

## Social Mobilization as a Strategy to Increase Vaccine Acceptance and Uptake

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COMMENTARY



# Mobilize to vaccinate: lessons learned from social mobilization for immunization in low and middle-income countries

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## ABSTRACT

Creating and sustaining demand for immunization services is a global priority to ensure that vaccine-eligible populations are fully protected from vaccine-preventable diseases. Social mobilization remains a key health promotion strategy used by low- and middle-income countries (LMICs) to promote vaccination demand. In this commentary, we synthesize illustrative evidence on successful social mobilization efforts promoting the uptake of immunization services in select LMICs. The first example focuses on Sierra Leone's routine immunization program during the Universal Child Immunization initiative in the late 1980s. We then give an example of India's establishment of a social mobilization network in the early- to mid-2000s to support polio elimination in high-risk communities. Thirdly, we highlight the complexities of social mobilization in a humanitarian emergency during the 2017–2018 diphtheria outbreak among displaced Rohingya in Bangladesh. Lastly, we draw upon examples from the introduction of the human papillomavirus vaccine in several countries.

## ARTICLE HISTORY

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## KEYWORDS

Social mobilization; immunization; low- and middle-income countries; demand; community engagement; communication; behavior change; hesitancy

# Outline

- What is social mobilization?
- Examples of successful implementation
- Challenges and limitations
- Summary of key lessons learned

What is social  
mobilization?



## UNICEF

“A process that engages and motivates a wide range of partners and allies at national and local levels to raise awareness of and demand for a particular development objective through dialogue.”

UNICEF. Social Mobilization, 2015. Available from:  
<http://https://www.unicef.org/policyanalysis/42347.html>

## Rogers et al.

“ The effort to marshal many people to perform behaviors that impose a net cost on each individual who complies and provides negligible collective benefit unless performed by a large number of individuals.”

Rogers T, Goldstein NJ, Fox CR. Social Mobilization.  
*Annual review of psychology* 2018; 69:357-81.

# Social Mobilization *for Immunization*

“ The **collective effort** by diverse **stakeholders** to ensure **optimal vaccination uptake** in a target population by generating and sustaining **demand** for vaccines, using **community-based participatory approaches**. ”



**Sierra Leone's  
Universal Child  
Immunization  
experience,  
1985-1990**



# Context

- In 1985 vaccination coverage was 6% nationally in Sierra Leone\*
- Interventions mostly focused on vaccination service delivery (supply) including improvements in the cold chain
- A KAP survey by UNICEF revealed inadequate knowledge about vaccines and high intentions to refuse vaccination
- Perception that vaccines were incompatible with religious and traditional belief systems

\*For six vaccines to prevent tuberculosis, polio, diphtheria, pertussis, tetanus, and measles in infants (WHO, 1985)



# Strategies and outcome

- Religious leader engagement was a central pillar of the strategy
  - Formation of Christian and Islamic Action Groups
  - Use of faith-based messages to promote immunization
- Partnerships with the media, schools, traditional institutions
- Coverage increased from 6% to 75% between 1985 and 1990\*
- Beyond immunization, religious action groups from UCI era leveraged for scaling-up social mobilization during the 2014-2015 Ebola epidemic

\*For six vaccines to prevent tuberculosis, polio, diphtheria, pertussis, tetanus, and measles in infants (WHO, 1990)

## ORIGINAL ARTICLE

# Successful polio eradication in Uttar Pradesh, India: the pivotal contribution of the Social Mobilization Network, an NGO/UNICEF collaboration

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Innovative approaches to eradicate polio in hard-to-reach areas included: (1) cadres of trusted community mobilizers who track children's immunization status, (2) responsiveness to people's concerns about immunization, (3) outreach to religious and other local leaders, (4) focus on both individual- and community-level behavioral approaches, and (5) continuous data collection and use.

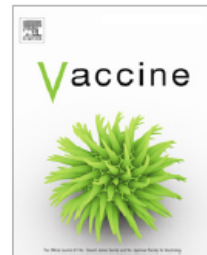


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Contents lists available at [ScienceDirect](#)

# Vaccine

journal homepage: [www.elsevier.com/locate/vaccine](http://www.elsevier.com/locate/vaccine)



## Rapid behavioral assessment of barriers and opportunities to improve vaccination coverage among displaced Rohingyas in Bangladesh, January 2018



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**What are the  
challenges in using  
social mobilization  
for immunization?**



# Recurring challenges

- Human resource constraints
  - Inadequate funding or no specific budget
  - Poor planning & one-offism
  - “Community fatigue” and sustainability threats
  - Weak monitoring and evaluation
- 



What are the key lessons learned?





# 1. Avoid the *Spare Tire Problem*

- Social mobilization *should not* be the spare tire
  - i.e. do not treat it as an after-thought...or when you have a problem
  - It should at least be one of the four main tires, if not the *steering wheel*
- Entire immunization program should be *one big social mobilization effort*



## 2. Social mobilization is not *message dissemination*

- Message dissemination may be part of social mobilization, but it *is NOT* social mobilization
- Do not ***talk at*** the community
  - ***Engage them*** in the design, implementation, monitoring, and evaluation of the mobilization strategies



### 3. Get the *right people*

- From beginning to end:
  - Design
  - Implementation
  - Evaluation
- The ***messenger*** is equally as important as the message, and ***how*** the message is delivered can be even more important



## 4. Use behavioral science insights

- Make the behavior observable
- Normalize the behavior
- Align the behavior with how people *would like* to see themselves
- Leverage existing community structures and networks



Learn the Signs.  
Act Early.

U.S. Department of Health  
and Human Services  
Centers for Disease  
Control and Prevention

[cdc.gov/Milestones](https://www.cdc.gov/Milestones)



## 5. Use standards, improve quality, & demonstrate impact

- UNICEF recently published a set of minimum standards for community engagement
- These standards can inform both the design and evaluation of social mobilization interventions
- Integrate quality improvement as a core component of social mobilization

UNICEF. Minimum quality standards and indicators for community engagement. Available from: <https://www.unicef.org>



**Minimum Quality Standards  
and Indicators for Community  
Engagement**

# Thank you!

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For more information, contact CDC  
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