



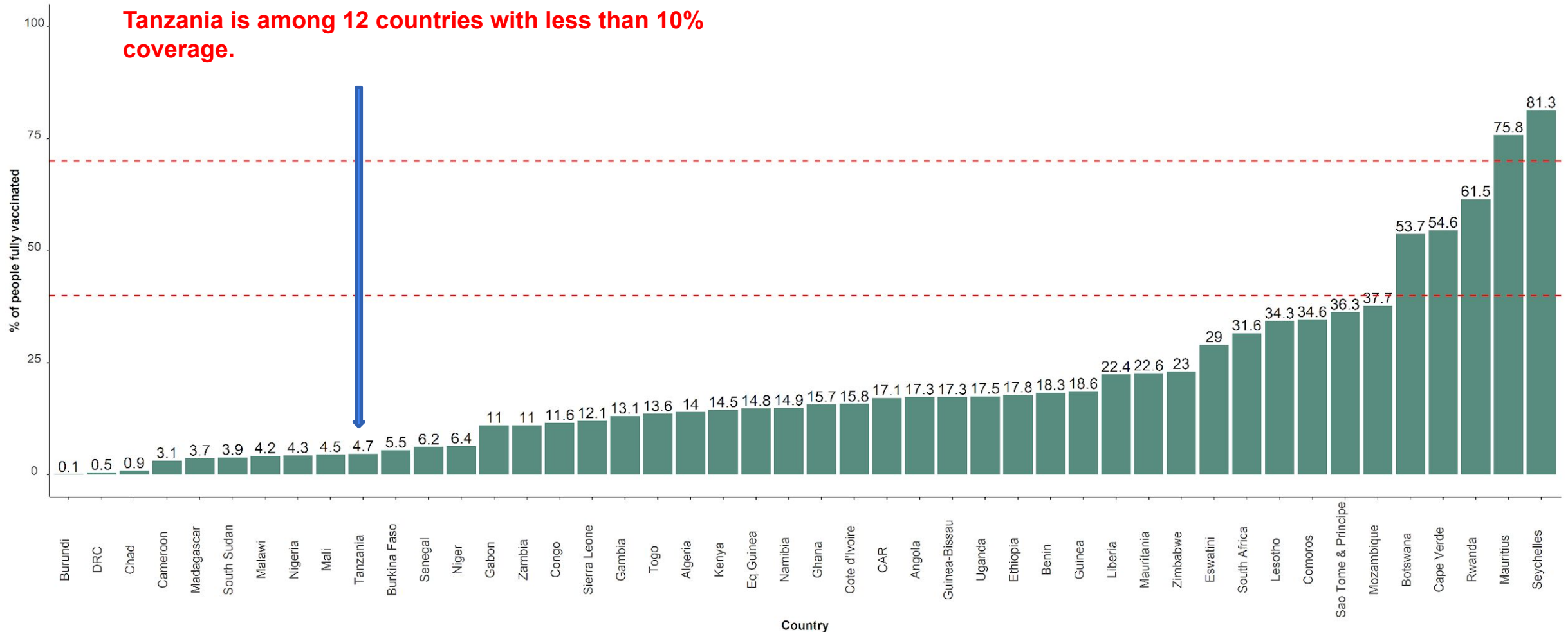
TANZANIA

COVID-19 vaccine equity and access for older people in Tanzania, those most at risk come first everywhere

Joseph Mbasha (Mr)
Policy, partnership and Network Manager
-HelpAge International, Tanzania



...where we are: full vaccination by country





The Problem

Situation overview

- After a year-long denial, Tanzania in March 2021 re-joined the international community in reporting on COVID-19.
- The country joined COVAX late in July 2021, with an initial focus on Front Line Workers before covering at risk populations.
- There was low uptake of the vaccine when they were introduced, with a worsened impact on older people due to various barriers.
- The country targets to vaccinate 70% of the population ageing 18 years and above (42,896,521 by December 2022).
- To date 19.57% of the total population has been vaccinated.*

Problem statement

Older people despite being in the high-risk group for COVID-19, are hesitant and refuse to accept the vaccine due to:

- Limited exposure to mainstream media and correct and reliable source of information
- Limited health-seeking behaviour, coupled with a high level of ageism among the community
- Hangover from previous government denial on COVID -19 that limited information outflows
- Global information further indicates increased hospitalization and fatality rate among older people above and those with underlying health conditions.

The Solution

Leveraging on existing HelpAge International community-led C-19 prevention and vaccination approaches.



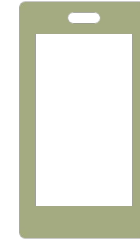
Facilitating

Facilitating Older People Associations –lead dialogues from districts to village level



Mobilizing

Mobilizing HBCs, VHW and Active Ageing Club's & AACs to disseminate accurate COVID-19 vaccine Information



Supporting

Supporting mobile vaccine programme for the most challenged individuals

The Solution

Actions

- Facilitated community engagement and dialogues to clear misconceptions, myths, and rumors on COVID-19 and its vaccine
- Adopted intergenerational dialogues to facilitate communities to accept correct and reliable information and create trust among different age groups
- Supported outreach COVID-19 vaccine programme to remote areas and the most challenged individuals.
- Directly engaged groups were; Home Based Carers (HBCs), Active Ageing Clubs (AACs) Young Volunteers, and Health workers for outreach services

Measurement

- Design of a community maps to identify older people/people living with disability to create access to vaccine in the most hard-to-reach rural areas requires leveraging on existing community-based monitoring platforms
- Conduct monthly home based survey to collect data
- Use of the national vaccine data



Outcomes and Key Learnings

Outcomes and Impact

- *The initial three months intervention in the 2 pilot regions of Mwanza and Kigoma resulted in a 99% increase in COVID-19 Vaccination in older people and 88% in other age groups.*
- *Later in the five regions Program regions with HelpAge intervention (Kigoma, Mwanza, Njombe, Simiyu, and Tanga) covering 600 village communities, Older people were vaccinated from 7,830 in February 2022 to 18,469 (40%) in May 2022; and PwDS from 1,670 to 2,792 (25%). The regions emerged from the least performing to the first regions in vaccine uptake.*
- *The achievements in the 2 pilot regions attracted the interest of government leaders and some key stakeholders for targeting older people as key vaccine beneficiaries and advocacy campaigns.*
- *Community/ intergenerational dialogues resulted in increased confidence and courage on the vaccine and alleayed misconceptions, rumors and myths on COVID-19 and the vaccine across different age groups.*

Key Learnings

- *Peer-to-peer awareness is key in breaking through community myths and misinformation about the COVID-19 vaccine.*
- *The availability of home-based care providers (HBCs), Active Ageing Group, and Youth Volunteers to disseminate COVID-19 information created an open forum for further bi-directional intergenerational engagement to address issues such as ageism and SRHs as multiplier effects.*
- *Outreach vaccination programme is key in addressing vaccine equity and access for the most challenged individuals including older people, people with chronic illness, and PwDs in most of the rural and hard-to-reach areas.*
- *The Community dialogue and Outreach services approaches; Can be easily applied in another context in clearing misconceptions, and rumours and creating confidence among groups, but also in reaching the most challenging groups/ individuals in remote and rural settings.*



THANK YOU

Joseph Mbasha (Mr)
Policy, partnership and Network Manager
-HelpAge International, Tanzania