

# Session 1



LONDON  
SCHOOL of  
HYGIENE  
& TROPICAL  
MEDICINE



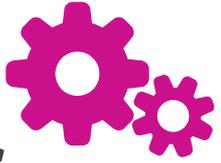
## Vaccine Hesitancy Workshop: Building trust and managing risk

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**What is your understanding of  
“Vaccine Hesitancy”?**

**How would you define it based on  
your country experience?**

**In 2013, the WHO Strategic Advisory Group of Experts (SAGE) convened a Working Group to define and understand the reasons for Vaccine Hesitancy**

**In 2015, The Working Group on Vaccine Hesitancy concluded that:**

Vaccine hesitancy refers to delay in acceptance or refusal of vaccination despite availability of vaccination services.

Vaccine hesitancy is complex and context specific, varying across time, place and vaccines.

It is influenced by factors such as complacency, convenience and confidence.

[McDonald, et al. Vaccine hesitancy: Definition, scope and determinants" \*Vaccine\* 2015; 33 \(34\): 4161-4164](#)

# In 2019, WHO named Vaccine Hesitancy as one the top ten threats to global health



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Ten threats to global health in 2019

## Vaccine hesitancy

Vaccine hesitancy – the reluctance or refusal to vaccinate despite the availability of vaccines – threatens to reverse progress made in tackling vaccine-preventable diseases.

The reasons why people choose not to vaccinate are complex; a [vaccines advisory group](#) to WHO identified complacency, inconvenience in accessing vaccines, and lack of confidence are key reasons underlying hesitancy.

# Building trust in immunisation

Who needs to  
be involved,  
why, and how

Susan Mackay,  
Head, Demand, Communities and Gender,  
Gavi Secretariat

# Multi-partner Global Hub for Vaccination Acceptance and Demand



## Hub Tools and Guidance

Advocacy & Communication Resource Library  
Technical Resource Library



Agenda setting for post-2020 GVAP2.0 and GAVI5.0 and white paper development



## Technical Assistance

Architecture to provide TA to countries to diagnose and respond to demand-related challenges



## Community of practitioners

Platform to build a community of skilled practitioners at global, regional and national levels



# Demand generation

ensures that **parents, caregivers, communities & influencers**



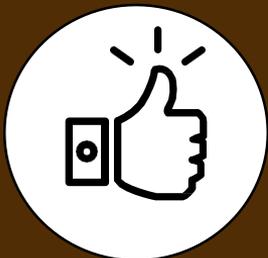
value immunisation



trust the safety & efficacy of vaccines



have confidence in the quality of service & those providing them



have enough information, capacity & motivation to seek out immunisation on time



# Why do we miss children?

knowledge /  
information gap



**EXAMPLES** Parents not aware  
of need for  
immunisation or  
how, when, where  
to access

trust or  
confidence  
gap



From fear of  
minor side effects,  
to mistrust in  
vaccines or in  
providers or  
authorities  
delivering them

'intention  
to action'  
gap



Open to  
immunisation but  
lack of motivation,  
logistical barriers,  
competing priorities  
etc

service delivery /  
quality problems



Lack of vaccines,  
vaccinators,  
long queues,  
rudeness, no  
toilets etc

home



facility



***The lack of demand side data is a key issue. Global expert group established in 2018 by WHO for 'Measuring Behavioural and Social Drivers of Vaccination'***

Guiding principles, scope and structure agreed for the development and in country testing of new qualitative and quantitative tools and development of practical user guidance



**What are the challenges for clinicians and others communicating with parents, carers and the community?**



# Introducing the caregiver journey

1

## Knowledge, awareness and belief

### Practical knowledge

*Missing information leads to inaction.*

### Confirmation

*Comfortable information takes priority.*

### Attention scarcity

*People focus on the most pressing challenge now, which may not be a routine health service.*

