

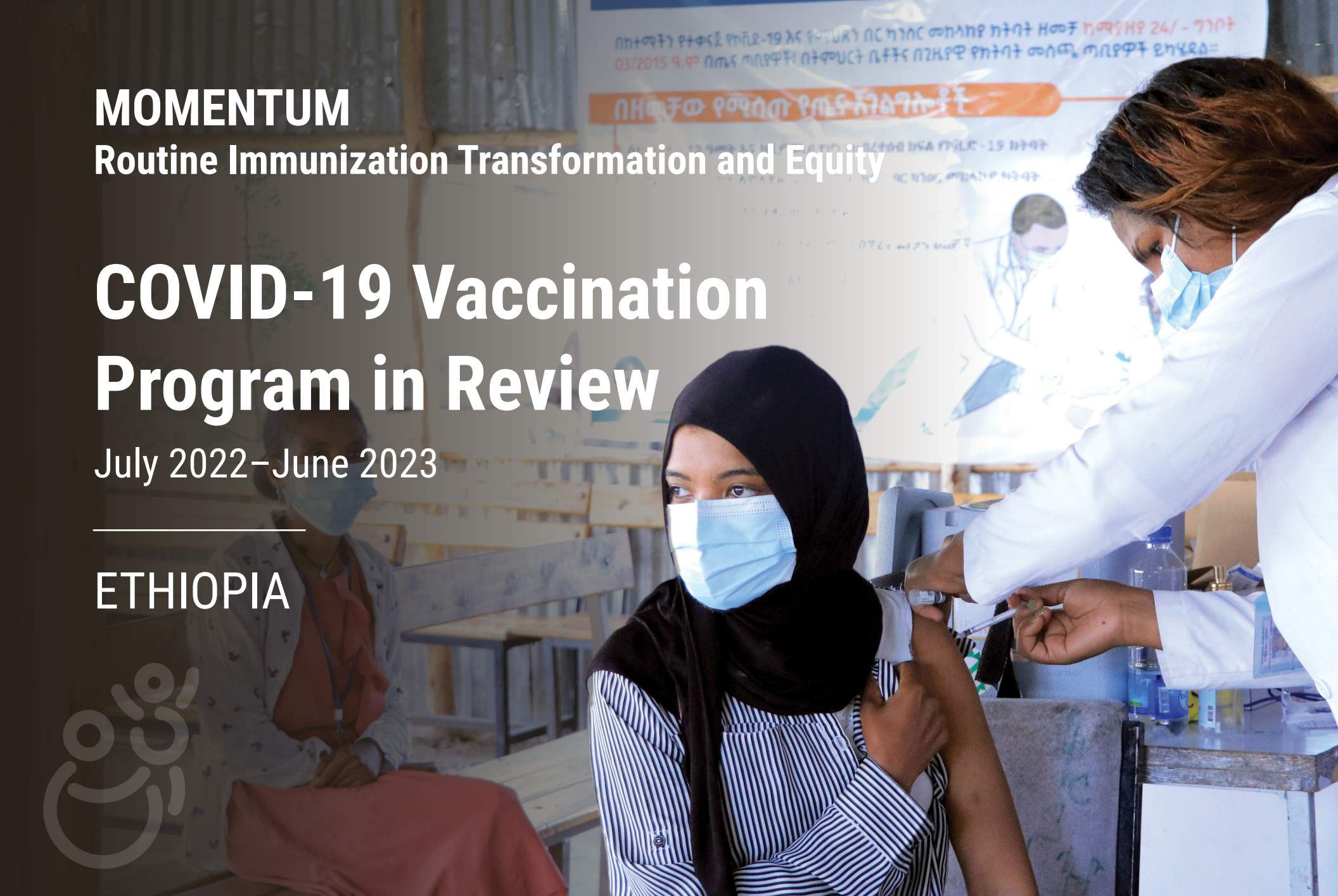
MOMENTUM

Routine Immunization Transformation and Equity

COVID-19 Vaccination Program in Review

July 2022–June 2023

ETHIOPIA



September 2023



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MOMENTUM Routine Immunization Transformation and Equity

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The project was successfully implemented because of close working relationships and support received from the Ministry of Health of Ethiopia; Addis Ababa City Administration Health Bureau; sub-city health offices of Nifas Silk-Lafto, Lemi Kura, and Bole; and supported schools, colleges and universities. Finally, we would like to acknowledge the USAID Mission in Ethiopia for its close follow-up, guidance, and support throughout the project period.

