

## Session 1 Slido Questions and Responses

### Question

@Bhawani I was really talking about fiscal and development priorities. Covid has derailed a lot of other programs - like cholera for instance

A question (from experience): what do you do when the expectations from you are different from what your role is supposed to be? 😊

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Can you please tell us the priority scale of the type of interventions needed to mitigate vaccine hesitancy?

Could you please send today's material in pdf so we could write notes while attending

De Bassey: To what extent the social listening helped Nigeria to identify people's perceptions and concerns about the Covid-19 vaccine?

### Reply

In crisis and during introduction of any new programme 'displacement of resources' is an issue and in crisis, we often miscalculate the impact of displacement

Speak with your manager to understand the needs, and be patient. you need to meet the local structures at where they are. coming from outside with an intent to impose your solutions will not get you far.

From Lis: This is a toughie! Finding common ground will be important. I also tend to re-prioritize based on what in country colleagues needs, and not HQ, who sent you with not enough context and trusted you to support what is needed locally, so you can go back to your manager and say, hey, I planned to do X but after meeting with local colleagues, we suggest doing Y instead. No deployment plan survives contact with reality.

This need-expectation mismatch, assess if you can fill the repurposed role. If you cannot fill it, make it clear what you can/cannot do to all involved early.

You will learn about this in sessions 3-6

you can download the materials from LMS

Identifying the perceptions is one. The main issue is in effectively allaying the fears and misconceptions. This is the critical issue for me

Dr Bassey - did you involve Nollywood in demand creation through movies / roles models and stars?

I see you did engage personalities from you presentation now.

Excellent presentation! What kind of special strategies to deal with the vaccine hesitancy for covid-19 vaccination among senior citizens?

Maybe by taking vaccines to them where they meet. Like Dr Bassey said they had done with mosques and churches.

Excellent presentation! What kind of special strategies to deal with the vaccine hesitancy for covid-19 vaccination among senior citizens?

Also I. UK they did that at cafes and other meeting places for specific groups and through peer testimony.

How can we promote partnerships with private sector in COVID19 vaccines and data sharing?

Best way is to associate with Organisations like Medical Associations, Lions Club, Rotary Club, Petrol Pump Association, Chemist Association. CSR Organizations.

How did you deal with religious associated vaccine refusals if any?

Best way is to find out in which religious sect and contact the top religious leader of that particular sect. Religious Leaders are good people.

How do deal with the undeserved community? They have lots of other demand from the government

Lis: I would love to hear from other colleagues who work with underserved communities. In my experience, the first step is acknowledging with communities that they have been historically underserved, and what gov is doing to fix this. Shared problem-solving and human-centered design approaches to building strategies and interventions go a long way to build trust and collaboration.

How do deal with the undeserved community? They have lots of other demand from the government

Partnerships  
Inclusion  
Co-design  
Embedded implementation approach. We have to think about actual use, equity and barriers in real world settings from start.

How do deal with the undeserved community? They have lots of other demand from the government

Easier said than done 😊

How do i get deployed when i am not working yet with any organization

this trinign is one way of getting yourself on a roster to be acandidate in future for posisble recruitment.

network, get to know those who are in need of poeple wiht your profile. partiicpate in the community promoting vacicne demand. you get tips for jobs form your informal network of colelagues.

How do i get deployed when i am not working yet with any organization

From Lis: As Tina said above. Also, look at fellowship programs that work with MOH in your country, such as field epidemiology training programs, and fellowships that focus on global health work.

How do i get deployed when i am not working yet with any organization

Write to many - say what you bring to the team and offer your help in a way they want. It is a slow and tedious process!! Share your interest in your circle.

How do the expert groups bridge the gap between 'intention to vaccinate' vs 'vaccination'? Context: intention doesn't always convert to action.

You will discuss this in sessions 3-6

How do we respond directly to a question here?

Now the response options are activated !

How do we solve Religious challenges facing vaccination refusal

Lis: Excellent question, Muhammed! I would defer to colleagues who have done this successfully. In my experience, working with faith leaders, hiring health workers that are acceptable to the local community, and tailoring messages and service delivery to cultural needs is very important.

How do we solve Religious challenges facing vaccination refusal

Getting faith based leaders on board. This has been successful in India in some parts. Have to be sensitive though when negotiating their participation.

How does WHO ears work? Is it for online social listening or offline as well?

Lis: There is a lecture that will discuss EARS; it's online here: <https://www.who-ears.com/#/>

How I can provide people with the information they are asking for while the ministry not providing me and my team with appropriate information?

Lis: Good question, Asmaa. Lean into the discomfort of knowing people will want information and clarity from you, even if you or gov can't provide it. This is the state of emergency response with a rapidly evolving virus and guidance. Look for alternate authoritative sources, where appropriate (e.g. medical associations), or refer people to the right MOH point of contact. Ultimately, gov is on the hook for providing clarity on health guidance and information. Usually in time of COVID-19, absence of data and information is what causes the confusion and sharing of misinformation--highlighting this to gov partners and finding ways to help them generate and disseminate information can help reduce future confusion, anger and anxiety that people may feel who can't find information they are looking for.

How to analyze the behavior of primary and secondary participants? Shall we use HBM? Please suggest.

