eCBHFA Immunization
Volunteer guide for empowering communities
The International Federation of Red Cross and Red Crescent Societies (IFRC) is the world’s largest volunteer-based humanitarian network, reaching more than 150 million people each year through our 191 member National Societies and 12 million volunteers. Together, we act before, during and after disasters and health emergencies to meet the needs and improve the lives of vulnerable people. We do so with impartiality as to nationality, race, gender, religious beliefs, class and political opinions.

The Red Cross Red Crescent Movement especially aims to serve those left behind – people who are out of reach, out of sight, left out of the loop, out of money, or out of scope.

Our strength lies in our volunteer network, our community-based expertise and our independence and neutrality. We work to improve humanitarian standards, as partners in development and in response to disasters. We persuade decision-makers to act at all times in the interests of vulnerable people. The result: we enable healthy and safe communities, reduce vulnerabilities, strengthen resilience and foster a culture of peace around the world.

Acknowledgments

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Introduction

Reaching the fifth child

Around two to three million people’s lives are saved every year thanks to the success of vaccine programmes around the world.

Vaccines have helped get rid of smallpox, have nearly put a stop to polio and have dramatically reduced disability and child death rates worldwide. With the exception of safe water, nothing else, not even the use of antibiotics, has had such a major effect on reducing deaths, illness and disability and on allowing the population to grow.

It is estimated that about 85 per cent of children in the world receive routine infant immunizations. Most of the rest – about 20 million children, or nearly one in five – who do not receive vaccines often live in communities experiencing conflict, extreme poverty, remoteness or other conditions that make them vulnerable. Reaching these children is the challenge for immunization programmes everywhere.

In the past ten years, there have been some new challenges which have had an effect on vaccine programmes. One of the most concerning is wrong or misleading information about the value and importance of vaccines. This can make parents and caregivers hesitant to vaccinate their children. This information often comes from false reports in social media leading parents and caregivers to worry about the safety of childhood vaccines. This has led to diseases like measles reappearing, with large outbreaks and deaths from preventable diseases.

IFRC and the Red Cross Movement have an important role to play to increase access to vaccines everywhere, but particularly in vulnerable communities. Immunization programmes are also putting in place strategies to increase trust in vaccines and vaccination programmes and to improve the quality of immunization services. Red Cross Red Crescent volunteers are very well placed to access and talk to communities so as to address the problem of people being hesitant to vaccinate their children (known as “vaccine hesitancy”). It is part of our commitment to support parents in their efforts to fully protect their children and themselves throughout life.

The two main goals now are to reach the fifth child and to deal with vaccine hesitancy.

All countries have their own challenges, such as parts of the population being hard to reach, perhaps because of living in a remote region or insecurity. Countries also have the challenge of dealing with reasons for resistance. This is where the IFRC with its strength in involving communities can make a massive contribution to reaching everyone with life-saving vaccines.
This eCBHFA volunteer guide will equip Red Cross Red Crescent staff and volunteers with basic information about immunization – how it works, how to support your community with the right information and motivate them to protect their families. No two communities, or even families, are the same, and so the ability to adapt our work to the context is critical in this effort. You are a vital part of a global movement to protect every person from preventable disease.

Your role in reaching households is incredibly important, both for protecting children from vaccine-preventable disease, but also for introducing families to the health system. When children are vaccinated, it is possible to bring them and their families into the formal health care system where they can receive maternal and child health services and broader health care. Delivery of this health care helps us to reach the unreached and the most vulnerable groups and fragile communities.

Your role

Red Cross Red Crescent community volunteers have a critical role in promoting childhood immunizations and vaccination campaigns by:

- promoting routine immunization in the community, especially to women of reproductive age, newly pregnant women and households with children
- sharing information about vaccination campaigns with community members
- helping to organize vaccination sites during campaigns
- bringing people to vaccination sites and making sure all eligible people have been vaccinated
- explaining the benefits of immunization to members of the community
- reassuring parents about the safety and efficacy of vaccines
- supporting the local health centre during National Immunization Days
- knowing the national vaccination schedule
As a volunteer, you can adapt the content in the immunization volunteer guide to the needs of your country or community. To help with this, the guide and toolkit have practical exercises that allow you to identify the vaccination needs and challenges in your community. You can also select the topics in the immunization guide that will be most helpful for your situation.

Core topics
This is the core information that all Red Cross Red Crescent volunteers should know and be prepared to teach and discuss with community members.

Immunization topics

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<th>Topic</th>
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<td>5</td>
<td>Common barriers to vaccination</td>
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</tbody>
</table>

Note that volunteers can also reference eCBHFA’s Communicable Disease Prevention Module for further information to keep safe from vaccine preventable diseases at all ages.
Overview

In this topic you will learn that vaccination provides important protection against disease and that vaccines are safe, effective and affordable. However, vaccination can be a difficult concept for people to understand so it is helpful to have a quick and easy way to describe it during your work with communities.

Learning objectives

On completion of this topic you will be able to:

- Explain the principles of infection, disease and how the body protects itself
- Explain the role of vaccination in protecting children against disease
- Use an analogy that fits the local culture to explain vaccination

Tools

- Vaccine infographic
- “Vaccine is like...” infographic and exercise

Topic summary

Infection, disease and vaccination

When germs such as bacteria or viruses invade your body, they attack and multiply. This is called an infection, and infection is what causes illness and disease.
When this happens, your body fights back against the germs by making antibodies - which are the body’s natural defence weapons. This is done in the body’s immune system, the headquarters for the body’s defence against infection and disease.

