expertise, and sharing decision-making power among community members, organizations, and academic researchers.
- This strategy was employed, as it can facilitate long-term community change, the development of community mobilization, problem-solving, and even public speaking skills.

Project Objectives

1. Develop a community accountability board (CAB) made up of influential members of the community
2. Understand barriers, myths, and misinformation about vaccination
3. Co-design an intervention with CHWs and CAB members to address misinformation and barriers to vaccination in Mewat
4. Ensure sustainability through monthly CAB meetings to allow for community accountability and ensure long-term sustainability

Development of Community Accountability Board



Influential community members were identified through local knowledge of the community, recruited to participate, and interviewed to assess their interest and commitment as a CAB member.

After interviews, ten CAB members were identified based on their influence in the community, willingness to share their perspectives, and advocacy for health-related issues.

This CAB was developed to facilitate long-term sustainability.

Identifying Barriers and Misinformation about Vaccination

- Identifying and exploring community needs, priorities, and assets regarding vaccination.
- We conducted interviews and baseline surveys with CHWs, CAB members, and caregivers of children.
 - **Caregiver Findings:** Poor communication with CHWs, concerned with side effects of vaccines, and perception that COVID-19 was a ‘city problem’. However, they felt that they could trust religious leaders in the community.
 - **CHWs Findings:** Communication barriers, training gaps, and coordination issues leading to confusion with vaccination.
 - **CAB members and CHWs Findings:** concrete examples of vaccine ‘champions’ would be impactful, religious leaders would be most critical in improving vaccine uptake, and COVID-19 vaccines may be difficult for the community to accept.
- Facilitated human-centered design workshops to determine intervention aspects.

