BRIEF

Country implementation of malaria vaccines





Vaccinator Kembo Bolula, from the Kandu 1 health center in Kisanto health zone in the Democratic Republic of the Congo, prepares to administer a dose of malaria vaccine. Credit: PATH/Gloddy Tabende.

The World Health Organization (WHO) recommends the programmatic use of two vaccines—RTS,S/AS01 and R21/Matrix-M—for the prevention of *Plasmodium falciparum* malaria in children living in endemic areas. Rollout of these lifesaving vaccines is well underway, with more than 20 countries in Africa now implementing malaria vaccines.

As malaria vaccines are rolled out in national immunization programs in Africa, there are several tools available to assist with country implementation. For example, WHO's Essential Training Packages for Malaria Vaccine Introduction covers key topics for health workers in PowerPoint documents that can be downloaded and customized to meet specific country needs. In addition, TechNet-21 houses a curated summary of technical resources on the current global recommendations, evidence, and programmatic considerations for malaria vaccine introduction into national immunization programs. This brief provides a summary of some important elements that PATH has identified for country-level stakeholders to consider as they implement malaria vaccines.

Malaria vaccine key messages

Effective communication about malaria vaccines is tailored to specific audiences, with messages tested and adapted for local languages and context. For instance, information presented at a scientific or professional conference will differ from messages conveyed to members of parliament or to community leaders in individual interactions. Messages must be clear, simple, and accurate, with an appropriate level of detail for each audience.

It's important for health workers interacting with caregivers to communicate in a respectful manner and to convey correct messages about malaria vaccines using a "Triple A Communication Approach" (Advise – Alert – Arrange).

- Advise on the malaria vaccine and schedule.
- Advise on other vaccinations and health services that are due.
- · Alert on side effects.
- Alert on malaria prevention.
- **Arrange** for the next visit to ensure completion of the four-dose schedule (or five-dose schedule, where applicable).

Providing information through multiple channels can reinforce messages about malaria vaccines, striking a balance between mainstream national-level media announcements and targeted communications to reach key audiences in vaccinating areas.

It is helpful to develop evidence-based materials and messages collaboratively by engaging child health experts with experience in immunization, malaria, communication, and other areas and ensuring that the new messages are integrated into existing communication efforts on malaria prevention and childhood vaccination. Increasing health worker knowledge and community awareness through timely, complete, and appropriate communication is the key to successfully and sustainably introducing malaria vaccines. It is generally good practice to update key stakeholders—particularly those that speak for the vaccination program—with current information as the introduction progresses or expands.



Photo: Nanikutonda, 36, holds her 6-month-old infant Venegiaku, who received a dose of malaria vaccine at the Athénée health center in Mbanza Ngungu health zone, Democratic Republic of the Congo. Credit: PATH/Gloddy Tabende.

Demand generation

Demand generation is important for building confidence and positive social norms about malaria vaccination. This includes implementing a range of ongoing stakeholder- and community-centered

activities, such as community engagement, service quality improvements, behavior-informed interventions, and communication.

To increase demand for the malaria vaccine in the first months of implementation, launch events can be helpful, particularly in the context of a phased or subnational introduction. Demand generation plans should be informed by local data and include sections on target audiences, key messages, budget, timelines, and responsible entity. Ideally, plans should include output and outcome measures to assess progress and guide adjustments at key stages.

Planning and coordination for malaria vaccine implementation is ideally led by an advocacy, communication, and social mobilization (ACSM) subcommittee, housed within the Ministry of Health, and brings together a range of stakeholders and partners working on malaria, immunization, and health promotion. Ideally, the ACSM subcommittee coordinates the development, implementation, and monitoring of an evidence-based demand generation plan that includes stakeholder engagement and risk management. The plan may include:

- · Gathering and use of behavioral and social data.
- Behavioral interventions, including health worker support.
- Communication and community engagement, with messaging tailored for specific audiences.
- Risk communication.
- Monitoring and evaluation, including output and outcome measures.
- Social processes.

Risk communication

Risk communication is a critical aspect of managing perceptions before, during, and after malaria vaccine introduction. Effective risk communication, delivered by trusted sources, is key to maintaining or increasing public trust and confidence in malaria vaccines.

Potential risks that may occur during malaria vaccine implementation include rumors, misinformation, misconceptions, and adverse events following immunization that raise community concerns. Developing and implementing a risk communication plan, including the use of social and community listening tools to identify, track, and address issues promptly, can improve the mitigation response to potential risks that may arise.

Best practices include equipping health workers and opinion leaders with the means and tools (e.g., effective messages, skills, and competencies) to address questions and gaps in information, reassure caregivers and other community members throughout vaccine implementation, and build trust in the vaccine. Effective communication can lessen public anxiety regarding malaria vaccines and promote overall confidence in the value of immunization.

Related resources

- Recommendations to mitigate barriers to uptake and delivery of a four-dose malaria vaccine schedule: insights from the MVIP's qualitative evidence
- World Health Organization: Malaria Vaccine Introduction Dashboard
- World Health Organization: Essential Training Packages for Malaria Vaccine Introduction
- <u>TechNet-21</u>: A curated package of technical resources for malaria vaccine introduction technical resources