The first time you are attacked by a new type of germ, it can take several days for your body to make all the antibodies needed to beat the infection. After the infection, however, if the same type of germ invades again, your body will be able to recognize it and react quickly to kill it. This means that you are much less likely to get sick and develop the disease. This is called immunity.

Reflection

1. How does your body naturally defend itself when germs such as bacteria and viruses attack?
2. What does it mean to have immunity against a disease?

What is a vaccine?

Tool 1.1: Vaccine infographic

Vaccines help develop immunity by imitating an infection. A vaccine delivers a weakened form of a disease, but it does not cause illness. In other words, a vaccine acts like an infection, without making you sick. Instead it helps your body’s natural immune system to work to protect you against that disease.

Vaccines are normally delivered through injection, though they can also be given through drops (polio is one example), or through inhalation (some flu vaccines). With the help of the vaccine your body can now develop immunity against different diseases by creating the antibodies needed to protect you. Though no vaccine offers 100 per cent protection, your body will be much better able to protect itself against that disease if it ever tries to invade again. The vaccine helps your body to remember and to develop long-term immunity against that particular disease.

The act of giving someone a vaccine is called vaccination or immunization.

Sometimes a vaccine needs to be given many times, in a series, to help remind the body how to recognize the disease and develop immunity.

Vaccines are safe and effective and the strongest protection available against vaccine-preventable disease. Today, immunization is considered to be one of the most important discoveries in the history of public health and it is estimated that the lives of two to three million children are saved by vaccines every year.

Reflection

- How does vaccination protect you from disease in the future?
- Do vaccines offer 100 per cent protection?
- Name the three ways common vaccines are given?
How many children are estimated to be saved by vaccines every year?

Using analogies to explain vaccination

- Tool 1.2: “Vaccine is like…” infographic and exercise

Vaccination and immunity can be difficult ideas for people to understand. One way to explain the importance of vaccinating children to their families is to use an “analogy”. This means making a comparison between what you want to explain and something more common or familiar to your audience, to try and make the difficult idea clearer. This helps people remember and can make it more relevant to their lives.

Think of an analogy for vaccination that might work in your community. Try them out in your community and see which one works best. Here are a few ideas to get you started. Use Tool 1.2 for more.

Example: Soldiers preparing for battle

A vaccine helps your body to make soldiers to fight against an enemy invader, in this case a disease. For example, the measles vaccine helps your body create special soldiers to protect from a measles invasion.

So, if the real disease turns up, your body can respond quickly and fight it so that you do not get sick.

Example: Studying for an exam

Vaccines are like teachers. They train and teach the body to remember certain diseases.

So, when the exam comes (when the disease invades the body), your body will know how to fight it.

Dress rehearsal

Vaccination is like a dress rehearsal for your immune system so it is prepared for the “real show”.

Going to the gym

Getting a vaccine is like taking your immune system to the gym. The gym is about training your muscles to be strong. A vaccine is like a gym for your immune system, activating it early, so it makes sure your body’s defences are strong and ready when the actual virus hits.
The bridge

Not vaccinating is like choosing to swim through crocodile-infested waters, because you are worried the bridge will collapse.

You can think of your own analogy by simply finishing the sentence: “Vaccination is like…”

Remember: analogies work best when they are drawn from people’s everyday experience or from local stories, culture and traditions. In this way, they help people to learn and better remember facts by relating them to something they already understand or with which they are familiar.

Reflection

1. What is an analogy?
2. Can you think of analogies for vaccination that are appropriate for your community? These can be based on local stories, sayings or traditions.

Wrap up

Infection is caused by bacteria and viruses that invade your body. Your body responds by making antibodies that fight the infection. Vaccines are safe and effective and are a natural way to help prepare your body to fight off infection. Sometimes it can be hard for people to understand how vaccines work. However, comparing vaccination/immunization to something memorable or familiar can help you to explain it to your friends, family and neighbours.
Overview

In this topic you will learn that children get sick for many reasons and that vaccines can protect them from diseases like polio, diphtheria, pertussis (whooping cough), tetanus, tuberculosis and measles. When given at the right time by qualified people, vaccines are safe and effective.

Learning objectives

On completion of this topic you will be able to:

• Name the common vaccine-preventable diseases that threaten your community
• Explain possible side-effects following vaccination/immunization
• Explain the danger of not vaccinating
• Explain that immunization is safe and effective and the best protection against vaccine-preventable diseases

Tools

- Fill in the blanks: a story of disease
- Name and fame vaccine-preventable diseases counselling cards
Topic summary

What makes children sick?

It is useful to know about the diseases and health problems that children face in your community. This will help you to understand the health issues that parents may be most concerned about. These may be more of a priority for them than vaccine-preventable disease. You should also make sure that you know any local names for diseases so that it is easier to talk to families about them.

Children get sick for many reasons. For example, poor nutrition, poor sanitation and lack of access to clean water can make them ill. Children can also catch diseases that cannot be prevented with vaccines as well as diseases that can be prevented with vaccines (vaccine-preventable diseases).

Communities with high levels of malnutrition and poor child health are more vulnerable to disease and disease outbreaks.

Remember! Even diseases that are not currently common in your community can return at any time if children are unprotected.

Reflection

1. What are common reasons that children get sick?
2. What is the difference between vaccine-preventable diseases and other types of diseases?
3. Should you vaccinate your children even if the disease is not affecting your community?

