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Background

MMR1 vaccine uptake in North Macedonia is lower than the 95% target. Reasons include caregivers concerns about the quality and safety of the vaccine and the lack of proper advice from health care practitioners (HCP) to guide caregivers towards vaccination.

Specific Aims & Objectives

Report the Conceptualization, design, implementation and process evaluation (IPE) of printed information materials developed specifically for HCPs and caregivers to trigger conversations and help increase timely MMR1 vaccination uptake in North Macedonia.

Methods

The study followed the 'TEST' (Target, Explore, Solution, Trial, Scale) approach to intervention development.

Design: An IPE was conducted to assess the process of the intervention implementation.

Setting and participants: Eligible health facilities in North Macedonia were selected where HCP advise caregivers on MMR1 vaccine. A purposive sample of HCPs and a convenient sample of caregivers were invited to participate in qualitative interviews.

Analysis: Thematic analysis was used.

Graphs/Figures

Leaflet with FAQs on MMR1 vaccination

Desk tent featuring a vaccine appointment checklist for HCPs and a FAQ for HCPs with responses to possible questions from caregivers about the vaccine.

Poster 1: Process poster aimed at caregivers, describing what happens during the vaccination appointment.

Poster 2: Questions poster aimed at caregivers, explaining that all children should receive the MMR vaccine at 12 months and inviting parents to ask questions about the vaccine to healthcare professionals (HCP) at the facility.

Poster 3: FAQ poster aimed at caregivers with answers to questions they may have about vaccines.



Results

Caregivers: Vaccine-hesitant caregivers reported recalling the materials and also that it increased their level of knowledge about MMR1.

HCPs: Found the leaflet as the most useful resource.

Caregivers/HCPs: Missed additional information about autism myth.

IPE: The intervention materials were distributed across the 35 health centres and 85 vaccination points, and implemented, as intended. However, it has become apparent that having continuous supply of printed materials may not be sustainable in the long-term due to financial constraints. Alternative modes of implementation may be needed.

Conclusions

This study provided preliminary insights into how HCP engage with printed information materials about immunization. Leaflets appear to be useful; however, the scalability of the solutions should be considered since the conceptualization phase of intervention development. Additional solutions that address specific concerns (e.g. autism myth) should be designed in North Macedonia.

Acknowledgements

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References

1. Behaviour Insights Team. Target, Explore, Solution, Trial, Scale. An introduction to running simple behavioural insights projects. 2022