

Speaker 1 ([00:03](#)):

Welcome to Sabin's community Conversations on Vaccines, presented by Immunization Advocates. This season we've been spotlighting the challenges the COVID-19 pandemic is posing for health workers and immunization professionals and journalists covering their work. Our final stop is the sprawling city of Lagos, Nigeria, where efforts are underway to roll out COVID-19 vaccinations while also continuing to offer routine immunizations to a population of over 15 million. In this episode, we speak with Dr. Adefunke Adesina, a medical practitioner and epidemiologist and monitoring and evaluation focal person for the Lagos State Ministry of Health, and Elizabeth Kohlway, Senior Manager of Community Building and Digital Engagement at the Sabin Vaccine Institute. Vince and Francesca talk about the opportunity to integrate immunization with other health services to touch more people and the need for global communities of immunization professionals, such as Sabin's Boost Community to address immunization and vaccine challenges.

Vince Blaser ([01:02](#)):

Hello, and welcome to Community Conversations on Vaccines. I'm Vince Blaser.

Francesca Montalto ([01:07](#)):

And I'm Francesca Montalto. This is our final episode of season two, and for this episode, we are headed to West Africa, to the country of Nigeria to hear a little bit more about what it's like there planning and implementing routine and COVID-19 vaccine programs in one of the biggest cities in the world, Lagos.

Vince Blaser ([01:26](#)):

Yeah, we're really excited today, Francesca to be joined by Dr. Adefunke Adesina, a medical practitioner and epidemiologist and monitoring and evaluation focal person for the Lagos State Ministry of Health there in Nigeria as well as Sabin's own Elizabeth Kohlway, Senior Manager of Community Building and Digital Engagement who's led managing for us, the global platform for immunization professionals called Boost of which Adefunke is a regular contributor Adefunke and Liz, welcome to the show.

Dr. Adefunke Adesina ([02:03](#)):

Thank you.

Elizabeth Kohlway ([02:03](#)):

Thanks, Vince.

Francesca Montalto ([02:06](#)):

Yeah. Thank you so much for joining us. And our listeners know, we like to start our episodes by asking our guests to tell us a little bit about themselves, their career, and why they chose a path in public health and immunization. So Adefunke, would you like to start and tell us a little bit about yourself?

Dr. Adefunke Adesina ([02:23](#)):

I work at Lagos State Ministry of Health. I'm the state's monitoring and evaluation focal person. I'm also a resident at the Nigeria Field Epidemiology and Laboratory Training Network. This is a program organized across the world of which Nigeria, also one of those country that has the program. It is a program organized by the federal governments in collaboration with AFENET - African field epidemiology network's a partner with the government to train the healthcare workers across sector,

especially in the area of health. And just because we have what we call these days One Health. That is, we should all speak together, not only medical, but we also need laboratory people. We also need vaccinary doctors. That's an area people to also speak together, especially in this era of infectious diseases. So by, by will that we were being trained as a foot soldier, epidemiologists, to be as the soldier at the forefronts in case of endemic, pandemic, whether of course communicable diseases and non-communicable diseases. So by will of that training, I'm an epidemiologist. And I have passion for immunization.

Francesca Montalto ([04:30](#)):

Great. Thanks. Yeah. Thank you so much. And Liz, Adefunke is one of the top engagers of Sabin's global Boost community for immunization professionals. Can you tell us a little bit about your role at Sabin and what Boost is?

Elizabeth Kohlway ([04:46](#)):

Great and thanks again Vince and Francesca for having us on today. I'm so sure I can share a little bit more about the Boost community. So I actually came on board just before the community launched in January 2020 to help secure an online platform for the community which at the time was planning on existing both online and in-person. But due to COVID, we quickly moved all of our activities online. So a little bit more, I guess, about the community itself. So over the past decade, the immunization landscape has become increasingly complex. We've seen an increase in vaccine hesitancy violence against health workers, and ongoing health system delivery barriers. And we found that all of these challenges have a great impact on immunization professionals. And as a result, there's been burnout and fatigue leading to staff turnover and increasing isolation from colleagues, especially between those working at the subnational or local levels and those working at the national level within countries.

Elizabeth Kohlway ([05:48](#)):

So our team at Sabin identified these needs and raised them to donors in order to obtain resources needed to both develop and support a community of immunization professionals around the world. And we, during this process, consulted a number of immunization professionals through global surveys and focus groups in East Africa to really better understand the challenges that they were facing and the solutions that they hope to see. So then enters the Boost community. As I mentioned, first existing as an online platform, BoostCommunity.org to better support immunization professionals by equipping them with essential connections to peers and key stakeholders and resources required to strengthen capacity, advance careers, and lead in challenging situations.