Let us look at disease in more detail. It is helpful to understand the links between common symptoms, the disease and the vaccine that can help prevent it. The table below can provide you with a handy reference to the basics.

Remember! Vaccines prevent disease, they are not treatment for disease. So, use the information below to help parents understand the impact of disease on their child. The best decision is always to vaccinate before children in the community become sick.
### Common childhood diseases that can be prevented with vaccines

<table>
<thead>
<tr>
<th>Disease</th>
<th>Some key symptoms</th>
<th>In brief</th>
<th>Vaccine</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tuberculosis</strong></td>
<td>Cough</td>
<td>Tuberculosis (TB) is one of the top 10 causes of death worldwide. At least one million children become ill with TB each year.</td>
<td>BCG</td>
</tr>
<tr>
<td></td>
<td>Feelings of sickness or weakness</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Weight loss, fever and/or night sweats.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diphtheria</td>
<td>Sore throat, hoarseness and swollen neck glands</td>
<td>Diphtheria can lead to heart problems and death and is a significant child health problem in some countries.</td>
<td>Pentavalent (DTP + Hep B = Hib)</td>
</tr>
<tr>
<td></td>
<td>Difficulty/rapid breathing</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fever and chills</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Tetanus</strong></td>
<td>Stiffness of the neck, jaw, and other muscles often with a grinning expression</td>
<td>Tetanus is a very dangerous disease for newborn babies and pregnant mothers. Babies born with tetanus often die.</td>
<td>Pentavalent (DTP + Hep B = Hib)</td>
</tr>
<tr>
<td></td>
<td>Uncontrollable spasms of the jaw (“lockjaw”) and neck muscles</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pertussis/whooping cough</td>
<td>Fits of many, rapid coughs followed by a high-pitched “whoop” sound</td>
<td>Pertussis can cause coughing fits that make it difficult for children to eat, drink or breathe. It is most dangerous in infants.</td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>Usually no symptoms for children from birth to two years old</td>
<td>Hepatitis B is an infection that attacks the liver and puts people at risk of cancer and death. It is a major global health problem.</td>
<td></td>
</tr>
<tr>
<td>Haemophilus influenzae b (Hib)/Meningitis</td>
<td>Meningitis (the most common type of Hib disease): Fever</td>
<td>Meningitis mainly affects babies, young children and youth. It can cause severe brain damage and death.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Stiff neck</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Headaches, vomiting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Measles</td>
<td><strong>Early signs:</strong></td>
<td>Measles is a highly contagious disease that mostly affects children. It can lead to blindness and encephalitis and remains an important cause of death among young children around the world.</td>
<td>Measles vaccine or in some countries MMR for Measles, Mumps and Rubella</td>
</tr>
<tr>
<td></td>
<td>• High fever, runny nose and cough</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Red and watery eyes</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>• Small white spots inside the cheeks</td>
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<td></td>
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<tr>
<td></td>
<td><strong>After several days:</strong> A rash, usually on the face and upper neck.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rubella</td>
<td>Some children do not have any symptoms</td>
<td>Rubella infection in pregnant women can cause miscarriage or birth defects that affect children’s brain, heart, eyes and ears and can lead to lifelong disability</td>
<td>MMR</td>
</tr>
<tr>
<td></td>
<td><strong>Early signs:</strong> One to two days of mild fever and swollen, tender lymph nodes,</td>
<td></td>
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<td></td>
<td>usually in the back of the neck or behind the ears. A rash then begins on the</td>
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<tr>
<td></td>
<td>face and spreads downward.</td>
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</tbody>
</table>
### Mumps
- Some children do not have any symptoms
- Fever, loss of appetite, tiredness, muscle aches, headaches
- Swollen glands in front of the ears or under the jaw
- Mumps is a highly contagious disease that most often affects children between five and nine years old. Severe cases can lead to meningitis and deafness.

#### Polio
- **Early signs:**
  - Fever, fatigue, headache
  - Vomiting
  - Stiffness in the neck and limb pain
- Polio can cause total paralysis in a matter of hours
- Polio is a highly infectious disease that mainly affects young children. It can lead to permanent paralysis or death.

#### Rotavirus
- • Fever
- • Watery diarrhoea
- • Vomiting, stomach pain
- Ongoing diarrhoea can cause severe risk of dehydration.

#### Pneumococcal disease
- Pneumonia (lung infection) is the most common serious form.
- • Fever and chills, cough
- • Difficulty/rapid breathing
- • Chest pain
- Pneumonia is one of the largest infectious causes of death in children worldwide.

In some countries, children may also receive vaccines for Japanese encephalitis, typhoid, HPV, yellow fever and other diseases.

Vaccines can offer a simple, often free protection from disease. Children who are vaccinated will have a greater chance to live healthier and longer lives.

**Remember!** Your job is not to diagnose sick children. As a general rule, when children experience some combination of long-term fever, vomiting, extended periods of diarrhoea, pain (joint, stomach, chest) and cough, they should be taken to the nearest clinic or health worker for diagnosis and treatment.

