2. Strengthening communications in immunization programmes

Communication plays a critical role in immunization service delivery. It is crucial for building and maintaining public trust and, as a result, the demand for vaccination. Recognizing this, WHO has been working to help countries strengthen their communications capacity.

For example, in Kiribati, village health volunteers and health-care workers were supported in developing communications plans to educate pregnant women on hepatitis B vaccination and ensure that newborn babies received vaccinations just after birth. As a result, birth-dose coverage within 24 hours improved among home deliveries.

In the Lao People’s Democratic Republic, particularly among the Hmong minority, a key part of the response to an outbreak of circulating vaccine-derived poliovirus was the engagement of local governments and communities to conduct non-traditional communications outreach that included songs, recorded skits and radio messages. The approach contributed greatly to the successful interruption of disease transmission.

National immunization programme staff members also need good communications skills, especially to mitigate the negative impact of adverse events following immunization (AEFI). The Regional Office supported countries to build staff capacity by training both national and subnational staff, with a particular focus on responding to concerns about possible AEFI. Training conducted in Viet Nam in 2016 has already produced benefits: the country has shown progress in AEFI reporting, has responded promptly to all reported events, and as a result has avoided any negative impacts on their national immunization programme from possible public concern. Viet Nam also enacted a new decree on vaccine safety.