Francesca Montalto: Welcome to Sabin Vaccine Institute’s Community Conversations on Vaccines presented by Immunization Advocates.

Vince Blaser: In this podcast, we speak with professionals closest to vaccine delivery and decision-making in low and middle-income countries to hear the latest in immunization challenges, and explore programs and tools to build and maintain community trust and vaccine equity.

Francesca: We’re your host, I’m Francesca Montalto.

Vince: I’m Vince Blaser.

Francesca: Welcome to our final episode of season 4 at the end of 2022, we are heading into the new year. As we’ve talked to some guests about in previous episodes, we are looking at some major successes in lives saved and lives improved by immunization this year, but there have also been concerns such as declines in childhood immunization rates in every region. There continues to be inequitable access around the world to COVID-19 vaccines.

Vince: Francesca, the amazing work of the professionals that you and I are privileged to work with in our program and talk to you on this podcast is really a major reason why the studies have found vaccines just for 10 diseases that were administered in the first two decades of this century across 112 low and middle-income countries, prevented 50 million deaths. I mean, it’s an astounding number, and just in the first year of COVID-19 vaccine distribution, it saved an estimated 19.8 million lives worldwide. Vaccinations provides us a tremendous return on investment for the economies of countries as well.

As you alluded to, 25 million children last year didn’t get scheduled routine immunizations, the longest sustained decline in 30 years according to the World Health Organization and UNICEF. Thankfully, we have two great nurses and advocates with us today who’ve been at the forefront of speaking to their communities about vaccination and other crucial health issues.

Francesca: Today we are thrilled to welcome Paul Katigbak, a Woman Deliver young leader, Global Network of Young People Living with HIV Deputy Chair, World Health Organization Primary Health Care Young Leader and Community Health Nurse in the Philippines. We also welcome Rita Akiki, a nurse in Lebanon and creator of The Cross Training Program, which aims to empower nurses and respond to emerging health needs. Rita and Paul, welcome to the show.

Rita Akiki: Thank you.
**Vince:** Well, Rita, you have been a nurse for more than 20 years in Lebanon and currently supervising fellow nurses. Can you tell us a little bit about some of the major challenges of nurses' welfare and situation, especially during the last couple of years during the COVID-19 pandemic?

**Rita:** Thank you for having me today with you. I am so proud to say that I have the most amazing title in the world, it's a nurse. Yes, being a nurse over 20 years was something, and nowadays with COVID-19, and also multiple crises that are hitting Lebanon, it's something. On a daily basis, we have a new challenge. Every day as nurses we have to deal with devastating challenges, let me say. Nurses are having cuts of salaries, nurses are having lack of medication. You go to work and you don't know if you can give the medication for your patient because there is no medication.

You will have oncology patient, he cannot have his medication, he is suffering, he cannot also have morphine, can you imagine a patient without his painkiller? This is a situation nowadays that the Lebanese nurses are facing and also the qualified and young nurses that are entering the profession, let me say they are exuding the country, they are searching for better opportunities, they are searching for safety. This is the current situation nowadays, but also we cannot be only in the dark situation because since the COVID has been in Lebanon and all over the world, the image of the nurses in Lebanon has changed.

The people have more trust in the nurses. They are looking at the nurses as a professional image. They are better at seeing the nurses, there is younger students that are more willing to enter the profession and also the role of nurses is getting more importance in the community. Nurses are becoming agents of changes, and this is amazing. Especially as the level of the vaccine, we are in a huge problem with vaccination. There is a lack of trust in the Ministry of Public Health, but when the nurses speak nowadays, the people listen. It's amazing. I can share lots of examples during our talk to tell you about really how our image is becoming.

**Francesca:** Wow, and nurses have such power in their communities, and the power to advocate for so many different important issues. Paul, you work with Women Deliver, you work with the Global Network of Young People Living with HIV, you're part of the WHO Primary Health Care Young Leaders Network. Tell us what drove you to advocate for these issues, and how and why immunization and vaccine equity are important in these networks and for the populations you work with, especially with high-risk groups.

**Daren (Paul) Katigbak:** Thank you, Francesca, and just like Rita, I'm also a nurse. Let me give you a little bit of my personal story, why I am working in this particular population, including this higher risk groups. Since I was a nursing student way back in college, it has always been my dream to help those who are in need. I remember I was so young and vulnerable. Education and advocacy has been a vital part of my career. I believe that prioritizing education and conducting research will help me in
my advocacy towards gender equality, and equal access to sexual and reproductive health and rights, including HIV and AIDS.

I’ve been to many institutions, from public to private hospitals, from hospital-based health programs to community-based health programs. I realized the context of gender equality, and HIV, including sexual and reproductive health and rights in the Philippines is far from what is ideal. There is a shortage of friendly health services among young people, including women and girls, members of the LGBTQIA+ community are constantly experiencing stigma and discrimination. These are caused by social, political, and religious barrier here in the Philippines, and those have been my motivating factors why I have been advocating for such issues.