### Reflection

1. Do vaccines treat or prevent disease?
2. Name three most common vaccine-preventable diseases in your community. What is the vaccine that will protect against them?
Protecting children from disease through vaccination

- Name and fame vaccine-preventable diseases counselling cards

Vaccination protects girls and boys against childhood diseases that can make them very ill or even kill them. They encourage people's immune systems to produce a defence against the real disease. Countries encourage what is called "routine vaccination" which simply means the minimum number of vaccines required for a child to be protected. These vaccines protect both children and adults against many vaccine-preventable diseases:

- Diphtheria
- Pertussis
- Tetanus
- Hepatitis B
- Haemophilus influenza B
- Polio
- Measles
- Mumps
- Rubella
- Meningitis
- Yellow fever

When vaccines are given at the right time, by qualified people, vaccination is safe and effective. Sometimes children can have some side-effects following a vaccination, such as a slight fever, redness or soreness where the injection was given. In some cases, parents see this as evidence that the vaccine is working. These side-effects usually go away quickly and are easily treated. Serious reactions to vaccinations are very rare.

It is safe and important to vaccinate ALL children. This includes:

- Healthy children
- Children with disabilities
- Newborns: this also means vaccinating pregnant women to protect their unborn babies
- Very young infants, older children and adolescents
- Sick children who have coughs, colds, diarrhoea, fever or malnutrition. The physician or health worker will make the final decision whether to vaccinate a sick child.

The risk of illness and death from NOT vaccinating is far more serious than any temporary side-effect from the vaccine itself. A child who is NOT vaccinated is more likely to get sick from disease, to become permanently disabled, undernourished or die prematurely.

Remember! Vaccination is not just for the benefit of the person being vaccinated. When target vaccination rates are reached, it is much more difficult for disease to spread among the population. This helps protect the most vulnerable in your community, including children who are too young to be vaccinated, people with...
immune system problems, and people who might be too ill for vaccination (cancer patients, for example). This is called “herd immunity”.

Reflection

1. Are vaccines safe? What kind of side-effects may some children feel after vaccines?
2. Name two common side-effects from vaccination.
3. How do vaccines help protect people who cannot be vaccinated? What is this called?

Wrap up

Vaccines offer a powerful, safe and affordable protection from disease. They help prevent disease. Even when diseases have not been present in your community, they can come back at any time and make unvaccinated children sick. Children may experience minor side-effects, such as fever or soreness, but more serious reactions are very, very rare. A fully vaccinated community helps protect people who cannot be vaccinated. This is called herd immunity.
Overview

In this topic you learn about the national vaccination schedule. This is a national plan that tells you which vaccines should be given to children at what age. Babies, older children, adolescents and even adults need vaccines so that they are protected from some diseases throughout their lives.

Learning objectives

On completion of this topic you will:

• Explain that vaccines should be delivered at certain times in children’s lives to work best
• Explain which vaccine-preventable diseases are in your national vaccination schedule
• Say that vaccination is important not only in childhood but throughout life

Tools

- Vaccination planner
- Lifelong vaccination infographic

Topic summary

The national vaccination schedule

Vaccines need to be delivered at the right age in a child’s life to protect them best. This is why each country has a national vaccination schedule. This is a plan
that outlines which vaccines (and how many doses) should be given to children and at what age.

It is important to vaccinate infants and children early in life when they are at their most vulnerable and before they are exposed to dangerous diseases.

Most parents already know that vaccinations can prevent disease, and they do not need further convincing. More importantly, they need to know:

- When and where to bring their child for the next immunization
- What common side-effects they might expect
- What they should do if these occur
- Any wrong information or concerns should also be addressed with correct information (more on that in Topic 4)

So, you do not have to be an expert in vaccine-preventable diseases. However, it is important that you are familiar with the diseases and vaccines in your country’s national vaccination schedule.

Learning the common symptoms of these diseases and their vaccines can also be helpful when visiting homes where you may see sick children. Remind yourself of the chart in Topic 2 and the exercise you did where you learnt about common childhood diseases, their symptoms and their related vaccines.

Remember! The most effective protection from these diseases is vaccination.

Reflection

1. What is the national vaccination schedule and why is it important?
2. Most parents already understand the importance of vaccination, but what information do they need to know and remember. Name at least two things.

Remember! Include your country’s specific vaccination schedule here! Global guidelines are helpful, but some countries may have differences. Make sure you understand the vaccine schedule in your country!

**Immunization: A lifelong process**

- Tool 3.1: Vaccination planner

This tool is a practical take-away for parents or caregivers with children under two-years-old. You can help parents or caregivers by making sure their responses correspond to the national vaccination schedule.

Making a plan is a good way to help people remember when to go to the clinic. A simple plan can be filled in by caregivers and helps them to form a concrete plan about when, where and how to prepare for and attend their next vaccination visit.

If you have a good relationship with the local clinic, consider offering these plans to clinic staff to share with caregivers when they come in. But remember, this is not an official clinic reminder card, and it is important that caregivers themselves fill the information out.
Vaccines are not only for young children. They can protect people from serious infectious diseases throughout their lives, from infancy and adolescence to early adulthood and old age. Most work will focus on increasing immunization of babies and young children, but you should be aware that older children and adults often need vaccinations too, particularly during emergencies and outbreaks of disease, when many new cases happen in a short time.

Key moments for vaccination include:

### The first year of life
Pregnant mothers should be vaccinated to protect their newborn babies from tetanus: up to a total of five doses during successive pregnancies. In most countries, babies under one year should:

- Be vaccinated for tuberculosis, polio and Hepatitis B immediately after birth
- Begin a series of three vaccinations for diphtheria, tetanus, pertussis, and polio at six weeks of age
- Have four vaccination visits, ending with measles vaccination at nine months

### The second year of life
New vaccines as well as follow-up doses are recommended for one-year-old children. Routine immunization at this age allows you to catch children up on missed vaccinations and to increase their protection from disease through what are known as “booster doses” of selected vaccines. This provides the body with a reminder of how to fight off those diseases.