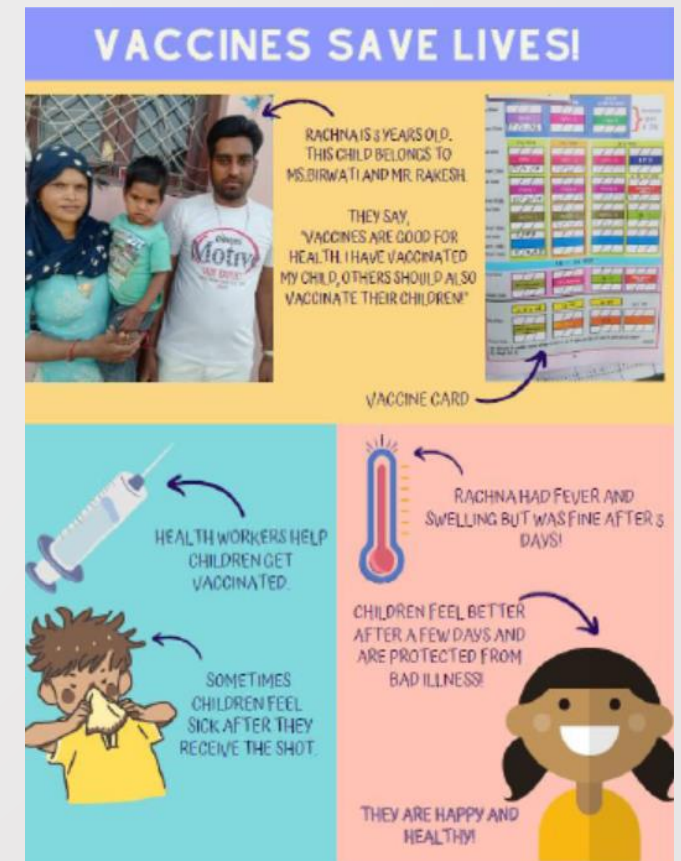
Intervention to Improve Vaccine Uptake



1. Involvement of religious leaders;

2. Pamphlets with vaccine champions sharing personal experiences;

3. Short videos of influential community leaders advocating for vaccines;

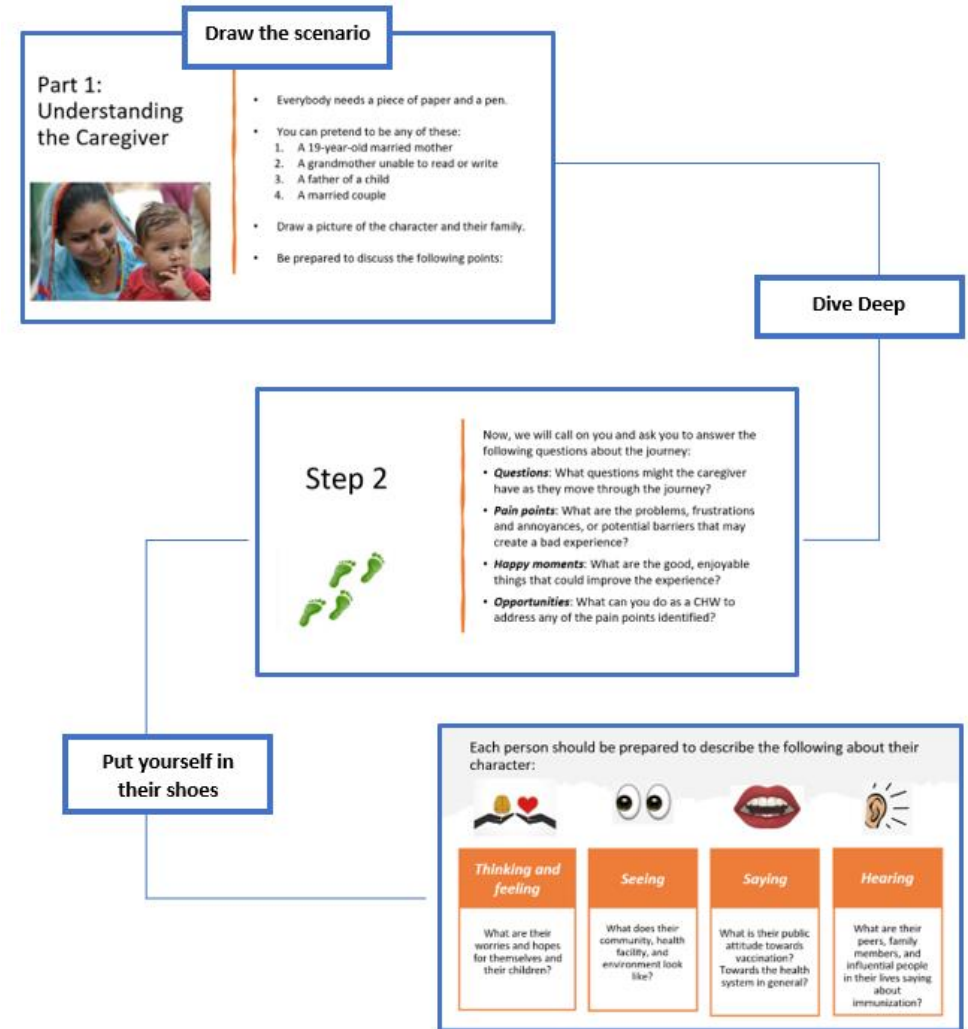


Intervention to Improve Vaccine Uptake

4. Context-specific communication training for CHWs;

5. Walkthrough and reflective communication exercises;

6. Improved vaccine delivery coordination between cadres of CHWs.



Post- Intervention Assessment

The post-intervention caregiver KAP survey, and interviews with CHWs and CAB members, observed several improvements within the community, as follows:

Caregivers' Perceptions:

- Improvements in community knowledge of and benefits of vaccination and knowledge of side effects of vaccines
- Caregivers welcomed involvement of fathers and community leaders in vaccination
- CHWs perceived as being more present and active in the community
- Caregivers more personally involved in obtaining vaccines, willing to travel long distances, and there were fewer suggested reasons to refuse vaccination

CHW and CAB Perceptions:

- Physical items (videos and pamphlets) were most helpful for communication with caregivers
- Communication training was a helpful method of training
- Links with community leaders were improved, which proved support in reaching hesitant caregivers
- Improvements in both routine immunization services and COVID-19 vaccination due to various communication, coordination, and strengthened connections
- Increased confidence due to broad skill development allowing for the use of online platforms, discuss issues with caregivers, and improve relationships with caregivers by leveraging CAB
- Increased ownership and empowerment to apply skills to facilitate change

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We are pleased to invite you to participating on the occasion of

The CIVIC Project Dissemination Meeting

'Community Health Worker-Led Intervention for Vaccine Information and Confidence'

Date: Saturday, 4th December, 2021
Time: 11 A.M. to 12:30 P.M.

Join Zoom Meeting
<https://us02web.zoom.us/j/89162021309?pwd=ZHU2aFJpVktzU24xOEpQTjIhVCl5UT09>

Meeting ID: 891 6202 1309
Passcode: 619624

 **Dr. Rajeev Seth** (Principal Investigator)
Bal Umang Drishya Sanstha (BUDS)

 **Dr. Anita Shet** (Principal Investigator)
Johns Hopkins University (JHU)

 **Baldeep Dhaliwal** (Principal Investigator)
Johns Hopkins University (JHU)



Virtual Dissemination Meeting

- This dissemination meeting was led by CHWs and CAB members who were engaged in the CIVIC project.
- Members of the community including panchayat members (local council), primary health clinic workers, staff nurses, teachers, CHWs who were not involved in our project, and community mobilizers attended the meeting.

Key Messages and Recommendations

Program-Related

- Empower faith leaders as vaccine champions.
- Conduct robust communication campaigns for COVID-19 vaccines immediately prior to vaccination days.
- Improve CHW and community engagement to understand information to be communicated.

Practice-related

- Improve communication and coordination between CHWs and health care providers who provide vaccines.
- Communicate health information in local dialects and in less technical terms.
- Empower CHWs to better address vaccine adverse events and vaccine-related queries.

Policy and Advocacy Related

- Acknowledge, articulate, and amplify the values that community members hold.
- Invest resources for community members to co-create viable solutions and trust their ability to do so.
- Support non-traditional leadership to facilitate change and ownership over health promotion as a sustainable method.

Acknowledgements

Ms. Alexis Sullivan and Ms. Alim Leung, MSPH candidates in the Department of International Health: Their involvement was critical to the success of the project, and we are grateful for their respective contributions.

Population of Mewat, particularly members of the CAB and CHWs: We are incredibly grateful for their leadership, deep engagement, willingness to share their perspectives, and advocate for vaccines. Their leadership allowed us to co-create an impactful intervention, targeted to specific hesitancies across the community.

Thank You!

