TESTED SOLUTIONS FOR
COVID-19 Vaccine Uptake by Health Workers
Encouraging COVID-19 Vaccine Uptake

Health workers are a priority group for COVID-19 vaccination—both for their role as frontline workers and their influence on the public. Yet many have not been vaccinated against COVID-19, especially in low-income countries where overall vaccination rates are still quite low. Innovative solutions to increase health workers’ acceptance and uptake of the vaccine are needed.

In close collaboration with health workers, programmers, and policymakers in several countries we used behavioral design to develop a set of evidence-informed solutions to support health worker uptake of the vaccine. The solutions help increase the visibility of vaccination among peers, counter concerns stemming from misinformation, and boost confidence to accept the vaccine and encourage others to as well.
How to Use This Guide

This tool guides you through the how-to of the solutions so you can see if you may want to adapt and implement them in your own setting.

1. Learn more about the 4 different solutions that were tested
2. Consider how these could be useful for your programming
3. Download the actual files of the solutions for implementation
4. Read more about the formative research
Tested Solutions

Visibility Wearables
Visible items that signal a health worker has been vaccinated.

Peer Referral System
An invitation and appeal extended to an unvaccinated colleague.

Professional Forum
A meeting for health workers to resolve concerns and receive reliable clinical information.

Vaccine Quiz Cards
An interactive set of cards building knowledge about the COVID-19 vaccine.
Notes on These Solutions

In most cases these solutions were developed and tested within multiple countries, to address behavioral barriers that were identified and resonated across contexts. Countries where the solutions were developed included: Burkina Faso, Cameroon, Cote d’Ivoire, Liberia, Nigeria, and Senegal.

The solutions presented here were designed for use with facility-based health workers to promote the COVID-19 vaccine but may be considered for adaptation to other groups and other vaccines or health behaviors.

Design content and materials should be adapted as appropriate for each setting based on consultation with health workers and local authorities.
Health workers who have concerns about the vaccine may delay taking it until they are confident it is safe. Knowing others who have gotten vaccinated without negative effects can be a strong influence on accepting the vaccine, yet, health workers may be unsure about the vaccination behavior of their peers or simply assume they are not vaccinated.

Wearable items raise the visibility of those who have successfully vaccinated and help to prompt questions and conversations, creating opportunities to encourage others.

Drawing attention to peer norms can also motivate health workers who do not want to be seen as different to get vaccinated.

“The visibility of those vaccinated will set a good example for others to follow.”
– HEALTH WORKER, COTE D’IVOIRE

“Yes, if I have a pin [wearable], I will be willing to wear the pin to be identified and help spread the message. The pin will serve as awareness.”
– HEALTH WORKER, LIBERIA
Motivates them to be open about their vaccination status.

Health workers receive a visibility item upon getting vaccinated.

How the Vaccine Wearables Work

1. Health workers receive a visibility item upon getting vaccinated.

2. Health workers wear the visibility items during their work.

3. Colleagues and clients ask providers about their vaccination experience.

4. Health workers share their reasons for vaccination and encourage others.

Motivates them to be open about their vaccination status.

Increases the visibility of vaccinated peers and normalizes vaccination.

Prompts conversations to counter misinformation.

Makes the benefits of vaccination more salient and motivates others.
Choosing this Solution

• Wearables are only appropriate for settings in which health workers are comfortable disclosing their vaccination status.

• Wearables can serve to increase vaccine visibility and prompt conversations with clients too, so the items can also be tailored with this audience in mind.

Resource Considerations

• Costs for procuring enough items for all health workers expected to be vaccinated in participating facilities.

Considerations for Implementation

• Make sure the specific item (e.g. pin, lanyard, wristband) can be worn regularly during work. The items should be durable and not easily lost.

• The messaging should be motivating and visible during regular wear.

• Consider how to distribute items at the time of vaccination, how health workers will be identified at vaccination sites, and how to distribute items to already vaccinated health workers.
Peer Referral System
Prompting health workers to encourage their peers

Health workers who do not feel personally at risk from COVID-19 and have a low sense of urgency to get vaccinated, or who still have lingering concerns about the vaccine and distrust the messaging from official sources, may delay getting vaccinated or choose not to do so at all.

A referral system leverages peer networks by prompting health workers to appeal to their unvaccinated colleagues, share their own vaccination experiences, and be a reliable source to counter misinformation.

“[If a colleague gave me a referral] he wants me to be protected from the disease. I will feel highly respected & considered.”
– HEALTH WORKER, NIGERIA

“People or someone receiving the vaccine [referral] card will feel good because it’s served as evidence of completing the vaccine and will encourage others to take the vaccine.”
– HEALTH WORKER, LIBERIA
How the Peer Referral System Works

1. Health workers receive several referral cards upon getting vaccinated. Prompts them to encourage others to get vaccinated too.

2. Health workers give the referral cards to unvaccinated peers. Demonstrates care and concern for their colleague.

3. Health workers share their reasons for getting vaccinated and their experience. Makes vaccine benefits more salient and counters misinformation.

4. Referral cards list clear instructions on how to get vaccinated. Reduces hassles and instills a peer commitment to follow through.

5. Referred health worker gets vaccinated and receives cards for others. Leverages peer networks to boost vaccination rates.
Choosing this Solution

• Referrals are only appropriate for settings in which health workers are comfortable disclosing their vaccination status and are motivated to refer without formal incentives.
• Distributing wearable items alongside the cards can help generate enthusiasm among health workers to make referrals.