For example, one-year-old children may get follow-up (booster) vaccine doses for measles and diphtheria, tetanus and pertussis to strengthen immunity.

### School-entry
Entry into pre-school and primary school provides an opportunity to make sure that children have received all the vaccinations they need – and if not, to catch up.

For example, they may need additional or new doses of vaccine to protect them from measles, tetanus, diphtheria, polio, chicken pox, the flu and other diseases.

### Pre-teen and adolescence
In addition to catching-up or getting additional doses of childhood vaccines, adolescents need vaccines to protect them from infections that cause meningitis, cancer caused by HPV (human papillomavirus), whooping cough, the flu and other diseases.

### Adulthood
As adults age, they are at increased risk of diseases such as the flu, hepatitis B, shingles and pneumococcal disease.

Immunization can help older adults to remain disease-free, active and healthy for longer so that they can continue to contribute to their family and community.

### After animal bites and injuries
Children and adults of all ages can be infected with rabies and tetanus and will need an immediate dose of vaccine to help prevent these diseases.

**Rabies:** Children and adults can get rabies if they are bitten by an animal with rabies. They need to immediately wash the wound and to get a series of the rabies vaccine to prevent onset of the disease which is almost always fatal.

**Tetanus:** Children and adults can get infected with tetanus when they get a scratch, cut or wound, particularly from objects found outdoors or in gardens where the bacteria can commonly be found in dust, soil and animal faeces. They need to immediately wash the wound and if they have NOT been fully vaccinated for tetanus within the past ten years, they will need to get the tetanus vaccine immediately.
Remember! In general, it is better to vaccinate late than to not vaccinate at all. In most cases, there is no upper-age limit for vaccines. Make sure that you check your country’s recommended vaccinations for older children and adults. You may need to remind adults to not only vaccinate their babies, but their older children and even themselves.

Reflection

1. Can you name some of the diseases that vaccines protect children (and adults) from?
2. According to your county’s national vaccination schedule, what vaccines should children receive in the first and second year of life?
3. What are the important lifetime moments for vaccination?
4. What vaccinations should a pregnant woman get? Why?
5. Why is it particularly important to vaccinate children early in life?

Wrap-up

The national vaccination schedule is your guide to complete vaccination. Make sure you know the diseases prevented by vaccines in your country and the number of vaccination visits that families need to make to fully protect their children and themselves.

Vaccination is needed throughout all phases of life. Older children and adults often need vaccinations, particularly during emergencies and outbreaks of disease, when many new cases happen in a short time.
Topic 4
Promoting complete vaccination

Overview

In this topic you learn that only children who receive all of the doses of the vaccines in their national vaccination schedule are fully protected against disease. You will also learn that resistance to vaccination, though challenging, is not normally the main reason for unvaccinated children. You will look at ways to reduce the number of children who do not complete a full vaccination schedule, often referred to as dropouts.

Learning objectives

On completion of this topic you will:

• Explain the importance of promoting full immunization according to your national vaccination schedule
• Identify key moments in family and community life that can help people to remember when they should next vaccinate their children
• Share any relevant national reminder systems (SMS, vaccination cards etc.) that can reduce drop-outs with caregivers

Tools

☐ Making a plan
The importance of complete vaccination

Some vaccines are given to babies right after they are born. Others come a few weeks, months or even years later and are given in several stages or doses. For example, in most countries children begin a series of three vaccinations for diphtheria, tetanus, pertussis and polio at six weeks of age.

Though no vaccine is 100 per cent effective, it is important that children receive all of the required doses of each vaccine. If they do not, they will not be fully protected against the disease. Complete vaccination = complete protection. That means that one of your main jobs is to help reduce the number of drop-outs: children who do not return for follow-up vaccines and who do not complete their vaccination schedule.

Reflection

1. Why is it important for children to complete the full vaccination schedule?
2. What are three categories of children that help us to think about vaccination coverage?
3. How can we help encourage families of even fully vaccinated children?

Making it easier to remember the vaccination schedule

Tool 4.1: Making a plan

Although most people are supportive of vaccines, they often forget when their child’s next vaccination is due, even when you have helped them make a plan, like Tool 3.1. This is understandable. The schedule is long and complex. It is no wonder this is one of the biggest reasons for drop-outs globally.

It is important to find different ways to help parents remember their child’s next vaccination appointment so that they get all of the follow-up vaccine doses they need. One way to do this is to make the vaccination schedule relevant to their regular lives. You can do this by linking the vaccination schedule to real life events or personal experiences, such as religious or traditional days, birthdays or other milestones.
For example:

- “Remember when your child has his/her naming ceremony it is time to visit the clinic!”
- “By your child’s first birthday, they should have XX vaccines! Visit the clinic to make sure!”

