



the **Hib** initiative

Communication and advocacy for accelerated introduction of Hib vaccine

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Haemophilus influenzae type b (Hib) disease is the leading cause of bacterial meningitis in children under 5, and the second most common cause of bacterial pneumonia deaths in this age group. WHO estimates that Hib causes about 386,000 childhood deaths worldwide each year. Safe and effective Hib conjugate vaccines have been widely used in industrialized countries for nearly 20 years, leading to the virtual elimination of Hib disease in those countries. Unfortunately, use of Hib vaccine has been low in developing countries.

Strategic approach

The Hib Initiative uses a strategic three-pronged approach:



The communications aspect of the Initiative's mission is to advocate for the accelerated introduction of Hib vaccine and to communicate the benefits of Hib vaccine as a successful public health intervention.

Strategy development

The communication strategy was developed following a series of country and partner consultations and informed by surveys and perceptions research. Regional and country audiences were identified as primary target audiences. Communication to reach primary and secondary audiences including policy makers, EPI managers, partners, researchers, pediatricians and others was conducted through multiple channels.

Outreach was conducted both by the Hib Initiative and by partner organizations. The Hib Initiative focused primarily on countries with large birth cohorts and those with weak health systems.

Challenges identified

- Lack of awareness among decision makers regarding the existing evidence of the impact of Hib disease and resulting lack of political will
- Competing health priorities
- A lack of knowledge about the effectiveness of new vaccines
- Concerns about the cost of introduction of new vaccines
- Concerns about the cost-effectiveness and sustainability of Hib vaccine as a part of national immunization programs
- Lack of association between adoption of new vaccines and meeting Millennium Development Goals-4
- Need to customize messages to the unique needs of each country



Methods

Delivering messages

- Face-to-face country consultations with high level ministry of health officials for briefings on research data and available vaccine and introduction support
- Presentations at regional and global scientific meetings
- Coordination of messages throughout partner organizations- global and regional focal points
- Hib Focus newsletter and Hib Alert emailed to 2,100 subscribers from around the world
- Web site providing downloadable material on Hib and Hib vaccines

Regional forums

- Bringing together partners and country-level stakeholders to focus on prevention of pneumonia and meningitis (Hib and pneumococcus) through presentation and review of regional and local research data; slide sets and fact sheets disseminated

Country consultations

- Key countries and audiences were selected and messages were customized for each face-to-face country consultation to focus on data and issues in the country/region

Media outreach

- Creating and finding opportunities where local and regional media coverage would reach both influential policymakers and the general public
- Focus on data showing impact and clinical trial data through opinion editorials, press releases and interviews in global and local press

Advocacy in action

- Training and support provided to further local advocacy by trusted sources from public and private sectors. Child health experts and activists from 18 countries received support and training for the implementation of advocacy campaigns
- Countries targeted to mobilize local resources and build sustainability for new vaccines through advocacy

Progress

Then

In 2004, 13 GAVI-eligible countries had introduced Hib vaccine. Few countries had high levels of awareness regarding Hib disease and prevention.

Now

Awareness of Hib disease and vaccines to prevent it has increased substantially. Of the 72 GAVI-eligible countries, all but 9 have applied for GAVI support.

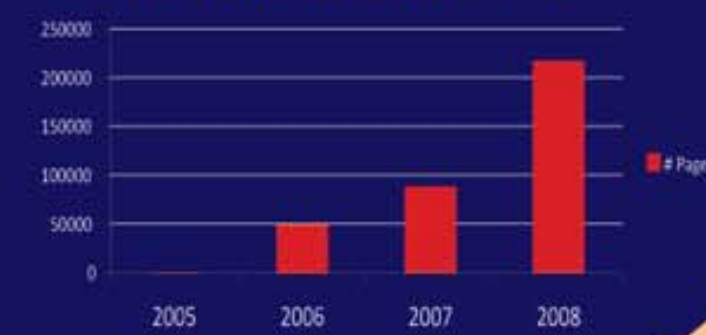
- 31 countries have introduced
- 23 countries on track to introduce by 2009
- 8 countries are anticipated to introduce by 2009-2010
- 9 countries remain, of which 6 are expected to apply for Hib vaccine support by February 2009



Communication activities in GAVI-eligible countries

- Media
- Country consultation
- Attended regional forum
- Advocacy support

Web site visitors
Web pages viewed each year



- Liberia
- Papua New Guinea
- Solomon Islands
- Sri Lanka
- Sudan
- Togo
- Zimbabwe
- Expected:
- Central African Republic
- Chad
- Republic of Congo
- Cote d'Ivoire
- Eritrea
- Guinea
- Guinea Bissau
- Expected:
- Kiribati
- Lesotho
- Madagascar
- Moldova
- Niger
- Pakistan
- Tajikistan
- Expected:
- Afghanistan
- Bangladesh
- Cameroon
- Comoros
- DR Congo
- Mauritania
- Mozambique
- Nepal
- Tanzania
- Anticipated:
- Bhutan
- India
- Indonesia
- Kyrgyzstan
- Lao
- Sao Tome
- Uzbekistan
- Vietnam

In 2005, the Hib Initiative began working to expedite and sustain evidence-informed decisions regarding the use of Hib vaccine in 72 low-income countries. The Hib Initiative is a consortium comprised of the Johns Hopkins Bloomberg School of Public Health, Centers for Disease Control and Prevention, World Health Organization and the London School of Hygiene and Tropical Medicine and funded by a grant from the GAVI Alliance.



Timeline of Hib vaccine introductions - GAVI-eligible countries

www.HibAction.org