Speaker 1 (00:02):

Welcome to Community Conversations on Vaccines, presented by Immunization Advocates. This season, our guests will help us explore the link between vaccine equity and acceptance and how to build and sustain community trust and immunization.

Vince Blaser (<u>00:16</u>):

Welcome to Community Conversations on Vaccines. I'm Vince Blaser

Francesca Montalto (<u>00:20</u>):

And I'm Francesca Montalto. Vince and I are so excited to be here for our third season of the podcast. Since our last season, thankfully, the global supply of COVID-19 vaccine has significantly increased, but now the biggest constraint in equity are challenges of delivery and demand, both for COVID vaccines and routine immunizations.

Vince Blaser (<u>00:41</u>):

Yeah, Francesca. And this season, we're going to be bringing onto the podcast health workers, journalists and this season also, researchers across Africa, Asia and Latin America, to dig into the particular challenges and opportunities that they're facing. As before in our previous seasons, we want to learn more about what their experiences can teach us as global health leaders to increase uptake of COVID vaccines, to drive down the devastating impacts this disease has brought on the world but also restore the worryingly sliding rates of key routine immunizations.

Francesca Montalto (01:22):

And a lot of our discussion will look beyond just vaccine delivery and demand to consider how complex social and environmental situations, be it war and conflict, displacement, climate change or pandemic impact vaccine acceptance and demand.

Vince Blaser (01:37):

Yeah. And, and really that brings us to our guests today, Francesca, we're really excited to be joined by Mohamed Modber, a nurse and vaccine advocate in Khartoum, Sudan, and Dr. Jaya Shreedhar, a journalism mentor and trainer in India. Mohamed and Jaya welcome to the show.

Dr. Jaya Shreedhar (01:56):

Thanks, Vince. So happy to be here.

Mohamed Modber (01:59):

Thank you. I'm so happy to be with you.

Vince Blaser (<u>02:02</u>):

Jaya, in your work as a journalist, a media trainer and advisor as well as a health worker across India and for the World Health Organization, we know you've seen some of these challenges firsthand in many different settings. Can you talk a little bit about these past couple of years, the challenges that journalists you've been working with across South Asia faced covering vaccines during the pandemic? Especially those journalists who may be covering the topic in somewhat challenging settings.

Dr. Jaya Shreedhar (02:34):

Yeah, sure Vince. It's, it's been quite a patchwork of challenges actually. Journalists have faced a variety of challenge when it comes to reporting on COVID-19 vaccination. The first hurdle that we've seen is to do with navigating the rather complicated science of vaccines and the exact nature of the protection they afford us, and the next challenge is to interpret that complexity in a nuanced yet simple, relatable way for the audiences, so that the people who are, who are listening or reading that media content can make informed health choices about immunization. Regarding the science, right from the time COVID-19 vaccines were developed and rolled out, we've had all sorts of data flying at us, such as those on vaccine efficacy from the various phases of vaccine trials, then the duration of immunity, then the timing and number of booster shots needed amid the emergence of new variants. Most importantly, I always think the risk-versus-safety comparisons about adverse events following vaccination. The second, and the concurrent challenge that that journalists face is to recognize and cut through all the conspiracy theories and outside disinformation about vaccines, which have come to characterize this infodemic that's accompanying the pandemic.

Vince Blaser (04:04):

I know that you've been working with some journalists in Afghanistan with some of the conflict there and Myanmar, maybe put us in their shoes a little bit of how it is to be in that setting, but then also still try to provide stories about the pandemic or about vaccination campaigns coming on.

Dr. Jaya Shreedhar (04:30):

It's been doubly challenging for journalists in both Afghanistan and Myanmar, which are the other two countries that are each going through humanitarian crisis in their own different ways. One of the major things that we've run up against is this gulf between the journalists who report in the English language and those that report in the local languages. You'll find that much of the material that discusses the science of vaccines issues related to vaccine equity and access, what's happening on the global scene, vis-a-vis, which countries are helping each other, where the supplies are coming from, or what is a country's vaccination policy or what the rollout steps are in either Afghanistan, Myanmar, or any other country, it's all much more easily accessible and available to those journalists reporting in the English language, because that's the language that all of this is information is available in.

Dr. Jaya Shreedhar (05:30):

We really need to equip local language reporters with information about vaccine science, access and equity issues in the language that they report in. And this is something that we at have been trying very hard to do, trying to translate our existing training materials into as many local languages as possible. On the humanitarian context side its become a really difficult job to access information about vaccines. In some of these countries, in both Afghanistan and Myanmar, journalists who criticize the vaccination rollout and try to address myths and misconceptions about vaccines are doing so under a sort of a cloud of fear — fear that if they criticize what's happening openly, they might get caught or persecuted and that's already happened. The second thing is to really put vaccines in the context where people are hungry feel unsafe and unsure, distrustful of the health system and what the government can do for you in terms of the health services it provides.

