

EpiC supports Tanzania to meet ambitious COVID-19 vaccination targets across five regions

SUCCESS STORY | JULY 2023



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"I met with village leaders and told them to organize village meetings. I arrived with my service provider, and we gave education and it helped and immediately we started vaccinating people. Everyone who left and went home inspired others like their wives, neighbors, etc. We were getting a lot of people. Village meetings are the areas where we were very successful.." - Community

Health Worker

Background

Political opposition led to delays in the approval and rollout of the COVID-19 vaccine in Tanzania. In mid-2021, with a change in administration, the country reversed its stance and set the ambitious target of achieving 70% vaccine coverage among the eligible population by December 2022. However, the early high-profile resistance by influential government leaders, combined with widely circulating COVID-19 myths and misinformation, created significant challenges for the country's COVID-19 vaccination efforts.^{1,2}

When vaccines arrived in July 2021, the Tanzanian government prioritized health care workers, people with comorbidities, adults above age 50, port-of-entry workers, military and security forces, and school teachers.2 By September 2021, however, demand began to drop, and eligibility was extended to everyone aged 18 and older.1 Even so, by January 2022, only 2.8% of the total population had been vaccinated.³ The Ministry of Health (MOH) asked the Centers for Disease Control and Prevention and partners to work together to increase vaccine uptake. The Meeting Targets and Maintaining Epidemic Control (EpiC) project, funded by the U.S. Agency for International Development (USAID) and led by FHI 360, was one of those programs.

EpiC began supporting the MOH in April 2022 to accelerate uptake to reach the national target of vaccinating 70% of the eligible population by December 2022. Implementing partners (IPs) were assigned regions with relatively low rates of vaccination; EpiC was assigned Iringa, Lindi, Mtwara, Njombe, and Ruvuma regions. EpiC set targets for each region to achieve 70% coverage by December (Table 1).

Table 1. Vaccination targets per region

REGION	COVID-19 VACCINATION RATE, APRIL 2022 (%(N))	TARGET TO REACH 70% VACCINATION RATE BY DEC 2022 (N)
Iringa	10% (39,332)	393,324
Lindi	15% (77,862)	519,078
Mtwara	13% (64,823)	498,640
Ruvuma	30% (201,167)	670,556
Njombe	8% (28,209)	352,607

Interventions

EpiC accelerated uptake of the COVID-19 vaccine through a combination of approaches. Individuals could access vaccinations at facilities, during community outreach, and at special events. The project worked with the MOH through its Health Promotion Section and the President's Office and Regional Administration and Local Government (PORALG) to design and implement vaccination events. EpiC engaged community mobilizers, community health workers







"From this process. I learned that saving people is serving a nation. The information we all received from the team that gathered us to tell us more about the safety and efficacy of the vaccine, made it easy for me to refer clients who came to me to the medical centers, where they could get more advice on the vaccine. I got vaccinated. This helped those who look up to me to go for vaccination along with my fellow traditional medicine practitioners."

> - Traditional medicine practitioner



"We used to tell them that if you vaccinate there is no harm, and if you have any problem call us and we will come and provide you with services wherever you are. If we see that you need more information, we are here to educate you further. So this act of saying you will follow him wherever he is if he has any problems helped a lot to increase people's confidence in these vaccination services."

(CHWs), health care workers (HCWs), local government authority (LGA) leaders such as village executive officers, and religious leaders to build awareness and drive engagement with eligible populations to increase the uptake of COVID-19 vaccine. The project also leveraged the existing HIV service delivery system, including using peer educators and peer navigators to engage key and vulnerable populations on the importance of COVID-19 vaccination during social and behavior change (SBC) education sessions.

EpiC assisted the MOH to develop messages, aligned with the national vaccine demand creation strategy, that addressed myths and misconceptions about COVID-19 vaccine safety and efficacy. The messages were disseminated through radio stations, theater performances, and social media, distributed as fliers and billboards, and shared by peer educators during small community meetings or at facilities. EpiC also implemented extensive community engagement and mobilization, which helped establish a positive environment for vaccination uptake and garnered cooperation from religious leaders.

For example, EpiC collaborated with the regional health management team in Iringa to engage traditional healers to reach those eligible for vaccination and raise awareness about the safety and importance of the vaccine. Eleven traditional healers participated in orientation sessions to learn about the messages and ask questions.

These healers helped increase uptake of the vaccine because they are respected in the community and their opinions are trusted. Their advocacy, coupled with community events and outreach, contributed to reaching the 70% vaccination rate target among the eligible population.

CHWs and peer educators provided a chance for community members to ask questions and address their doubts.

EpiC also coordinated with local leaders to identify places where vaccines could be given on a temporary basis such as local markets, village offices, schools, and local clubs. In addition, EpiC supported the orientation and deployment of 3,041 CHWs and 557 community volunteers to engage community members and reinforce demand creation activities.

EpiC also collaborated with government leaders at national, regional, district, and community levels to plan, coordinate, and implement large-scale events such as football matches and music concerts during which attendees were urged to get a COVID-19 vaccination and vaccinations were offered on site. Financial and technical support were also provided for forecasting and distribution of vaccines in coordination with regional immunization and vaccine officers.