An example of a vaccine schedule linked to community and family traditions might look like this:

<table>
<thead>
<tr>
<th>Time period</th>
<th>Community rituals and traditions</th>
<th>Vaccination schedule</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pregnancy</td>
<td>Baby shower. Normally after the first trimester</td>
<td>TT - Tetanus&lt;br&gt;At least two doses for women reaching child bearing age (15—45 years), to ensure the newborn is protected at birth</td>
</tr>
<tr>
<td>Birth – two weeks</td>
<td>Ear piercing&lt;br&gt;Naming ceremony</td>
<td>BCG (at birth)</td>
</tr>
<tr>
<td>Up to six months</td>
<td>Baptism&lt;br&gt;First meal ceremony</td>
<td>DPT+HebB+Hib&lt;br&gt;First dose at two months&lt;br&gt;Second dose at three months&lt;br&gt;Third dose at four months&lt;br&gt;OPV&lt;br&gt;First dose at two months&lt;br&gt;Second dose at three months&lt;br&gt;IPV&lt;br&gt;Dose at four months</td>
</tr>
<tr>
<td>Up to 12 months</td>
<td>Visit to local temple&lt;br&gt;One year of life celebrations and rituals</td>
<td>Measles&lt;br&gt;First dose at nine months</td>
</tr>
<tr>
<td>Up to 24 months</td>
<td>First haircut&lt;br&gt;18-month clinic visit&lt;br&gt;First steps</td>
<td>DPT booster at 18 months&lt;br&gt;MMR&lt;br&gt;Second dose at 18 months</td>
</tr>
</tbody>
</table>

Other ways to remind caregivers about their child’s next vaccination appointment include:

**Vaccination cards:** Each time that a child gets a vaccination, health workers write it down in a vaccination card or booklet which the caregiver keeps. This is a very useful tool for tracking which vaccinations a child has completed and which vaccinations they still need. Make sure that you remind caregivers to keep their child’s vaccination card updated and in a safe place.

**National reminder systems:** You should encourage community members to register for national reminder systems (if they exist in your country). These remind people about their child’s next vaccination appointment, for example by sending them a SMS vaccination alert on their phone.

**Vaccination publicity campaigns:** You might be able to link your vaccination work with national vaccination marketing campaigns that are designed to
promote vaccination. They may have slogans or use celebrity spokespeople that can remind parents to vaccinate, and help you discuss vaccination in general.

**Ask parents about the next vaccination visit:** Simply asking parents when and how they will have their child vaccinated for the next dose can increase the chances they will do it. Try this out by asking parents detailed questions such as: How will they travel to their next vaccination appointment? Who will look after their other children? What will they take to the appointment? What day of the week will they vaccinate?

**Remember!** Reducing the number of dropouts can have a huge impact on coverage and immunity in your area. It does not mean that parents need to memorize the vaccine schedule. It is simply a case of making sure that people know when to next vaccinate their children.

**Reflection**

1. What is one of the biggest reasons for drop-outs?
2. Can you name three different ways to remind families about their child’s next vaccination appointment?
3. Can you think of any family/community ceremonies or events that take place during the first year of a baby’s life? Can you link these events to the national vaccination schedule?
4. Why is it important to reduce drop-outs?

**Wrap-up**

Drop-outs – children who do not complete the full vaccination schedule – not resistance – is normally the main reason that children remain unprotected from vaccine-preventable disease. The vaccination schedule is complicated so it is your job to help families remember when their next visit is and encourage them to follow through. When they do, think about ways to both provide positive feedback, and to share their stories with other parents.
Topic 5
Common barriers to vaccination

Overview

In this topic you will understand common reasons why people may say no to vaccination and how to listen and respond to their concerns.

Learning objectives

Upon completion of this topic you will:

- Explain why people do not get vaccinated and have a plan to address each reason
- Be able to respond to parents’ concerns about vaccination with a mix of empathy, compassion and information

Tools

- Common barriers
- Responding to resistance
- Vac facts game

Topic summary

Addressing common barriers

We know that most people will seek and accept immunization if they know when and where to bring their children, and that once there, find the services are available, accessible, reliable and friendly. This sounds simple but in many cases small annoyances, poor treatment or having the wrong information can be
Why do people say no to vaccines?

People may say no to vaccination for many reasons, including safety concerns, side-effects, poor service, cost, lack of information and their religious or cultural beliefs. These are called barriers. They may be in the physical world (such as long distance to the health clinic or being poorly treated by health workers) or internal (such as how they think, what they believe, what they think others think). And wrapped around all of this are people's family influence, cultures, traditions and values which can also have an impact on their decisions.

Here are some common categories to help us think about barriers to immunization:

<table>
<thead>
<tr>
<th>Common barriers to immunization</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cultural beliefs/social norms</strong></td>
</tr>
<tr>
<td>Concerns due to religious, traditional beliefs, traditional family or community roles</td>
</tr>
<tr>
<td><strong>Information and perception</strong></td>
</tr>
<tr>
<td>Concerns due to rumours, false beliefs, negative perceptions, lack of information or incorrect information</td>
</tr>
<tr>
<td><strong>Service delivery</strong></td>
</tr>
<tr>
<td>Concerns about the clinic and the health workers, vaccine quality, no vaccine, clinic too far, too complicated, cost, insecurity</td>
</tr>
<tr>
<td><strong>Safety</strong></td>
</tr>
<tr>
<td>Concerns about side-effects, ingredients, too many, too soon, child too young, too old, confidence in safety</td>
</tr>
<tr>
<td><strong>Effectiveness</strong></td>
</tr>
<tr>
<td>Concerns that vaccines do not work, traditional methods are better, vaccines cannot be trusted etc.</td>
</tr>
<tr>
<td><strong>Trust</strong></td>
</tr>
<tr>
<td>Concerns about government, medical services, health workers, etc.</td>
</tr>
</tbody>
</table>

Reflection

1. Are the concerns of parents due to their experience with vaccination or based on their beliefs? Or both?
2. Name the common barriers for vaccination?