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Acronyms

AACAHB	Addis Ababa City Administration Health Bureau
DHIS2	District Health Information Software 2
EPI	Expanded Program on Immunization
HEW	health extension worker
HPV	human papillomavirus
IPC	interpersonal communication
MOH	Ministry of Health
PHC	primary health care
RI	routine immunization
SBC	social and behavior change
SWE	South West Ethiopia
TOT	training of trainers
TWG	technical working group
USAID	United States Agency for International Development

Results

Strengthening the Health System



Supported **328 vaccination sites** at **health facilities** and **outreach posts in the community**.



Trained **676 health staff** and **community volunteers** on **COVID-19 vaccine-related topics**.



Conducted **172 supportive supervision visits** at **45 health facilities** and **temporary vaccination sites**.

Reaching Underserved and Priority Populations



Provided technical and logistic support to **three sub-cities in Addis Ababa**, which resulted in the administration of **177,188 COVID-19 vaccine doses**.



Supported **177 community dialogue sessions** attended by **5,355 people**.



Provided support to **20 high schools** and **eight colleges** and **universities** to promote **COVID-19 vaccination** and increase uptake.

Background

The first COVID-19 case in Ethiopia was reported on March 13, 2020. As of August 2023, more than 500,000 cases have been confirmed across the country.¹ The capital, Addis Ababa, accounts for the majority of the country's cases and deaths—about 68 percent and 62 percent, respectively. Ethiopia began COVID-19 vaccination in March 2021 through periodic campaigns and vaccination at health facilities. The Government of Ethiopia provides vaccination for adults and adolescents aged 12 years and above, and it set a target to fully vaccinate 70 percent of the total population by the end of 2023.² As of August 2023, 41 percent of the total population has been fully vaccinated.³

During the initial COVID-19 vaccination campaign, conducted by the MOH in November 2021, the acceptance rate for the vaccine was very low in Addis Ababa, despite having the most confirmed cases and hospital admissions. During the second campaign in February 2022, only 37 percent of the COVID-19 vaccines allocated for Addis Ababa were used, representing the lowest utilization rate in Ethiopia.

In urban areas, like Addis Ababa, some of the main causes, related to demand that were identified for low uptake of the COVID-19 vaccine were limited outreach in schools and communities, vaccine hesitancy, and low leadership engagement. Some service delivery challenges identified were insufficient outreach sites, interpersonal communication (IPC) skills among health workers, and health worker training on the COVID-19 vaccine. The hours of service delivery during campaigns were also not convenient for adults who worked full time.⁴

1 World Health Organization. n.d. "WHO Coronavirus (Covid-19) Dashboard: Ethiopia." Accessed August 2023. <https://covid19.who.int/region/afro/country/et>.

2 Ministry of Health—Ethiopia. National Deployment and Vaccination Plan for COVID-19 Vaccines, MOH-Ethiopia, September 2022.

3 Ministry of Health—Ethiopia. Ethiopia COVID-19 Vaccination Progress Monitoring. August 2023. https://lookerstudio.google.com/u/0/reporting/733f9ae1-a158-408a-a9aa-d71646da70f1/page/p_55f-p8850uc?s=k2uc8qBTfxw.