2

## Intent

### Omission

*Action can be scarier than inaction.*

### Deferral

*Bias towards the present.*

### Optimism

*It will not happen to me.*

### Social norms

*Perceived group rules regulate behaviour.*

3

## Preparation, cost & effort

### Hidden costs

*Free is not always free.*

### Hassle factors

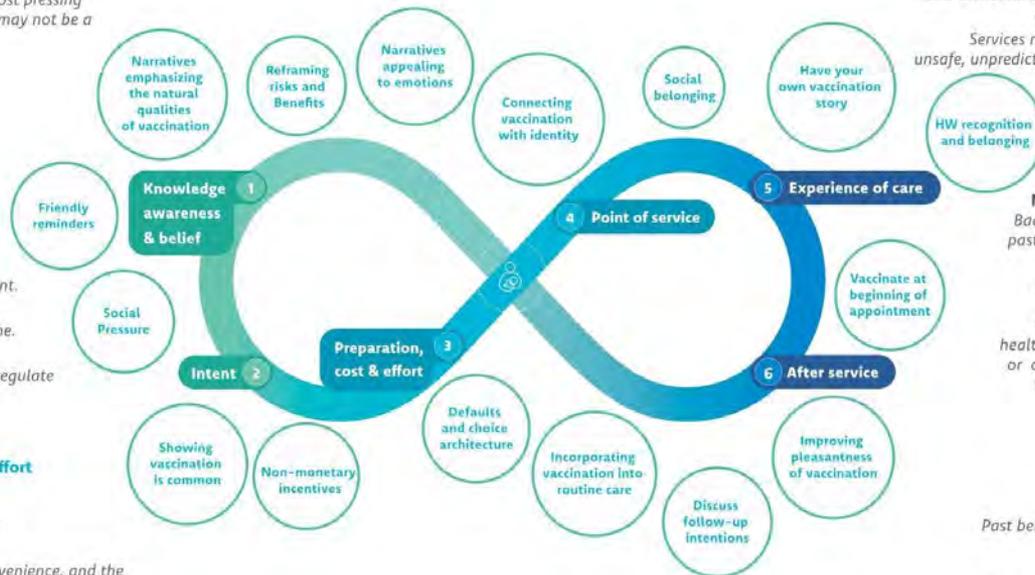
*Obstacles of time, convenience, and the complexity of vaccine schedules.*

### Decision paralysis

*Ambiguity and uncertainty foster inaction.*

### Incentives

*People value an award they choose over one chosen for them, even when the rewards are equivalent in value.*



## Point of service

4

**Fundamental attribution error**  
*Blaming the person, not the situation.*

### Apprehension about HCWs

*Uncertainty or apprehension about capacity, knowledge, compassion or other characteristics of health workers.*

### Supply inconsistency

*Services may be perceived to be unsafe, unpredictable or of low quality.*

5

## Experience of care

**Negative experiences**  
*Bad experiences from the past outweigh the neutral or good.*

### Apprehension about the system

*Uncertainty about the health system, government or organization perceived to be providing health services.*

6

## After service

**Status quo**  
*Past behaviour predicts future behaviour.*

### Memory recall

*The easiest things to recall are recent; the most influential things to recall are personal; the easiest information to retell is in the form of a story.*

## HOW MIGHT WE (HMW)...



EPI DEMAND PROMOTION FIELD RESEARCH REPORT - SEPT 2019 45

### CAREGIVERS

#### "Service Provision at the Shrine"

- I like**
  - ... the involvement of special interest groups in deciding how they want to receive care
- I wish**
  - ... they had showed the reaction of the community towards these new services
  - ... technology were integrated into the solution to send SMS to the congregants alerting them of upcoming service days and kept electronic medical records of the children's health status
- What if**
  - ... there were increased immunized children
  - ... the broader community delivered at the shrine



### VHw

#### "Briefcase of Information"

- I like**
  - ... how creative and multi-faceted this solution is... and friendly!
  - ... the mixed methods including songs and dancing and teaching aides
- I wish**



Behaviourally informed Human Centred Design Demand Creation workshop in Zimbabwe, September 2019

Unicef, Govt of Zimbabwe

### LEADER

#### "Community Dialogue"

- I like**
  - ... consultation at the highest level
  - ... the respect that the health leaders showed for the religious leaders
  - ... the spirit of cooperation
- I wish**
  - ... this could be more far-reaching and cascade to all church branches
  - ... there was engagement of traditional leaders and local government officials
- What if**
  - ... this dialogue was run at the national level as well to influence all church leaders?
  - ... included exchange programs between faith healers and midwives to share knowledge and practices?