Vince Blaser ([06:36](#)):

Adefunke, you're working on an immunization program in one of the biggest cities in the world. I'm curious how some of what Liz was talking about is playing out in your profession and what exactly is happening with COVID-19 vaccine rollout and routine immunization campaigns there in Lagos. What particular challenges are you all facing?

Dr. Adefunke Adesina ([06:58](#)):

Because everybody, you know, COVID came with a lot of all sorts of things. It came with all sort of informations, misleading myth and [rumor]. So as we're doing this, our governments also try as much as possible at the Ministry of Health to strengthen the risk communication group because we know that this is one of the most challenge that we have them because people just say all sort of these about

COVID that will make some people not to come out, even they notice signs of this COVID. So we kept on doing the advocacy to all necessary people. We inter-collaborated with other sectors, not only in health, that's one of those things I discover, and I want to give a kudos to our governments, and the Ministry of Health in particular, in my states, try to inter-collaborate with other sectors, include non healthcare sectors. For example, education because of this people in schools, both at primary level secondary and high-level and the rest. So I having done all this, we still discover that the role that myths were still misleading this misconception from about COVID, were still putting people behind making them to not to come out, to command the, you know, themselves,

Vince Blaser ([08:43](#)):

Maybe talk a little bit about COVID-19 vaccines in particular. What is currently happening in terms of how, in LAGos, how, what is the level of access as supply and what are, what is some of the response of the community been? And some of the challenges you are dealing with in terms of vaccine acceptance?

Dr. Adefunke Adesina ([09:07](#)):

Just like we all know, the vaccine came into the country at the mid, the mid parts of this year, around June. As we all know, that before then we have a lot of information, communication to the people in the community, creating awareness, paid advocacy to all necessary stakeholders in the community, religious leaders, traditional leaders, political people. And we did this by, you know, setting up a committee with the community people, by engaging full engagement of the community people. Before COVID, we have what we call community health champions. We have the One Health Committee Chairman. So we had meetings together, trainings together on this, on how we can vaccinate our community, on how everybody will be access and they will be vaccinated. So the country, when it came, having done all those advocacy, prime our people ready for the vaccine.

Dr. Adefunke Adesina ([10:31](#)):

When the vaccine came, we have what we call force phase. One of those things that we did as part of the equitability is to make sure that our health worker receive this vaccine. That is, and what happen concerning the acceptancy... And aside that, we discovered that when the vaccine came in, those first set of people that receive this vaccine are the first people, the first senior people in the country, in the states. And these are presidents. And for Lagos state, the very first person to receive it ... Publicly is our Mr. Governor. And after this, the deputy governor, then the action of these Ministry of Health received a vaccine descended very first day, when it came in and started the implementation. So, and they encourage all the health workers, all the healthcare workers to receive as well.

Dr. Adefunke Adesina ([11:47](#)):

Don't forget that the priority list then for the force phase. And part of it is the public people, the healthcare worker, who also will be giving these vaccines to other people. We want to build their confidence, they want to reassure us that we should keep safe. We should also be saved, so that we can deliver the service very well. So part of the healthcare worker were those people who first receive this vaccine. And don't forget, I told you that the Mr. Governor, most of the political leaders, the state Ministry of Health like commissioner ... The permanent secretaries, head of departments and directories would also receive this vaccine publicly the very first day. So the healthcare worker will start taking soon. And this also-

Vince Blaser ([12:41](#)):

How - What level of acceptance have you seen of the COVID-19 vaccination among health workers and of those who may be hesitant to get the COVID vaccine, what are some of the strategies that you've maybe personally had interactions with that have worked to convince you know, fellow health workers to receive the vaccine?

Dr. Adefunke Adesina ([13:06](#)):

Thank you so much. Yeah. You know, as I was saying, we, the ... State Ministry of Health encourage all the health workers to receive as well. And they prioritize calls as part of the first set of people to receive. So don't forget that we still have some people that are still scared because of the misconception, all the conspiracy that came with COVID-19, that is most likely going to use to reduce the population. And, you know .. [some people say] Those who receive the full dose of it most likely going to die in the next three years, in the next two years ...But by trying to, you know, improve our level of communication, then try to talk to people to some of us and seeing that some of us that we even received any, we're really fine, and we are doing well. This also serve as a, you know, to reassure them to also take part. So, so for those who that we didn't take at the first time. Then aside that, part of those things that we do for the acceptance of this vaccine among the healthcare worker is they make it easier for them to also receive as well. And the training, some of them actually, were trained on this vaccine, both at the national level and at the state level.