In terms of why immunization and vaccine equity is important in advocating for these networks. Vaccines are especially important for people with chronic health conditions like young people living with HIV, which makes them harder to fight off diseases like pneumonia. HIV can also make it more likely that you’ll have serious complications from those diseases, that’s what I call complications. I think vaccines are very effective, and they don’t just protect individuals from diseases, they also protect communities. When most people in a community get vaccinated and become immune to a disease, there’s a little chance of a disease outbreak, and eventually, the disease becomes rare, and sometimes it’s wiped out altogether.

In terms with young people living with HIV, and also those immunocompromised individuals, vaccines are a life-saving product. In terms of gender, and also gender equity within immunization, it’s actually very complex, and for me designing a research to study gaps can be more difficult. I just wanted to highlight some of the challenges relating to gender and equity in terms of immunization, for example, here in the Philippines at a national level. gender inequality for women is correlated with higher child mortality and lower childhood immunization rates.

Reaching higher levels of education greatly increases the likelihood that a woman’s children will be vaccinated. For example, the more empowered women are, or they have control over family decision-making or their financial resources, the more likely their children are to be vaccinated. I guess there’s a little bit of a silver lining between pushing for gender equality, and highlighting the importance of education. For my last point, I think it’s very important to highlight that an equity approach to immunization and child health is both a moral imperative and an efficient use of resources.

**Vince:** Thanks, Paul. That last point, you hit on the importance of an equity approach and as we head into 2023, the big issue on the United Nations docket in this coming year in terms of health is looking at reviewing progress towards universal health coverage. There has been a commitment by all UN member states to reach universal health coverage by 2030. That is that everyone in all communities has affordable access to essential health services.
As you touched on in terms of immunization, that is really necessary to reverse some of these declines we’ve seen in immunization rates, especially in reaching those zero-dose children, those children who have not received any vaccine doses. Can both of you touch on a little bit about in your own setting and others that you are advocating with, what you see as what policymakers need to address for the health workforce in order for you to be able to effectively deliver essential health services to all communities? Maybe Rita, I could start with you.

Rita: Vince, it is very amazing to hear that it’s a big target to have immunization for everybody, and I’m so happy to hear about that but when you look at the reality, for example, I was reading a report from the UNICEF in Lebanon, dated April 2022, and I was shocked to know that we have 80% of the Lebanese population that is living in poverty. We are talking about immunization and in parallel, the people are starving. They do not have something to put on their table. Worse than that, you have more than 31% that is decreasing in the rate of the initial and the basic immunization.

Let me give you an example. We had a hepatitis outbreak in Lebanon, but in reality we do not have the vaccine. There is a shortage of vaccines. For example, if you want to give a young girl HPV vaccine to protect her, to not have cancer when she will be an adult, the cost is more than the three months salary of her two parents. It is really a big economical issue. If we are talking about capability and having vaccinations for everybody, policymakers have to go to the ground. They have to really go on a balcony, a mental balcony, and to think a little and realize what is really going on.

They have to observe and not just jump to the actions. They have to really interpret what is going on in the real life of the people and to fill this gap between the populations. We have advanced countries, certain level countries. This is not acceptable anymore. We are heading to 2023 and we are still talking about those gaps. Also there is the lack of communication. It’s not just the access to the vaccine, it is also the acceptance of the vaccine. The real dilemma here is how we, as health workers, as frontline nurses, we are speaking with those parents. The lack of communication is very important and it is a huge challenge for the healthcare workers.

Maybe the politicians here have to be role modeling for the healthcare workers and speak a little about capability, not getting to the war; maybe putting more peace in the world like this. We have more resources that we can invest in the health. Also as health care workers, we have to work on our communication skills and to be more able to access those parents that are afraid for their children, but also they do not trust in the systems and in the vaccinations.

Vince: Thanks, Rita. Paul, curious your thoughts on the dichotomy from the laudable and ambitious goals of Universal Health Coverage or of greater than 90% coverage and routine vaccinations by 2030, matching the reality I think you shared with us
before we came on this podcast, some successes that you felt have been achieved in the Philippines. Of course the Philippines also, there are a lot of nurses from the Philippines who go abroad as well and just curious as to that point that Rita was making about understanding of communities and maybe the rhetoric not matching the reality sometimes and where you feel policymakers may need to focus to achieve some of these goals.

**Paul:** Two points on my side, I think the different policymakers in different countries need to rapidly scale up their investment in essential public health functions. What do I mean by that, policy-making based on evidence such as highlighting risk communication and also really going to different communities, having an outreach to empower individuals and families to better manage their own health. Basically, we have to go back to primary health care. It comes with that, the important elements of those health functions, which includes information systems, having a very comprehensive surveillance system, and also making sure that your capacity for testing is there, and also highlighting the different public health institutes and programs within those health functions.