Tool 5.2: Responding to resistance fact sheet

Let us look at some approaches to manage common reasons families may have for not vaccinating their children.

1. **Information and perception: “I did not know...”**

Parents and caregivers may not be aware of vaccine services available in your community. They may not know how or when to take their children to be vaccinated. They may not be aware of the risk of disease.
“I did not know” reasons can often be a simple case of not having information. This can be resolved with some of the tools provided here about how vaccines work, the vaccination schedule and the importance of protection. Materials like vaccine booklets and community health posters or communication materials that your country is using can also be useful tools to share information.

Probably the most important information you can help parents remember is:

- How and where children can be vaccinated
- When vaccinations are due for each child, and most importantly...
- When the next vaccination is
- Why vaccination is important

2. Safety: “I am concerned about side-effects”

Parents may be concerned about the impact that a vaccine may have on their children. It is understandable. Caregivers may be weighing the inconvenience of managing a fever versus the protection the vaccine offers. They may simply not want to cause pain or discomfort to their child.

It is critical that caregivers be told the common side-effects of vaccination, including fever, soreness on the part of the body where the vaccine is given, and swelling. If side-effects do occur, it will always help that they have been told to expect them.

Explain that not all children have side-effects and if they do occur that they are normal. Explain that the protection from disease is far more important for their children than avoiding temporary discomfort. In some circumstances, parents may see the side-effects as evidence that the vaccine is working.

Explain that serious side-effects are extremely rare, but if they occur they should seek medical attention.

If you can, check in with the clinic and clinic staff to confirm they are also regularly sharing this information and providing advice for treatment. They may have information material available – brochures, posters, factsheets, videos. If not, speak to your supervisor for guidance.

3. Effectiveness/cultural beliefs: “I do not think vaccines are safe or effective”

Misinformation, rumour, existing beliefs and practices or just a lack of awareness can contribute to worries about safety and how much protection vaccines provide.

Let the parents know that vaccines are safe and effective, often even when the child is ill and when more than one vaccine is given at the same time. In fact, vaccines are among the safest and most effective medical products available today. Every vaccine undergoes extensive testing before being licensed, and vaccine safety continues to be monitored as long as a vaccine is in use.

Hundreds of millions of people are vaccinated every year. Vaccines are thoroughly tested for years before being released to the public. Vaccine-preventable diseases have been dramatically reduced since the introduction of vaccines.

As with side-effects, if your child does have a serious reaction, see a health worker or visit the clinic as soon as possible.
If the parent continues to be worried, arrange for a visit from a local paediatrician or trusted community health worker. The important thing is that the medical practitioner treats the family with patience and respect. In some communities, women’s and other community groups are set up to offer peer-to-peer support and to respond to common questions.

4. Service delivery/trust: “I have concerns about the clinic/health worker/service”:

Sometimes, previous experiences with the health system can be negative. Some common reasons in this area are:

- The clinic is too far away
- The clinic hours are not convenient
- Waiting times are too long
- I am not treated with respect by the health worker
- I do not trust the health worker

See if transportation can be arranged for groups from far-flung communities. Arrange or propose child health days, where clinic staff can visit communities through mobile clinics for health consultations and immunization. This can be a great way to increase coverage, gain trust and build relationships with the staff of the local health clinic.

Arrange training for health workers, emphasizing interpersonal communication skills, empathy and service.

Remember. The experience caregivers have with health workers, whether through outreach or at the clinic is one of the most important interactions families have with the vaccination experience, and with the health system in general. Respect, efficiency and reliability should be the priority. It is much more difficult to encourage repeat vaccination, if the first or later experiences were negative.

5. Service delivery/perception: “It is too expensive/inconvenient”:

The cost of vaccinating a child is not always about the price of the service. In most contexts, vaccination is free. But parents may have to take time off work, or away from their responsibilities at home. They may have to find transport to the clinic. They may have to find someone to mind their other children. The clinic hours may be too early, or too late. They may have to wait for long periods.

Arrange for or propose child health days, where clinic staff can visit communities through mobile clinics for health consultations and immunization. If this is not possible, see if mothers can attend together to share the cost of transport, to support each other and to reduce inconvenience. Mothers’ groups, if not already established, can be valuable support for mothers to both reinforce the behaviour, but also to reduce inconvenience.

Transportation could also be arranged to help bring mothers to the clinic environment. Work with the clinic to reduce waiting times and to make the experience more pleasant.

*Remember: Cost is not always about money. It is about convenience, and about what is being sacrificed in order to be vaccinated. Imagine if you had to visit a
clinic in your own life. Think about the time, arrangements, cost and logistics involved.

Reflection

1. If there is an awareness or information concern, what is the most important information you should share?
2. Why do you think the service (clinic, outreach, health worker etc.) side of vaccination is so important? How can you support this effort as a volunteer?
3. Why do you think it is important to let parents know about potential side-effects?

What are other reasons that caregivers may not want to vaccinate their children?

Understanding resistance to vaccination

Each community is different and can have different reasons for, and against, vaccinating children. It is important to put yourselves in the shoes of your family, neighbours and community leaders to understand their concerns and fears about vaccination, as even small worries can grow and spread if not addressed. While resistance to vaccination may not be a big problem right now, situations can change quickly.