Francesca Montalto ([14:48](#)):

And you mentioned, you know, the need and the use of global collaboration. Liz, how common are some of these challenges that Adefunke mentioned, and how are, you know, boosts members collaborating and discussing to address them on a global scale and in their communities?

Elizabeth Kohlway ([15:08](#)):

Thanks, Francesca. So these are really common challenges that we're hearing from our community really across several countries and continents. And actually a series that we launched earlier this year in April, how the COVID-19 Listening and Learning series, we've actually brought together our members to not only hear kind of perspectives on the ground, what's happening in COVID-19 vaccine rollout. But then also bringing in folks that are currently rolling out the vaccine and learning lessons along the way, so folks can really share those lessons and learn from one another. And like Adefunke said, there is a great amount of vaccine hesitancy from health workers from other folks in the community. And there are several strategies, like she mentioned that our members are trying to deploy. So I think one in particular that has been really helpful has been this power of storytelling. We actually brought in experts in the community, expert storytellers to really share strategies of how to create compelling stories and kind of help to convince people that it is, you know, important to get vaccines, not only for themselves, but really the health of their community.

Dr. Adefunke Adesina ([16:28](#)):

That's another thing I wanted to mention that also you know, use storytelling to encourage our people. We mentioned a lot of personal story, story of oneself, public narratives. We use stories on TB. We try to train some of that health champions in the community to also use storytelling to encourage some other people, at least those would have received. My personally, I use storytelling a lot because it's one of those things. I want to appreciate the Boost community. I was part of those people that, you know enrolled, listed, and trained in adaptive leadership and part of the key model, our trainees is a story,

telling story to change situation. So I really made use to a lot at the beginning of this vaccination and that's, I'm still making use of it, and it has really been working well. Thank you.

Vince Blaser ([17:44](#)):

Yeah. Thank you for mentioning that. And I think we are, we've seen the power of storytelling to compel to, you know, bring about change in your community. We've also seen we've also seen it really help drive change in policy change on a national and global scale. And you know so obviously that power of adaptive leadership and storytelling is extremely important for, you know, a vaccine uptake and good vaccine programs there in Lagos. But obviously world leaders are daily making policy decisions that are really affecting you and your program there, Adefunke. This week, as the United Nations General Assembly, that we're recording, as the United Nations General Assembly. There was a Global Summit that the White House hosted with world leaders about what they're going to be doing about COVID. And I'm curious, you know, being a disease detective yourself, kind of seeing firsthand what has happened during this pandemic, what has happened previously I'm curious, you know, what your message is for world leaders what you think they might be missing, or what, what do you think that they need to focus on to you know, to best deliver for your community there in Lagos?

Dr. Adefunke Adesina ([19:23](#)):

There's nothing that should prevent us from what we call adequate preparedness, adequate preparedness against any form of risk, any form of hazard. When I say preparedness, against any form of risk or potential hazard or risk. We know that we'll continue to have increase in population. And this in an era of emerging or reemerging diseases ... They should make sure that they train people, epidemiologists that will strengthen it. Then we should not forget that the immunization, the research to go on on those things that if it comes, can we get vaccine that will prevent people? So the area of research should have to strengthen it.

Vince Blaser ([20:54](#)):

Liz, Adefunke mentioned the need to really collaborate across sectors and several different professions for immunization programs to be effective. I know a previous iteration of the Boost network was focused entirely on immunization managers, but you all deliberately decided to widen that tent when the program was relaunched as Boost. Can you talk a little bit more about why you decided to do that and what you've seen, outcome wise as a result?

Elizabeth Kohlway ([21:28](#)):

So as you mentioned, we found that immunization manager was not necessarily a term that was used across the board depending on kind of where you were. You could also hear, you know, folks like nurses, or like you said, doctors, epidemiologists, or others that are involved in the process of delivering vaccines to their communities. So we wanted to make sure that, you know, people felt included in this term, so we came up with immunization professional and we found that, I think in doing this, we brought in not only, you know, different perspectives, but I think these important perspectives are especially in the time of, you know, COVID-19 pandemic, we kind of need all hands on deck and having a diversity of folks in our community is really important to making sure that we're, you know, delivering vaccines and also equitably across various populations.