Dr. Jaya Shreedhar (06:45):

In this kind of an atmosphere of distrust and mistrust and you know, lack of access to even the basic amenities, it's become very difficult for journalists is in these situations to convey vaccine information to their audiences, and they still continue to do a remarkable job. So we've been trying to support them as much as we can. I'd like to add on here that, together with the vaccine journalism training that InterNews is giving them one of the important things that we found that's helping them a great deal is also to provide some amount of mental health support, because under that much stress,,the quality of commentary that you churn out on practically anything is greatly affected by your mental state.

Francesca Montalto (07:36):

Yeah. Wow. You bring up so many important concepts, I mean, first the idea of making science accessible and democratizing scienceand then the complexities of reporting and delivering the science information in these humanitarian situations. Now, Mohamed, you've been in the middle of one of these challenging social settings — briefly tell us what you've been experiencing, what challenges you have experienced with vaccine access and acceptance, and why you decided to become a vaccine advocate.

Mohamed Modber (08:17):

When COVID-19 vaccination rolled out I felt in myself in a position that I would be able to make a greater change by enhancing vaccine acceptance and increasing vaccine uptake in my local country. Utilizing nurses in the process of vaccine delivery, meanwhile, the ignorance of healthcare workers in that process has revealed several consequences that impact the process of vaccine delivery. So from my background and one of those that do believe the primary role of nurses as our key vital roles in the prevention and achieving first level of prevention is primary healthcare services. I do believe that BHC should be delivered by nurses as, from that the beginning and the beginning of the introducing of the idea at nursing perspective. So I have been able to encourage, to act as a vaccine advocate and vaccine acceptance. I do believe that nurses as the closest to the community and they will be able to make a huge impact regarding vaccine acceptance. If they are being promoted well and used wisely, they will make a huge difference from that simple angle of view. I was encouraged to be a vaccine advocate toward my local community

Vince Blaser (09:36):

Mohamed could you walk us through what the last four or five months have been like for you? There's been a military coup there in Sudan at the same time as COVID-19 vaccines are rolling out and Jaya talked about some of the mental health strain on journalists and we know that that has also been the case with health workers. Can you just say a little bit about what has happened the last few months and how it's impacted some of your plans and some of your colleagues plans in trying to do some of that communication and advocacy on vaccines.

Mohamed Modber (10:19):

As a Sudanese community, we are facing a recent military coup that impacted overall activities in the country. We as a healthcare providers have been impacted in term of mental wellbeing for healthcare providers. Also social Sudanese community has been disrupted, the social life has been impacted. We are seeing arrest of Sudanese authorities for healthcare workers. We have seen Sudanese armies has broken hospitals and involve every single part at hospital. We are seeing Sudanese militaries invading hospitals, and putting tear Gass among healthcare workers. That has caused a huge mental health problem among healthcare workers. Unfortunately, we have lost our college nurse with settle before

Vince Blaser (<u>12:02</u>):

Alright, we switched over with our audio with Mohamed's internet is having a little difficulties. SoMohamed, you, were talking about some of these challenges that you're facing. I'm wondering, with these challenges very day to day and what you're facing with the government, and what you're facing in your community, why have you decided to spend the amount of time that you have advocating for vaccines in your community and what are some of the successful ways that you and your colleagues have been able to talk to community members about vaccination within the challenging setting that you're currently in?

Mohamed Modber (12:59):

So one of the most important things that we have to consider why I'm thinking about vaccine acceptance and our roles in our local communities, as we started as nursing as a part of our work, we are belonging to the local community. So it's one of our responsibilities to protect them from diseases and protect the community. The impact of protection will gonna protect the country and able protect nation overall. One of the key responsibilities is to keep transparent to the information regarding COVID vaccination. As I said before, we are the closest ones to the community, so our effort in promoting vaccine acceptance will highly appreciated and be accepted by the local community as we are the first line that the patients has been contacted through the primary healthcare services. Meanwhile, I know the ignorance of involving of nurses in this process from that point of view, I started my campaigning targeting enhancing vaccine acceptance among Sudanese nurses through ensuring that using nurses as appropriate to promote the vaccine acceptance and vaccine in our local community. Through organizing series of activities and events aiming to correct rumors information amongst nurses themselves, then organizing social media campaigning, targeting local communities by correction of their misconception regarding COVID-19 vaccination and commitment of all nurses to at least convince five members of the community to get their COVID-19 vaccination.