Then for my second point, I think I want to go back really to the importance of investing to healthcare workers and the COVID-19 pandemic which has initially affected the health workforce disproportionately has highlighted the need to protect health and care workers, meaning we really have to invest in a holistic approach in order to protect them, prioritize their investment in their education and employment, and also to leverage partnerships to provide them with decent working conditions. Those are my two points, increasing investment on healthcare workers and making it holistic and then the other one is investing in essential public health functions.

**Francesca:** Paul, you recently spoke at side events and discussions at the UN General Assembly discussing the importance of addressing mental health of health workers, both from a decent work perspective to ensuring that health workers can deliver a heavy burden that health systems actually place on you. Can you tell us more about that in terms of helping with the mental health of health workers, but also how addressing that and supporting and investing in health workers is connected to the relative success of immunization campaigns?

**Paul:** Many health workers have felt under pressure already for years. I think we already know that. During the COVID-19 pandemic, many have lost their families, experienced stress and stigma. It can be your family or your neighbor, but I think we tend to forget that the health workers are also having these mental health issues within the pandemic. I also wanted to highlight that it is well documented in most resources that health workers have a powerful influence on the vaccination behavior and vaccine acceptance of their patients and also at the community at large.

I guess the connection here is if we support nurses in terms of providing them with a holistic support program which also addresses their mental health issues, we will be
able to have a very successful immunization campaign. Just really investing in different programs for different healthcare workers, that's the key.

**Vince:** Part of that investment is leadership both in time and space and opportunity. Rita, I think you won a Nursing Now Challenge Global Solutions Initiative for a cross-training program you developed with your team and you've since been involved in Sabin's Boost network with Immunization professionals. We're curious what you found the importance of nurses and other frontline health workers in particular in engaging in advocacy, outreach leadership on immunization and other health programs and why that's so important to the success of immunization programs.

**Rita:** Yes, in fact, Vince, I'm so proud and happy to share that we have during the COVID pandemic faced with success, the lack of qualified nurses by creating this cross-training program that aims first to facilitate the integration of early career nurses and to retain them in the profession and needs of patients. Also, the most important was this union between the nurses that have experience and those who are entering the profession. This was very empowering for the early career nurses and for the enrolling of the patients in the immunization and nurturing their leadership was very helpful. Let me tell you a small story about the hemodialysis patients in our facilities.

We used to have 70 patients that are coming to our facility to get hemodialysis two to three times per week. They were very resistant to have the COVID-19 vaccine. One day, I still remember it was a rainy day and everybody was afraid behind their mask, they do not want to speak to anyone. They were asking themselves, am I going to be the next who is going to die from COVID? A young nurse who was the new entry in the department was doing her rounds and she was asking one of her patients, "Why today you're not smiling?"

The response to her, "I'm afraid to be like Camille who died last Sunday." She was talking to him and telling him, "Listen, today I'm coming from the COVID Center vaccine, and look at me I'm very good. I'm ready to go with you to get your vaccine shot. I assure you I will stand with you if you have any fever. I can go with you at your home." This patient is looking to the young nurse and saying to her, "If you are not afraid and you are so young, me, the dialysis patient also I can be like you."

Like this, she was going from one patient to another and the other nurses were in a union with her and after one month, all patients in the hemodialysis department having two doses of COVID. Today we have all our patients that are having three doses of COVID vaccine. This is amazing when you really invest in the nurses, when you really give them the leadership and all this is teamwork. Also, those nurses are joining us with Boost Community and Sabin Vaccine Institute during the courses on boosting leadership also on Activation Community.
I go, I’m in the class with the others. I took the lecture and then I bring this to my facility. We have the video recorded, and you cannot imagine how much the young nurses are happy to attend those sessions. Sometimes there is the language barrier, but it’s not a problem because there is a lot of them that speak French and English. We can do the translation. Really, when we invest in people, when we’re role modeling to them, it’s really amazing to see how much we can have as a result for the patient, for the community.

Now every one of them is like an advocate in his community, their families, their neighbors, and everybody is not afraid of the vaccine. All the bad news in the media or the information that are not as evidence-based as they should be are corrected by those nurses. I’m so happy to have this small change, but it’s like a snowball. I believe it’ll grow day after day.

**Francesca**: Rita, you really talk about the passion of nurses and helping their communities and trying to even just be better and continue to improve to help their communities more and more and more. I think a lot of the topics that we’re talking about, universal healthcare, increasing immunization rates around the world, they’re very large and overarching concepts that can be a bit overwhelming. So many nurses around the world, they have this passion and they have the ability to make change and to support their communities. I’m curious for both of you, do you have any advice for fellow health workers around the world on how they can really maximize their expertise and experiences to help increase vaccine acceptance and demand in their communities, especially when they may be feeling overwhelmed or reluctant to do so?