In some locations, stakeholders focused on a specific problem or gap to be addressed. For example, when the project began working in Njombe in April, only 8% of the eligible population had been vaccinated. Despite implementing intensive activities such as offering door-to-door vaccination and at churches and mosques, the rate increased by only 7% in the next three months. Seeing this challenge, EpiC, in collaboration with the regional and district authority, engaged high-level political leaders to take part during outreach.

"This engagement was aimed at making everyone take part in awareness creation as ambassadors," said Dr. Juma Mafanga, Njombe Regional Medical Officer, "and encourage citizens to get vaccinated for their own and the wider community's safety."

Hon. Kissa Kasongwa Njombe, District Commissioner, visited communities for two months. To complement her efforts, EpiC invited her to travel with performers conducting edutainment activities that were paired with provision of the vaccine. She used this opportunity to engage community members. "I mobilized the community for vaccine uptake and used my father, whom I influenced to get vaccinated, as the example," she said. "I showed the masses the picture of my father receiving the jab. Hearing my testimonial with no side effects eased the tension among community members and increased their vaccine uptake."

By the end of August, the vaccination rate in Njombe reached 62%, and by November, 70% of the eligible population had been vaccinated.

- Community health worker



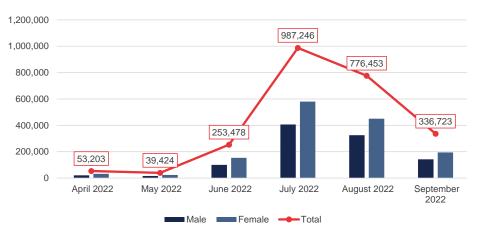
A community member receives a shot in the arm during a vaccination event at the Reproductive and Child Health clinic at Njombe region.

Photo Credit: Agness John

Results and impact

EpiC's assistance resulted in increasing vaccination rate, exceeding the targets set in the five supported regions (Figure 1). By October 2022—two months earlier than the deadline—all five regions had achieved 70% vaccination coverage.

Figure 1. Number of people vaccinated across five EpiC-supported regions

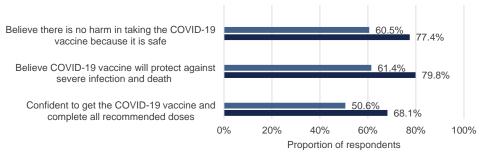


Prior to EpiC's involvement, vaccinations were mainly offered through door-to-door service delivery. EpiC, in coordination with local organizations and the government, held 1,335 events that drew large crowds where awareness was raised about the safety and importance of the vaccine, and 645,827 individuals received their shot.

Providing information about COVID-19 through radio, edutainment, public service announcements, fliers, and one-on-one outreach helped change people's perceptions about the vaccine, which increased uptake (Figure 2).

Figure 2. Changes in perception about COVID-19 vaccines between April 2022 and December 2022⁴

Reflections and lessons learned



Apr-22 Dec-22



Njombe District Commissioner, Hon. Kissa Gwakisa, engages community members to create demand for COVID-19 vaccination during edutainment activities.

Photo credit: Agness John

Some of the lessons learned in assisting the rollout of COVID-19 vaccines in Tanzania include:

- Support from government leadership—including political leaders getting vaccinated publicly is crucial to implementation success.
- Involving all key stakeholders, particularly religious leaders and traditional healers, played a significant role in building trust and increasing vaccine uptake among community members.
- Using music and sporting events, especially with the presence of local and highly admired influencers, to reach large numbers of people in a short period of time was important for addressing vaccine concerns and presenting vaccination as a positive social norm.
- Out-of-studio live broadcast programs recorded by local radio stations were powerful for creating demand because they reached many people at once and offered a platform for people to ask questions and have concerns addressed.

¹ Davis TP, Yimam AK, Kalam A, Tolossa AD, Kanwagi R, Bauler S, et al. Behavioural determinants of COVID-19vaccine acceptance in rural areas of six lower- and middle-income countries. Vaccines. 2022;10(2):214.

² Aborode AT, Fajemisin EA, Ekwebelem OC, Tsagkaris C, Taiwo EA, Uwishema O, et al. Vaccine hesitancy in Africa: causes and strategies to the rescue. Ther. Adv. Vaccines Immunother. 2021;9:25151355211047514.

³ World Health Organization. News [Internet]. From below 10 to 51 percent - Tanzania increases COVID-19 vaccination coverage. 2023 April 20 [cited 2023 Jul 20]. Available from https://www.afro.who.int/countries/united-republic-of-tanzania/news/below-10-51-percent-tanzania-increases-covid-19-vaccination-coverage.

⁴ EpiC engaged a private company (Ortus) to conduct an omnibus survey to assess the impact of the project. Data was collected from a representative sample of 2,500 respondents across Iringa, Njombe, Ruvuma, Mtwara, and Lindi regions over two periods (April 2022, and December 2022). A structured questionnaire was administered to the respondents to collect data on exposure/recall of behavior messaging, attitude, and intention towards vaccination behaviors among target audiences.

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