You can often overcome people’s resistance to vaccination if you take the time to listen to them and to understand their reasons. In many cases, the reasons that people give for not vaccinating their children may not reveal the full story at first. For example, parents may begin by saying that they do not believe in vaccination. If you question them a bit more, however, you may discover that their concern is related to a poor experience at the clinic, or a misperception about the cost, or a rumour that has left them uncertain. Whenever you can, spend time with people. This investment can help you to get to the core concerns that stop people from vaccinating and help you to work together to resolve them.

Managing resistance to vaccination

- Tool 5.2: Responding to resistance. Factsheet

In some cases, resistance may be based on more difficult issues: strong beliefs related to religious practice, lack of trust in government, faith in traditional medicine, or misinformation and rumour that have taken root.

If a parent or caregiver does not want their child to be vaccinated the first step is always to listen to their concerns with understanding and empathy. You can think of empathy as simply imagining yourselves in their shoes. Why might they
believe or feel that way? What are the conditions in their lives that might make this true for them?

After you have listened patiently and expressed your understanding, respectfully provide them with accurate information and advice. You can also try to dig deeper into their concerns by respectfully asking them questions. This can help you to understand any further reasons behind their reluctance to vaccinate. You may not convince them to vaccinate but it is an investment that may help the next time you come to visit.

Though every situation is different, here are some general guidelines for working with concerned parents and community members:

1. **Respond with compassion:** On its own, providing people with information and facts to persuade them to vaccinate their children is rarely enough. What matters is that you treat people with respect and listen to their concerns with patience and compassion. People naturally respond to being treated with respect. If you acknowledge and listen to their views and concerns about vaccination and do not immediately rush to correct them, you are more likely to open the channels of communication and begin to get your message across. It can be the first step to building trust.

When dealing with resistant parents remember:
- Parents and caregivers have the right to have questions and concerns
- No matter how incorrect, peoples’ reasons for resisting vaccination are valid and rooted in their motivation to do what is best for their children
- One of the first and most important steps you can take is to acknowledge and express respect and concern for people’s views and their desire to take care of their family

Before providing resistant parents with all of the facts about vaccination, you can use some of the phrases below. Sometimes just asking for or already knowing the names of people’s children can also help to build trust and familiarity. Use your judgement and knowledge of your community and try some of these out:
- I understand why you have concerns...
- I had similar worries at first...
- Your children are the most important thing...
- I hear you...
- I believe you...
- You are right about... but...

Personalizing immunization by sharing a personal story (for example, about a time when a child close to you was ill) can also be a powerful tool for reaching resistant parents. People are more likely to remember stories and their emotional impact lasts much longer than pure facts and information.
2. **Follow-up with information:** Once you understand people’s concerns try to respond to them by providing accurate information. You can also use this as an opportunity to provide them with other information that might make vaccination seem like a good choice. Use tools and aids to help you to explain vaccination and if you cannot answer peoples’ questions, offer to find someone who can.

**Example:** Parents want to vaccinate but do not know when the clinic is open. This is a relatively simple concern to address. Besides sharing the clinic opening hours with the parents, you could also inform them that vaccines are free and that their neighbours are vaccinating. Reassure them that vaccines are safe and healthy.

**Example:** Parents heard a WhatsApp rumour that vaccines are unsafe for their children. This can be a more difficult challenge. Let them know that vaccines are safe and effective, and that the vast majority of people in your community do vaccinate. You may find that this resistance has its root in something other than safety – mistrust of the health system or government, for example, or concerns from a spiritual point of view. It may also be a concern about going against influential community members or friends. If possible, introduce them to other families who have made the choice to vaccinate. Direct them to a similar group on WhatsApp or online that you know has accurate information. If this is a major and growing concern, consider setting one up!

**Remember!** If you do not know the answer to a parent’s question, you should say so and offer to find someone who does. This could be a Red Cross Red Crescent team member, a community leader, religious leader or a local health official. Make sure it is someone who can respond to the parent’s particular concern. If their concern is medical, a religious leader may not be the best choice. Similarly, if the concern is related to their belief system, a Red Cross Red Crescent supervisor may not be the best choice. But, if you do offer to find someone, this is a critical moment for building trust and must be given priority. Find someone, follow-up and find out how it went.

Just as good experiences are to be promoted and encouraged, poor experiences also require attention. People are naturally more likely to share negative experiences than positive ones. Remember to quickly acknowledge, record and follow-up on any negative perceptions, rumours and experiences.
Reflection

1. Can you name some common reasons why people say no to vaccination?
2. What two things should you do when responding to a caregiver who does not want to vaccinate their child?
3. Why is it important to treat families with compassion and respect?
4. What should you do if you cannot answer someone’s question about vaccination?

Wrap-up

There can be many reasons for resistance to vaccination. In many cases, these can be easily overcome. You can learn how to respond to resistance. Building trust and bringing together community leaders and Red Cross Red Crescent team members can help. Remember, no-one should be made to feel bad about their worries or concerns around vaccination. All parents want their child to be healthy and happy. It is your job to understand and respond as best you can.
The fundamental principles of the international Red Cross and Red Crescent movement

**Humanity**  The international Red Cross and Red Crescent movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace amongst all peoples.

**Impartiality** It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality** In order to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence** The movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

**Voluntary service** It is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity** There can be only one Red Cross or Red Crescent Society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality** The international Red Cross and Red Crescent movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.
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