# Behavioural insights

**Behavioural Insights** combines insights from various disciplines of behavioural sciences such as behavioural economics, social and cognitive psychology, and anthropology with empirically-tested results to discover how humans actually make choices.

**The Guide to Tailoring Immunization Programmes (TIP)**

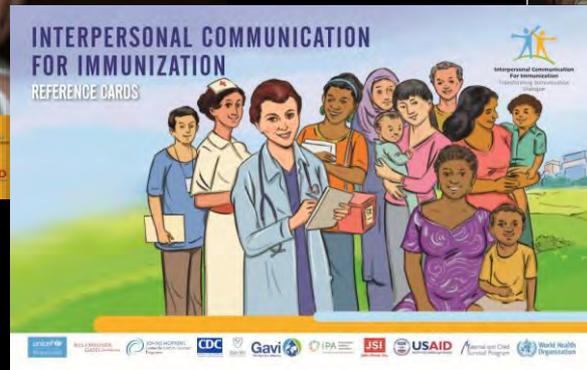
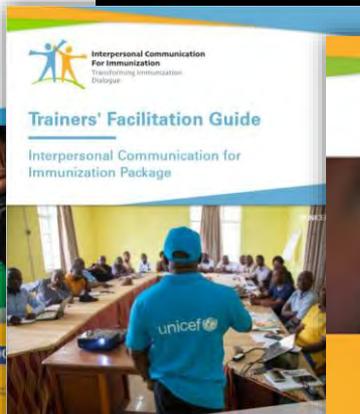


Increasing coverage of infant and child vaccination in the WHO European Region

 **World Health Organization**  
REGIONAL OFFICE FOR Europe

- A structured, adaptable, and low-cost participatory process for addressing the needs of under-vaccinated or hesitant target populations
- Based on a behavioural insights model, linking research to interventions to M&E
- Undertaken to understand enablers and barriers to vaccination
- To define and evaluate evidence-informed interventions to increase coverage

# Preparing frontline staff to have conversations about immunisation



Who are  
the thought  
leaders and  
influencers  
driving  
those  
discussions?



# Where are the never-reached children?

COUNTRIES WITH MORE THAN 100,000 UNVACCINATED OR INCOMPLETELY VACCINATED CHILDREN IN 2017<sup>19</sup>

Nearly  
**1/2**  
of all

under-immunized children are located in 4 countries

See below

[Learn more about how to build demand in these 4 countries](#)



