

Decolonizing Global Health and Strengthening Vaccination Programs Using Online Platforms: a Bottom-up Approach

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Background

- Vaccination advocacy efforts have traditionally relied on in-person gatherings to design and implement interventions.
- The onset of the COVID-19 pandemic, followed by national lockdowns and travel limitations, led to innovations in in-country stakeholders and frontline health workers leading health initiatives.¹
- Physical gatherings can reinforce
 hierarchical structural barriers and power
 dynamics by limiting participation from
 certain groups and neglecting voices who
 may be most impactful in strengthening
 vaccination programs.

Objectives

- To incorporate online platforms to design a community-led intervention to strengthen vaccine uptake.
- To lead to a more horizontal and equitable approach to partnerships between researchers and the community.
- To bring together diverse perspectives to conduct effective research and facilitate long-lasting, sustainable changes in vaccine uptake, led by the community and local experts.

Methods

We took a multi-pronged approach:

- Development of a Community
 Accountability Board (CAB) of local influential leaders;
- 2. Use of online human-centered design (HCD) workshops to co-create interventions to improve vaccine uptake;
- 3. Implementation of a co-designed, community-led six-pronged intervention incorporating online activities.

Figures

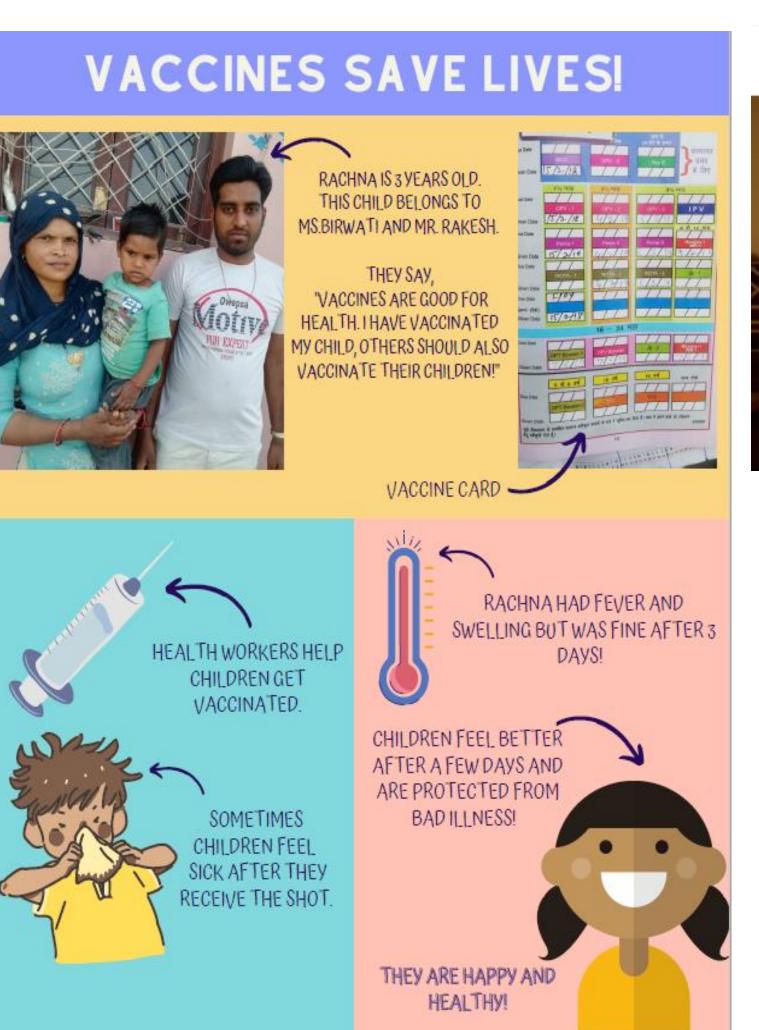


Image of intervention aspect: pamphlets of local families advocating for vaccines.



Image of intervention aspect: communication training for frontline health workers.

Image of intervention aspect: video of vaccine advocacy. Examples: Addressing Rumors Statement: People died after getting vaccinated. That means the shot is not safe. Fact: There is more than meets the eye in these cases. Deaths have not been linked to the COVID-19 vaccine. Fact: Immunity has not yet been reached. Cases are rising in India. It is important to stop the spread. The vaccine will help do this. Fact: COVID-19 happens everywhere. Anybody can get very sick. Getting the vaccine will protect you and your community.