Francesca Montalto ([22:27](#)):

Yeah. And you bring up, you know, such an important issue of equitable access. You know, I'll turn back to you, Adefunke. What issues do you feel need to be addressed both in Nigeria and you know, around the world, as you talk with Boost community members to ensure equitable access to, you know, not only the COVID-19 vaccine, but also routine immunization?

Dr. Adefunke Adesina ([22:51](#)):

We're still have to encourage inter-collaboration among both health and non-health workers because there's no way ... It seems, I see with the way things are going, we're most likely going to reach all those target groups, mostly in the non healthcare worker groups. That is if we inter-collaborate well with non healthcare professional, if you look outside, that is, we're not just contain ourselves among the healthcare worker. We also inter-collaborate with non-healthcare worker in terms of design our programs, in terms of planning, implementation, post-implementation, especially the feedback. We most likely going to reach those target groups among, mostly among the non healthcare worker. Don't forget, these are the people that they also belong to a certain community. They have wives, they have spouses, they have children, they have friends. They have so many people in other area, aspect of life that they can easily talk to and gain the attention towards what we are saying. So if the global community, the national, sub-national level can inter-collaborate with people in agriculture, with people in education, with people in finance, who will also be supporting us, will also be a spokesperson for us in case there are budgets to building for all this activity. For the fact they are being engaged right from time and to also help us to other way and to make an appropriate implementation and to improve the health outcome to achieve better health services in our community.

Vince Blaser ([24:49](#)):

Okay. Could you tell us a little bit about what's happening with routine immunizations there in Nigeria? We've seen a backsliding of some of the routine immunizations globally since the pandemic started.

Francesca Montalto ([25:03](#)):

Yeah. And some of our guests have actually already been talking about it. We've definitely you know, seen access issues or people not wanting to go to their healthcare providers because they fear contracting COVID. So yeah, any insight or thoughts you have?

Dr. Adefunke Adesina ([25:20](#)):

Exactly. You know, at the initial stage, we had the issues of people being panic, fear to access of their routine immunization at the healthcare facilities, but now at least with, after, you know rigorous interaction with the community people, the training of healthcare worker, the people now start, you know, regaining their confidence back to approach the health facility and receive their immunization ... So we use all these things to motivate them, to encourage them to motivate their interests towards coming. But there's this, I noticed that there should be well integration of the COVID-19 with the routine immunization. In most places, the same healthcare worker, the same resources are used for COVID-19, but there has not been proper integration with the health services. And this are really costing the lots of, you know delay to the healthcare, to other services.

Francesca Montalto ([26:49](#)):

Liz on that topic, what possibility does the Boost platform provide to help professionals collaborate to better problem solve solutions, such as issues like integrated service delivery?

Elizabeth Kohlway ([27:03](#)):

So, yeah, I just wanted to go back to kind of why we created the community. So it's really, you know, not only a community for immunization professionals, but also by immunization professionals. So I think, you know, especially during this time of the pandemic, we're seeing a lot of kind of global guidance being kind of pushed down from the top and trying to disseminate it as quickly as possible. And, obviously through the Boost community platform, we definitely try to do that. But then I think, you know, what's equally important is what is going on on the ground. And, you know, as Adefunke shared you know, there's a lot of experience that needs to be kind of shared to the community or by the community. And I think the Boost community platform really offers this avenue or channel for members to talk amongst themselves and really to have this kind of a environment of peer-to-peer learning, which I think is really important, especially you know, during times of uncertainty where, you know, people are trying to quickly kind of find solutions to problems that are kind of you know, are unexpected. And I think, you know, having this community where folks can rely on one another can learn from one another is really important. And I think also important is, you know, these experiences can be shared by those that are kind of writing these guidelines. So they know how kind of it works in reality and how it is really practical.

Vince Blaser ([28:31](#)):

That is I think an excellent way to send us out.

Francesca Montalto ([28:38](#)):

Yes. Adefunke and Liz, thanks for joining us and Adefunke, can you give us a parting message to close our conversation?

Dr. Adefunke Adesina ([28:45](#)):

I would like to tell, I'd like to drop this for everyone, especially the non-healthcare worker and the healthcare worker that we should try as much as possible to have a cordial, interpersonal relationship between us. Because having a cordial interpersonal relationship between one another will go long way. You can't, we can differentiate on our acceptance of something would be with someone that you are cordial with. So we should try and look outside. I've beendid team spirits of working together, relate well with ourself, encourage us. So especially in the healthcare worker, they should make sure that they use all the opportunity out in their disposal to advocate, to preach about this vaccine so that we can get rid of the infection, the disease in our community, in our society, in our country and the global world.

Speaker 1 ([30:04](#)):

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