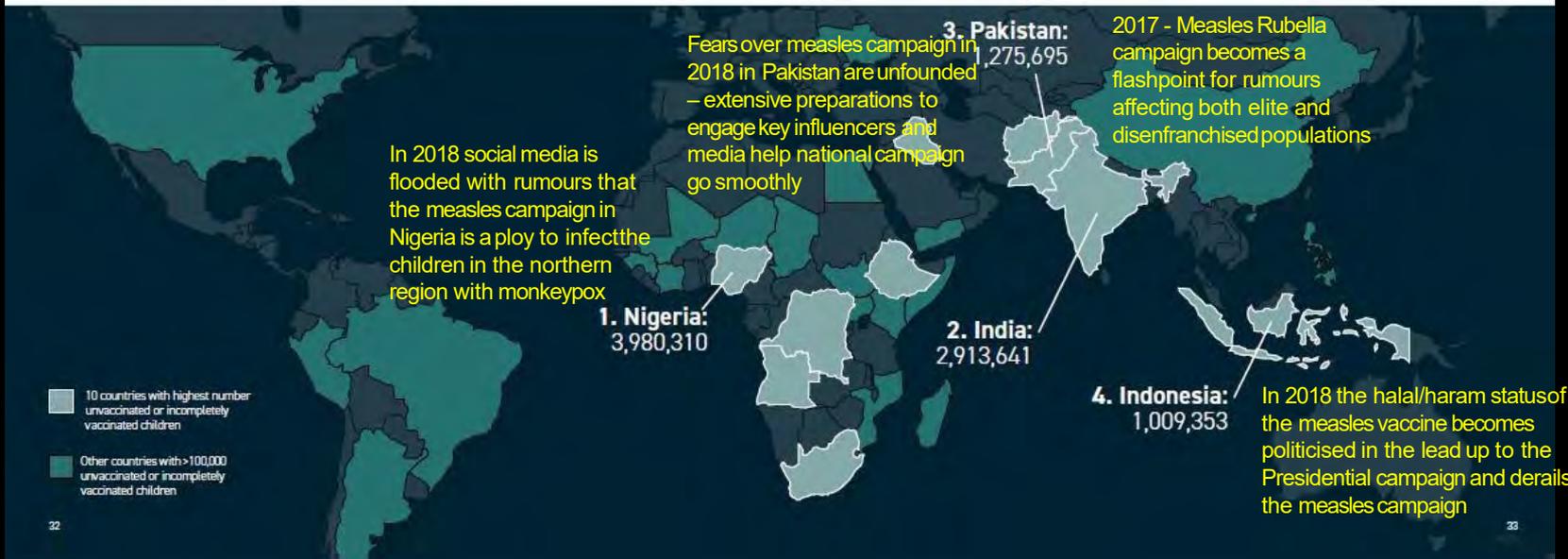
About  
**45%**

live in 16 countries that are polio-endemic, fragile, or affected by conflict.<sup>20</sup>

Around  
**25%**

live in 3 critical polio-affected countries—Afghanistan, Nigeria and Pakistan.<sup>21</sup>

Strong routine immunization coverage here is critical to achieving and sustaining global polio eradication.





Systematic engagement and relationship building with media is required to support immunization as both an individual and global good

# Creating the 'super-spreader'

Building a social  
movement for  
immunisation



# Welcome to

# be:cause

**be:cause** brings together global Alliance Partners and marketing communication experts to collaborate on demand generation challenges.

Centred around an online collaboration platform, a team of experts will facilitate the ideation process using innovative digital co-creation methodologies.



**Want to learn more about be:cause ?**  
Watch our video

*Please press play*

- 120 members from the Alliance from all around the world
- Almost half have actively participated
- 63 ideas have been posted in the first challenge with more than 200 builds
- It takes time to build confidence to post and share ideas but engagement is steadily growing
- Face to face workshop in October to pick top 15 ideas and overall winner



### Changing the conversation about vaccination

Much of the backlash against vaccination comes from fear, misinformation, and stigma, with pro- and anti- vaccine camps each

by Ariel F 1 week ago

0 VOTES VOTING CLOSED 1



### How do you become trendy (and trending)?

Both Elisabeth and Atsuyoshi proposed an approach that resonated greatly with me (the fact that I also played all Maxis games and I thoroughly enjoyed the anime version

by Diamantis Klimentidis 1 week ago

1 VOTES VOTING CLOSED 1



### Use computer games to teach kids (and others) about immunology

General knowledge of how the immune system works - and how vaccines can help protect against infections - is generally low. This is

by Gary Finnegan 1 week ago

3 VOTES VOTING CLOSED 0



### Use virtual reality to make infection risks feel 'real'



### How misinformation spreads and why we trust it



### Play, learn and earn: Mobile based vaccine contest



# Discussion:

What role could and should the media play?

What is the experience in your country?





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# Thanks!