Considerations for Implementation

• Cards should include clear, and consistently reliable, directions on how and where to get vaccinated.
• Consider how to identify health workers and distribute cards at vaccination sites, and to those already vaccinated.
• If monitoring referrals is desired, consider ways to encourage bringing the cards to vaccination sites while making clear that they are not required to get vaccinated.

Potential Adaptations

• Digital referrals through phones can be considered if feasible, although physical cards are often appreciated as special to receive.
• Cards could be adapted to encourage referrals of clients or between community members directly.

Resource Considerations:

• Costs of printing enough cards so all vaccinated health workers can make referrals. We recommend 2-3 cards per health worker.
Health workers often don’t feel equipped to respond to their clients’ or colleagues’ questions about the COVID-19 vaccine. They may also have lingering concerns related to its safety and efficacy, side effects, composition, and development. Lack of knowledge or distrust reduces their confidence to make decisions or share recommendations to others related to vaccine.

Through discussion facilitated by respected experts, the professional vaccine forum prompts health workers to reflect on concerns related to the COVID-19 vaccine, provides reliable and tailored information to resolve questions, and encourages engagement with others around the vaccine.

“When invited, I will surely attend because it will provide me the opportunity to learn some important lessons about the vaccine that will help me in providing quality services and impact more service providers.”
– HEALTH WORKER, LIBERIA

“The forum is an opportunity for experts to deconstruct rumors.”
– HEALTH WORKER, COTE D’IVOIRE
How the Professional Forum Works

1. Health workers receive a personalized invitation from the local authority.

2. Vaccine experts facilitate learning and discussion sessions among health workers.

3. Health workers hear testimonials from trusted peer messengers.

4. Health workers return to their facilities and communities to encourage others.

- Leverages professional identity and exclusivity to encourage participation.
- Addresses vaccine concerns with tailored information from trusted sources.
- Makes more salient the consequences of COVID-19 infection and the benefits of vaccination.
- Provides positive role models and counters misinformation.
Considerations for Implementation

• Decide at what level to hold forums and who to prioritize for participation. We recommend health workers engaged in immunizations, particularly influential among peers, or particularly vaccine hesitant.

• Testimonials can be pre-recorded or live and should be delivered by health workers with similar backgrounds as participants.

• Agendas and forum facilitators should be adapted to based on relevant concerns and trusted messengers. Invitations and certificates should be endorsed by a trusted authority (e.g., stamped by Ministry of Health).

Potential Adaptations

• Forums can be in-person or virtual. Virtual allows greater participation at reduced costs but may be less engaging or inaccessible to some.

• Consider formalizing a “Vaccine Ambassador” role for participants, leveraging prosocial identities to promote counseling of peers and community members to combat misinformation. “Ambassadors” can be issued a certificate and additional tools, such as talking points or FAQs.

Resource Considerations:

• Time and costs of a half-day forum with health workers, plus printing invitations, travel reimbursement, and per diems to ensure attendance.
Easily accessible, fact-checked information about the COVID-19 vaccine is often not as salient or pervasive as misinformation, which spreads readily in communities. Health workers are regularly asked questions by clients about the COVID-19 vaccine, and may not always feel confident in providing answers, as many health workers still have questions of their own.

The vaccine quiz cards help health workers build their understanding about the COVID-19 vaccine in an engaging way, so they feel more confident to take the vaccine and to share information with others.

“I trust the information on the cards... [they] will update health workers’ knowledge and create awareness in the community.”
— HEALTH WORKER, NIGERIA

“Honestly I wasn’t sure how to answer my client’s questions before...so see now, these cards are already helping me.”
— HEALTH WORKER, NIGERIA
How the Vaccine Quiz Cards Work

1. Visually attractive, colorful cards are kept on a ring in the facility.
2. Health workers review the cards in their own time or together during meetings.
3. Health workers draw a card on themes related to the vaccine.
4. Cards pose a question about the vaccine for health workers to practice answering.
5. Health workers flip the card over to reveal the answer to the question.

Draws attention and generates interest in the cards.
Provides flexibility in when and how to engage with the content.
Organizes content into topics most relevant to health workers.
Engages health workers to reflect on their own understanding of the topic.
Corrects misperceptions and boosts confidence in vaccine knowledge.
Choosing this Solution

- Health workers must be interested to engage with the cards. Consider ways to drive adoption and engagement, such as discussing cards in regular meetings or posting one weekly to on a notice board or WhatsApp group.

Resource Considerations:

- Costs to procure sufficient sets for participating facilities. For example, 1-2 decks per small facility, or in larger facilities, one per unit or every 8-10 health workers.

Considerations for Implementation

- Card content should reflect relevant concerns and be translated to the local language.
- Card content should be periodically assessed for accuracy and updated to reflect new information and to refresh interest.
- Ensure the cards are kept in a safe place while still visible to health workers. For example, they could be tethered to a nurses’ station with a pen chain so they are accessible but not easily walked away with.
Choosing these solutions

Each of these solutions may be implemented alone, or together with others as a complementary package, depending on which drivers of vaccine hesitancy have been identified in the context.

In contexts where there is strong hesitancy or deep-seeded concern about the vaccine, building health workers’ knowledge and trust will be an important foundation. Where there is less concern and more ambivalence, other solutions focusing on more social elements, such as emphasizing norms, may be effective.
Additional Resources

LEARN MORE:

• Closing the Global COVID-19 Vaccine Gap: Three Encouraging Insights to Support Vaccine Demand
  Formative research on design opportunities

• Insights to support health worker uptake of the COVID-19 vaccine
  Synthesis brief of observed barriers and potential solutions
Help close the COVID-19 vaccine gap.
Take action now.

For more information about these solutions for COVID-19 vaccine uptake, contact the ideas42 Global Health Team at gh@ideas42.org

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