Background

The Problem

Vaccine hesitancy in the Philippines is higher relative to neighbouring ASEAN countries.

1 mil ‘zero-dose children’ in Philippines who have not received a single childhood vaccine

1/3 of eligible adults are not fully vaccinated for COVID-19

reach52 is a health-tech social enterprise developing innovative, equitable solutions for rural populations. We extend care into last-mile communities through networks of Community Health Workers (CHWs) and our mHealth platform, reach52 access.

We have implemented successful vaccine-related interventions in Cambodia, India, Philippines and Myanmar.

Specific Aims & Objectives

reach52 launched a six-month campaign to improve awareness and uptake of vaccinations in select rural communities of Region VI (Western Visayas) through a holistic health system strengthening approach, enabled by offline-first mHealth technology.

The campaign focused on developing knowledge and skills of CHWs to promote vaccination (routine immunization for U5 populations and COVID-19 vaccination for adults). These upskilled CHWs then conducted door-to-door engagement of populations to identify vaccine hesitancy households and promote vaccine acceptance.

Methods

Upskill and equip Agents

CHWs are recruited and upskilled on the importance of vaccination, motivational interviewing techniques to counter vaccine hesitancy among un/under-vaccinated households and trained to use our mHealth platform.

Health and Data Collection

‘Digitized’ CHWs onboard local populations to our digital platform by collecting small amounts of individual-level data. They also conduct vaccine confidence profiling using WHO’s Vaccine Hesitancy Identifier.

Resident Engagement

Households found to hold perspectives consistent with vaccine hesitancy were engaged with motivational interviewing, to uncover the underlying attitudes and beliefs of their objections.

Referral

CHWs then countered with culturally relevant rebuttals and provided information on where to access vaccinations. A random sample of households were re-engaged at 30-days following engagement to measure outcomes.

Graphs/ Figures

Proportion of households accessing vaccine following engagement with trained CHW

Conclusions

The impact of this campaign demonstrates the potential to address vaccine hesitancy and effect positive behavioral change through delegation of tasks to local community health workers equipped with offline-first mHealth applications.

It is expected that this pilot will be scaled to additional municipalities in Western Visayas, Philippines in 2023.

Acknowledgements

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References


1 million babies in the Philippines have not had a single routine vaccine, exposing them to diseases. UNICEF (2022): https://www.unicef.org/philippines/stories/1-million-babies-philippines-have-not-had-single-routine-vaccine-exposing-them-diseases