4 As reported in review meetings and recent/ongoing assessments by partners.



Philip Ankong Aweiana

Project Overview

MOMENTUM Routine Immunization Transformation and Equity (the project) applies best practices and explores innovations to increase equitable immunization coverage in U.S. Agency for International Development (USAID)-supported countries. The project is USAID's flagship technical assistance mechanism for immunization, working in 18 countries around the world. It builds countries' capacities to identify and overcome barriers to reaching zero-dose and under-immunized children and older populations with lifesaving vaccines and other integrated health services, including rebuilding immunization systems adversely affected by the pandemic. It also supports COVID-19 vaccine rollouts across countries that have a wide range of circumstances and needs. Building on USAID's long-standing partnership with the health sector in Ethiopia, the project worked with the Ministry of Health (MOH) and the Addis Ababa City Administration Health Bureau (ACAHB) to enhance uptake of COVID-19 vaccination through increasing demand and supporting COVID-19 vaccine service delivery.



In July 2022, the project received approval under funding from American Rescue Plan Act Congressional Notification #18 to provide strategic country-level technical support to address key gaps and bottlenecks related to COVID-19 vaccine introduction in Ethiopia. The project provided technical support at the national level to the MOH and at the regional and sub-city level to the Addis Ababa City Administration Health Bureau (ACAHB) until June 2023.

The MOH-level support aimed to strengthen the national and subnational planning and coordination platforms by focusing on evidence-based planning and coordination for COVID-19 vaccination, linking service delivery with demand generation and communication, and supporting monitoring and evaluating the program.

In addition to national-level support, the project worked closely with the ACAHB to provide targeted technical assistance to Addis Ababa. The ACAHB selected three sub-cities in Addis Ababa for direct support from the project—Lemi Kura, Bole, and Nifas Silk-Lafto. These sub-cities were targeted for additional support due to their low access to and uptake of COVID-19 vaccination, significant presence of priority populations, and lack of targeted support by other development partners. To understand the context and status of COVID-19 vaccination, the project conducted a mixed-methods situation analysis in the three project-supported sub-cities using key informant interviews and primary data from health facilities. The project collected data on routine immunization (RI) and COVID-19 vaccine service delivery, communication, planning, and data management. Additionally, the project assessed barriers and enablers of COVID-19 vaccination through secondary data review. Findings from the situation analysis identified that health care providers were hesitant about the vaccine; industrial park workers, women, and high school and university students had low rates of vaccination; and high-risk populations should be prioritized for vaccination.

Technical Areas of Support

TECHNICAL AREAS



Vaccination service delivery



Community engagement and demand creation



Planning and coordination



Supportive supervision and training



September 2022

Project started.
Began planning technical assistance to the MOH.



October 2022

Project conducted a situation analysis to understand the context and status of COVID-19 vaccination in Addis Ababa.



December 2022

Supported an integrated COVID-19 and measles campaign.



November 2022

Trained health care workers and providers on community dialogue and IPC skills.



March–April 2023

Conducted intensified demand creation and communication efforts in preparation for the May 2023 COVID-19 vaccination campaign.



June 2023

Conducted a close-out workshop with key stakeholders.



May 2023

Supported service delivery for the COVID-19 vaccination campaign.