Mohamed Modber (14:45):

There is a huge number of nursing schools in my country, more than 70 nursing schools and around 7,000 graduate every year. If every, every one single nurse has used his voice tries awareness, I'm pretty sure that we'll vaccinate the 35,000 thousand people of Sudan if they convince their neighborhood and the local community about the importance of COVID 19 vaccine, I'm pretty sure that we will read a high level of vaccine acceptance in our country.

Vince Blaser (<u>15:18</u>):

Jaya, you mentioned the need for translations in local languages and some of the scientific terms. Can you just talk a little bit about what you've seen in the media scene in south Asia and in terms of independent journalists being adequately supportedand getting what they need from ministries of health. What are some of the gaps that you see there?

Dr. Jaya Shreedhar (15:48):

Journalists, as you, as you correctly pointed outare frontline responders. They've been trying to track COVID-19, infections covering the funerals and deaths, and tracking the vaccination rollout as it's been happening across the different states in India. And it's also been happening in Sri Lanka and Indonesia, Butan, Nepal, and so forth. When we often see television coverage of journalists out there in the crush of the crowd, getting their masks torn off, and they weren't prioritized for vaccination in the early stages. So they were putting themselves at risk to bring the stories that the public badly needed to hear about how to protect themselves and where to get the vaccine, but journalists themselves weren't protected while they did that job. So I can

give you the exampleof how some innovative, dedicated and far-thinking bureaucrats in India changed that. In Kerala, we had a former health secretary who became the COVID-19 advisor to the Kerala government.

Dr. Jaya Shreedhar (16:56):

And he classified journalists as in the high priority category. So he made sure, particularly in the run up to the Carla elections when he knew journalists had to be out there in the field, in the crowds covering the elections, that they absolutely needed to be vaccinated. So he made sure that journalists were prioritized for vaccination along with, you know, the older people, the older age group, healthcare workers government officials in some of the Asian countries haven't been accessible or forthcoming with the vaccination coverage data, or how the cold chain has been managed the other arrangements that hasn't been much data on how many vaccinators are out there in the field, or what is going on inside this whole vaccination, it's been pretty much a black box. It's been very hard for journalists without regular government briefings or access even to health specialists.

Dr. Jaya Shreedhar (17:56):

You need medical doctors and scientists to sit down with journalists and explain how vaccines work in order to build public trust in vaccines. And oftentimes we find that doctor in the medical or governmental medical systems in many of the Asian countries are nervous about speaking with the media, nervous of being misquoted. We haven't faced that much of that sort of problem in India, where the media has created a lot of space for medical experts to come on television shows, radio, and get interviewed on online media, and we've seen experts giving information about vaccines to the public, and that's helped create a lot of confidence in vaccines. When you see vaccinologist and researchers on TV explaining it to you in ways, simple language with the help of journalists.

Francesca Montalto (18:46):

Public trust is so critical to ensuring vaccine acceptance and demand. Mohamed based on what Jaya is saying, what do you believe is needed in terms of communications from governments, or, you know, UN and World Health Organization officials, to ensure that not only are vaccines accessible, but that people will want to get the vaccines?

Mohamed Modber (19:17):

I do believe that in order to vaccine has been accessible to everyone, we need to develop strong communication strategies through the governmental official to the general population, by delivering the message to the lowest population that illiterate that hasn't gone to the core as a majority of lower middle income countries, cause that they need to understand the core messages of the I importance of having vaccinations through using simple language. And I do believe that social media and the governmental video, they're playing a very important role while transforming the correct information to the local community. I would suggest the importance of having population surveys, aiming to understand social behavioral changes in local communities in order to design our community messages to increase vaccine acceptance should be built on correction of misinformation regarding COVID-19 vaccination.

Dr. Jaya Shreedhar (20:26):

Mohamed, actually, this is Jaya here, I had a question I noticed then when you talked about the importance of explaining away rumors and addressing misinformation, you mentioned government officials as having a strong role to play, absolutely in agreement with you on that.

But where do you see the role of journalists in this whole context and what has been your own experience working with journalists in order to help support your work and promote vaccine uptake among the communities that you work with?

Mohamed Modber (21:00):

One of the important things that I do believe in is the journalists, they will communicate the message to the local community as they are the first responder. From my point of view, journalist are the first responders to the news and emergencies like healthcare professionals. So they play very important while transforming the correct messages to the local community.

Dr. Jaya Shreedhar (21:21):

I expect that when community health workers go out there and explain to communities, go from door to door, talking about vaccines and helping to build vaccine confidence you come across the issues related to distrust on vaccines or trust in vaccines and misconceptions and so on. And then when you identify those issues and start addressing them, do you take that information back to the journalists so that they can be an amplification of clarifying those doubts?