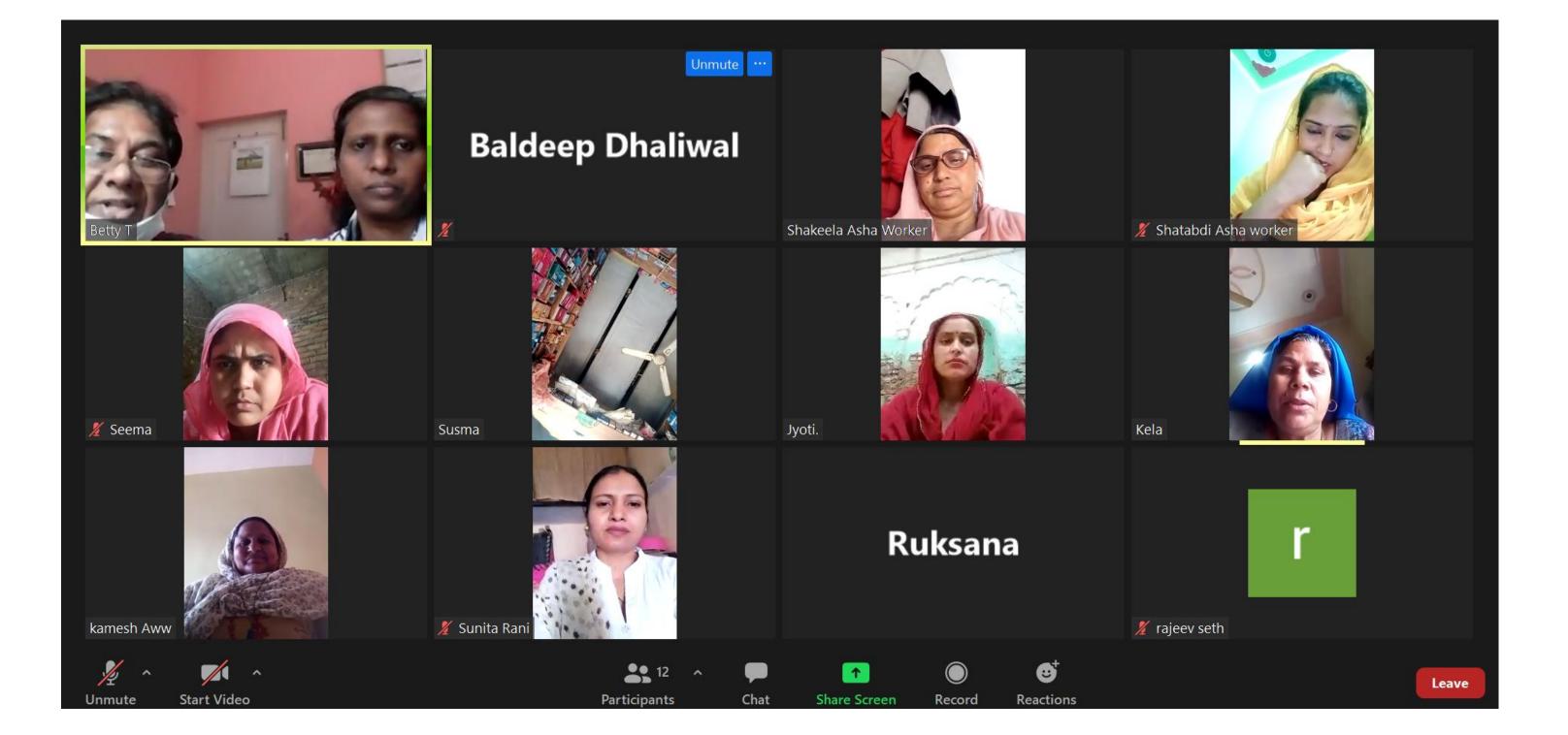


Image of virtual human-centered design workshop: frontline health workers contributed to the design of the intervention to strengthen vaccine uptake.

Results

- Using online platforms to design an intervention provided an opportunity to combat systemic barriers that in-person activities often facilitate in terms of gender, social standing, professional standing, and background.
- Online workshops brought together a high number of women who are typically unable to participate in these types of activities due to societal expectations or logistical household barriers.
- We strengthened the diversity of participants, provided a space for more marginalized groups to speak up, and minimized logistical barriers to attendance.
- Using online platforms to facilitate meetings and workshops enabled the community to have a larger voice in the planning of activities and the creation and implementation of interventions to strengthen vaccine uptake.
- Researchers must still grapple with doing more to ensure equity, particularly in populations without internet access.

Conclusions

Online platforms can overcome economic and travel-related barriers, which contribute to lower participation from institutions and countries with limited resources. Online platforms also empower women who bear more social costs to attending inperson meetings, as well as early career practitioners. To further strengthen equity, there is a need to recognize the power of virtual strategies to facilitate underrepresented groups to meaningfully participate in all aspects of research.

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References

1. Dhaliwal BK, Singh S, Sullivan L, Banerjee P, Seth R, Sengupta P, Bhattacharjee I, Mehta K, Reddy KS, Shet A. Love, labor and loss on the frontlines: India's community health workers straddle life and the COVID-19 pandemic. Journal of global health. 2021;11.