Reaching Underserved and Priority Populations



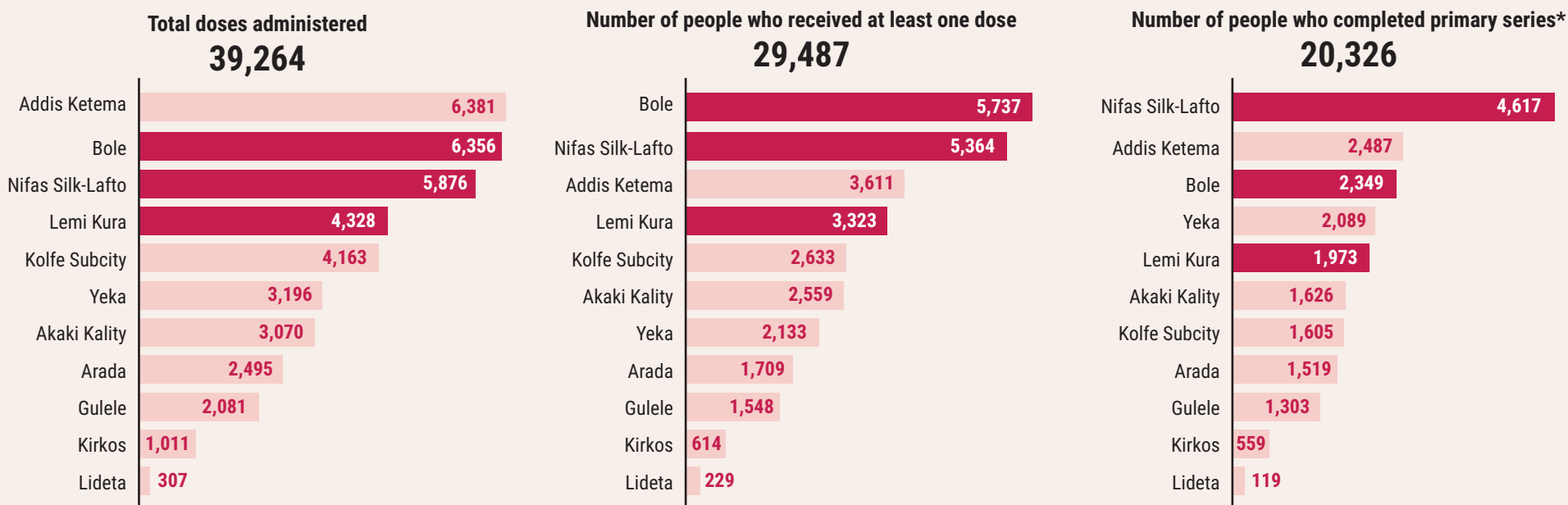
Vaccine Service Delivery

Ethiopia is a populous country with many different ethnic groups and geographic areas and a decentralized health system. Getting vaccines to each location while taking into consideration geography, security concerns, and local context required a large coordinated national effort. The project worked at the national level with the MOH to strengthen technical working groups (TWGs) and the national task force to enhance planning and coordination for COVID-19 vaccine service delivery. At the regional level,

the project provided direct support to 22 health facilities across the three sub-cities in Addis Ababa to improve urban service delivery for COVID-19 vaccines and integration of the vaccine into RI through assistance in vaccination campaigns, supportive supervision, and evaluation efforts.

The project provided national-level technical support to the MOH in the planning and implementation of two national vaccination campaigns (a measles campaign in December 2022, which included COVID-19 vaccination, and a COVID-19 vaccination campaign in May 2023) and on-the-ground support for these campaigns in the three sub-cities.

Figure 1. Number of people who received of the COVID-19 vaccine during the integrated measles campaign in December 2022 in Addis Ababa by sub-city.




■ Project supported sub-cities

*Completed vaccination series includes single dose for Johnson & Johnson COVID-19 vaccine OR receiving second dose for other types of COVID-19 vaccines (Pfizer, AstraZeneca, and Sinopharm).

The MOH measles campaign in December 2022 integrated various primary health care (PHC) services alongside measles vaccination, including deworming, malnutrition screening, identification and vaccination of zero-dose children for RI, and identification of clubfoot and obstetric fistula cases. Regional health bureaus had the option to integrate COVID-19 vaccination into the campaign. Recognizing the importance of integrating COVID-19 vaccines into the campaign in Addis Ababa as a way to reach priority and underserved populations who were largely unvaccinated, the project successfully advocated for its inclusion in the three project-supported sub-cities, collaborating with AACAHB and key partners to mobilize resources, set targets, secure vaccine supplies, and communicate with the public.