**Paul**: I want to highlight one important message. I want to say to all the health workers out there that you need to fight for what you truly deserve. What do I mean by that? You just don’t sit out there and be treated as a slave. You need to step up and really continue the conversation with the government or with your employer to make sure that you have livable conditions. You have to fight for those things that you think that you truly deserve. Whether it’s adjusted salary, it’s a hazard pay, or those meal allowances, because we are there a 100% all the time. Even during the pandemic, we are there. We’ve never complained of being tired. We’ve never complained of being exhausted, but we always have the duty to help others. Fight for what you truly deserve.

**Rita**: I applaud what you said, Paul. It is really brilliant this call for action for nurses, and also, I believe that nurses are the agents of change. If we really want to have health coverage for every person on this planet, if we really believe that every person deserves a better life, we should encourage nurses, we should encourage healthcare workers. For the healthcare workers, since we are the agent of the changes, we have to raise our voices. During the pandemic, the front-liners were nurses. During the pandemic, all politicians, the power persons who have the rights to say the yes and the no, they were not in the ground.
They were behind their masks, their beautiful homes. The real reality near the patient who was holding the hand of the patient dying alone in the ICU, they were the nurses. Here really we have to work. Also, it’s not just that it is our right. We have to own our rights by communication, by learning, by education, by leadership. We have a role of change here that we need to do also in ourselves. We cannot wait until the change come from abroad. We have to be the agent of change as nurses and as healthcare workers.

**Moderator:** Thanks, Rita. Incredibly powerful messages from both of you for the health workforce. At Sabin, our focus of our mission and vision is on maximizing the impact, the transformational life-saving, life-improving impact that vaccines can have for communities all around the world. We had some specific recommendations that we have for policymakers heading into the year that we’ll post in a recent op-ed that we had in DevX.

We’ll post on this podcast webpage is things like that health workforce investments be specifically included in this new World Bank managed fund for pandemic prevention as workforce is central to that effort. That of course that the targets for the immunization agenda 2030 of at least 90% coverage by 2030 have been costed and financed again after all of the issues that’s raised today that the pandemic has brought on.

Of course, that there’s a sustained and focused commitment and development assistance to the health workforce, the African Union, other regional bodies have put together new compacts, but there needs to be this sustained financing for it. Those, of course, are our recommendations, but we’re wondering any additional thoughts that you have to close us out on those who are planning and executing these immunization programs. Any less thoughts for them to be thinking about as we close out today?

**Rita:** I urge all decision makers, also persons that are in the role and that have a power in their community to urge the population to go and to get the vaccine. Not only for COVID, not only for cholera, because nowadays we have an outbreak of cholera, for example, in Lebanon, but for all the vaccines. Also, it’s very, very important as a recommendation for the persons that have the power to decide to collaborate with other persons who have the information, who have the knowledge. I can, for example, call them to join Boost communities, Sabin Vaccine Institute. This is a beautiful platform where they can learn a lot about immunization, about community activation, because in real life, we need such people who have leadership and not just a power, who can base their decision on reality, on evidence, who can get to the people, who can motivate those people to go and get the vaccination.

To close, I really appreciate if everybody who can hear us today can go and join those learning journeys and also who can make a decision based really on true
information and like this, we can have access to all the immunization and in a sustainable way that can save a lot of life and also that can save a lot of economical issues for the population.

Vince: Thank you, Rita and Paul, last word goes to you.

Paul: Just to add to what Rita said, I think most of the decision-makers already know this, but again, I want to highlight four short points. The first one is, I think it’s very crucial to engage health workers as active agents and partners in shaping the overall vaccination effort and ensure that they are still respected and listened to. That’s my first point. The second one is, it is essential to build health workers’ knowledge, skills and confidence.

My third one is in terms of partnerships. I think it is important to value health workers as a target group and partners in different crises, whether it’s a pandemic or it’s a public health issue. Making concerted efforts to engage and communicate with health workers, whether regarding vaccine safety events or other stuff is really crucial for a very successful campaign. Then the fourth one is, there has been a huge gap between theory and practice. I think for all the decision-makers out there, you already know what to do. Cut the crap, walk the talk, and make sure you bridge those gaps.

Francesca: Thank you both so much for joining us today. We’re really excited to have you both here for the last episode of this season, and we really, really admire and appreciate all the work that you’re doing.

Vince: We look forward to working with you and colleagues around the world to continue to push for universal health coverage, push to invest in health workers and push to make sure that every community member has access to all the information and all the vaccinations equitably around the world. Thank you so much.

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