Mohamed Modber (21:54):

I do believe the very important thing is that journalists and healthcare workers are complimentary parts. Clearly, they are front line of defending the pandemic journalists defending the rumors, the health core workers defending the lives. It's very important that in our country, there is a communication channel established between governmental officials through conducting a workshop to the journalists by conveying them and teach them how to communicate right messages to the local community. This communication channel has been dramatically shown while the number of the vaccinated people has been since they're using social media, through communicating the importance of healthcare messages regarding COVID-19 by the correct manner. Jaya, India, one of the countries with multicultural diversity, with a large population, or the second largest population of the world have a multicultural diversity, multinationality. How did Indian authorities overcome the issue of multicultural diversity?

Dr. Jaya Shreedhar (23:15):

We have had to overcome a variety of challenges in our journey towards vaccinating the population. As you know, we have a huge population, but at least 98% of our population has received at least one dose. We also have a reliable vaccine supply situation. The Indian states and union territories have about 178 million doses available with them as they continue with the task of vaccinating everyone with the second dose as well. I think that to start with there was, and is a very strong and positive public understanding of the health benefits of childhood immunization. So India has one of the largest childhood immunization programs in the world, and that sort of popular trust in vaccines came in handy as COVID 19 vaccines were rolled out. So let's say that we were well prepared in a way with children's health.

Dr. Jaya Shreedhar (24:17):

I think there's always an advantage that the people are normally willing to go to great lengths to ensure that the child's health is protected. So I think we basically have to thank our national immunization program for laying the groundwork for enormous and deep trust in vaccines, that vaccines can make a difference, can save lives, can improve the quality of life. I think also we've had a lot of operational coordination and cohesion between the central and the state

governments as vaccination was rolled out. So there were actually rehearsals that were done. We have a huge human resource component that trained vaccinators and health workers, and they all swung into action and got very quickly trained. So it was like a huge well oiled machine, which was being redeployed for a COVID 19 vaccine rollout.

Vince Blaser (25:14):

Well, this has just been a fascinating conversation, and I think we could continue it much longer. As we are wrapping up, I was hoping that both of you, in 30 seconds or less, could just impart any final message you may have for public health professionals or policy makers around the world who are trying to grapple with these issues as we carry forward in 2022.

Mohamed Modber (25:42):

As COVID-19 continues to involve our global health systems or our public health issues, COVID-19 will remain a lesson for any fightwork and effort to tackle pandemic. If all leaders, the governmental officals, human agencies come together and address the issue of vaccine inequality in all continents, in all countries, regardless of what they happen, because we do believe that once we leave anyone behind, COVID-19 will never be beaten. My key messages to the agencies and to policy makers and to the governmental officials, is we have to show our solidarity to healthcare workers, frontline healthcare workers. We have to protect them. We have to pay attention to them. We have to make laws that will protect them in such emergencies. And we have to provide support to all of them. We have to provide mental health services. We have to provide mental support to our healthcare services.

Mohamed Modber (26:56):

Also, we have to add as a unified universe that together we will survive. Again, is COVID-19 will remainone of the most important lessons to the humanity, the important collaboration between higher and middle income countries, between higher and low middle income countries, in term of offering supplies, in term of providing COVID-19 vaccinations, in terms of sharing mutual experience, mutual affinities between each, each country. So let hope to spread the word and save the humanity. Let's add to save our nations, set our local communities. Let's spread the word across the world, and that's all I have to say to leaders of the world.

Vince Blaser (27:44): Jaya?

Dr. Jaya Shreedhar (27:47):

Thanks Vince. I think the COVID 19 pandemic has, again, brought up the issue of the need to address social injustice when it comes to health delivery. And we've seen that being played out with the way vaccination has happened all over the world with so many countries is getting left far behind in the race to vaccinate people everywhere because everyone needs to be protected in order to prevent the emergence of new variants and to somehow overcome the current health challenge that we are all facing together as a global community. I it's been brought home to us how closely interconnected we all are, and the kind of joint responsibility that we have to take in order to overcome the pandemic. I think more work on vaccine equity, which begins with trust building and greater transparency and generosity. I really think transparency and accountability are key to promoting vaccine equity. And,ul very much hope that the media will get ample support to be brought on board in this whole process and through building greater transparency around vaccine equity and having excellent coverage in the media, the public trust in vaccines will grow, and in science.

Francesca Montalto (29:07):

Yeah. Thank you so much for being here like Vince said, honestly, this conversation could go on for a really long time and you both have discussed such important issues in terms of the need for supporting journalists and health workers and how important it is for information to be accessed in, in local communities and contexts. Inequity and local settings can impact the health of the entire world. Thank you both for being here and for expressing these needs to our audience. Yeah, thank you so much.

Speaker 1 (29:42):

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