We must take socio economic, behavioral and intersectionality into account. Have you looked into TDF / behavior change wheel ?

How was the army relevant in this fight against Covid?

Immunisation outreaches in security compromised areas.

How was the army relevant in this fight against Covid?

In Israel army was very involved in logistics. every boy or girl 18 years old must serve 2-3 years, army has good image in the public . people's children

I was once asked: "If govt refuses to accept emergency strategy even when developed by experts, What will be your response strategy?"

From Lis: Excellent question. Ultimately, you can only suggest and recommend--gov will decide what to do, and all you can do is best support them in implementing a strategy that will vaccinate the most people and protect people's trust in government.

I was recently asked a question...Why are you people (indicating the CSOs and government) seriously pushing for COVID 19 vaccines uptake?

Lis: This sounds like there is a lack of awareness of the risk of COVID-19 for now and in future, and how vaccination is a simple step to add a layer of protection. Sometimes, an honest conversation in a community forum or Q&A with medical experts can help address this awareness and perception gap.

In many countries, EPI and COVID is separate why it should not be together and EPI should be replaced with Immunization Directorate or a pgram as a whole

Covid vaccine is still evolving! May sometimes backfire!!! Have to do this carefully. Can't let covid specific vaccine hesitance to link to others??!!

Is there any challenges on combining these two covid 19 and RI due to misinformation?

Covid or any crisis communication may be slightly different than routine risk communications and must consider that during translation of Knowledge.

Is vaccine hesitancy a new or an old phenomenon?

Lis: Very old. Hundreds of years old, as have more organized vocal vaccine denier groups:  
<https://historyofvaccines.org/vaccines-101/misconceptions-about-vaccines/history-anti-vaccination-movements>

It seems as if we are now having to “hang” almost all of our public health interventions on the hook of Covid, rather like we had to do with HIV 20 years ago?

Lis: Immunization from a behavioral/demand/user perspective is many years behind HIV...but COVID-19 is forcing us to catch up! Many of the best minds in behavioral science in immunization and in SBC come from HIV, because the lightbulb was "it's the person's behavior, duh!" has only flipped on recently in comparison for vaccines.

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Thanks Liz, but I was really thinking about funding priorities and trends with everything seemingly now focussed on Covid it detracts from other diseases etc.

Liz - how do you deal with task force inertia in a fast moving emergency?

Liz: Recognize that the nature of emergency response is that it's constantly changing. You can support evidence-based strategies by referring to larger program or response goals and how your strategies support achieving them. Also, remind people what your objectives are to avoid "mission creep" but recognize you may need to update your mission as the emergency changes.

Makueni County in Kenya Africa alot of rumours are rooted as well hesitancy. Need for intensifications of campaigns to address the same

What are rumors based on? And how are you collecting the insights

Makueni County in Kenya Africa alot of rumours are rooted as well hesitancy. Need for intensifications of campaigns to address the same

Good that you have 'listened' to the people and found barriers. Using trusted locally accessible and respected influencing people and groups will be one way.

Makueni County in Kenya Africa alot of rumours are rooted as well hesitancy. Need for intensifications of campaigns to address the same monitoring and measuring are challenges. How can you get rid of background noise in your report?

Bretta, I think there is a need to have analysis of available data and to identify the basis for rumours and designed strategies to address them.

Press the mute button as the record proceed

Some communities have repulsive instinct to particular political parties and their It's a big challenge in India. Let's think through together

It is important to bring all on board and so can't keep politics away but we can regulate the 'narrative'. May use their 'influencers' for our purpose ?

There is this notion that private health facilities give superior vaccines as opposed to the government facilities.This narrative is among rich population

Is it just vaccine only or is it a larger problem of distrust involving all aspects of health care services by the government ?

There is this notion that private health facilities give superior vaccines as opposed to the government facilities.This narrative is among rich population

Mostly it's vaccines because you will find congested government facilities especially referral hospitals seeking medical care.

what are some of the strategies that we can use in refugee camps hosting different nationalities . Note- hesitancy is based on different nationalities

Refugee camps has team leaders who manages refugees, they can be engage as influencer to vaccinate children in refugee camps with diff. nationalities

What is MICS /NICS ?

Lis: MICs = multiple indicator cluster surveys. Learn more here:  
<https://mics.unicef.org/> NICS = national immunization cluster survey. An example from Nigeria:  
<https://www.jhsph.edu/ivac/wp-content/uploads/2018/04/Nigeria-NICS-National-Brief.pdf>

What is MICS /NICS ?

Multiple indicator cluster survey / national immunization cluster surveys

What is ODK

Lis: ODK is open data kit, a type of open software that makes it easy to create surveys and databses on the go, good for mobile phones: <https://getodk.org/> -- it is widely used to support data collection for immunization programs

What is ODK

Kobotoolbox is a ready to use tool based on ODK for free! We have other tools as well ... Allows even mobile or pc based data collection

What is RI

What is the final project that we r supposed to work on??

ROoutine immunization  
you will hear about it during today's session

When using slido, it is not easy to post your ideas and get insights from colleagues at the same time.How can we give our ideas and listen to colleagues better?

Lis: You're doing it. :) Keep going! Once more people are familiar with Slido, there will be more discussion here.