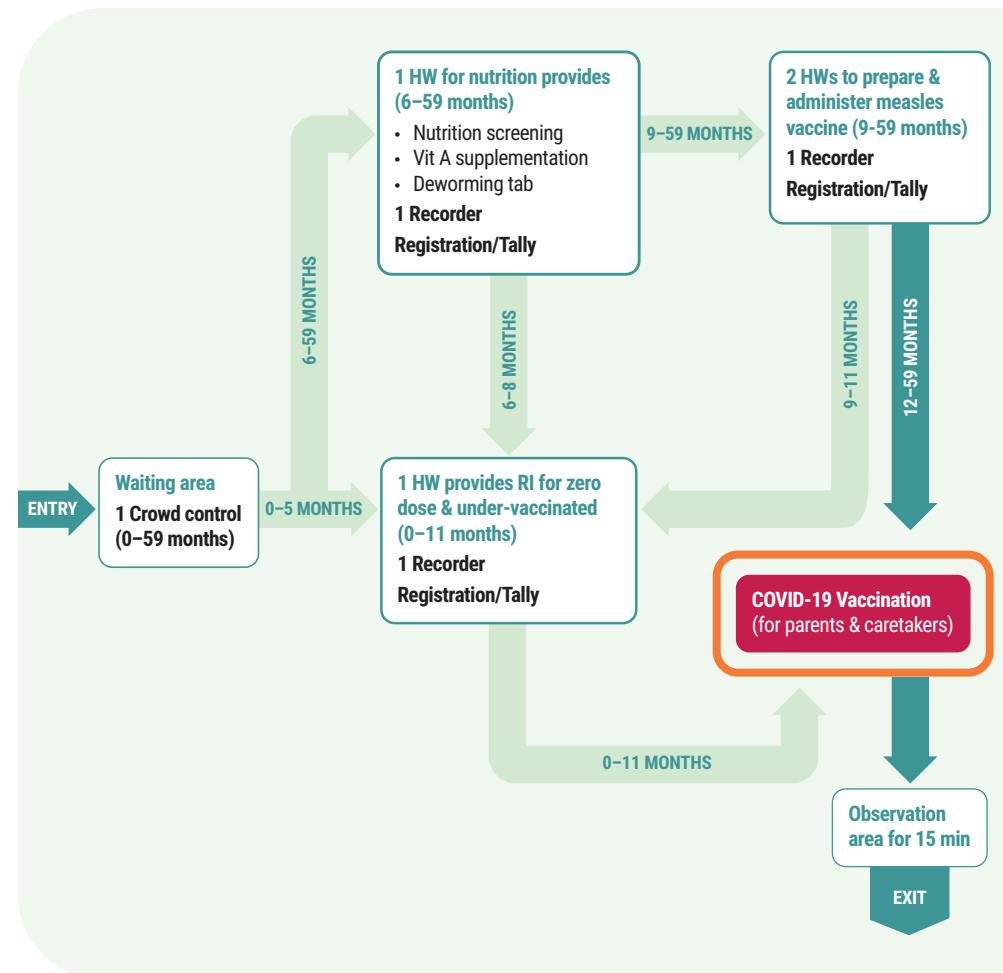
Project immunization advisors also worked with sub-city health officials to provide supportive supervision and monitoring and evaluation support. As a result, 16,560 COVID-19 vaccine doses were administered during the campaign in the three project-supported sub-cities. This accounted for 42 percent of total COVID-19 vaccine doses administered in the capital during the December 2022 campaign, an increase from previous campaigns, where the three sub-cities accounted for only 25 percent of total doses administered. These sub-cities were among the top performing sub-cities for the December 2022 campaign which reflects improved equitable access to and uptake of COVID-19 vaccination. (See Figure 1).

During the integrated measles campaign, the project supported daily debriefs with supervisory teams to monitor performance, identify challenges, and adjust course as needed. During these debriefs, project staff noticed that one of the sub-cities was consistently falling far below its COVID-19 daily vaccination target. After supportive supervision visits from project staff, it was clear that there was a gap in the client flow (as seen in Figure 2), as there was no designated station for COVID-19 vaccination where all clients would pass.

 Project-supported adaptations to the new client flow resulted in an average of **490 additional people per day receiving COVID-19 vaccines**.

To address the identified challenges, the project team worked with AACAHB to revise the client flow to make sure that all clients would receive information and be offered a COVID-19 vaccine before leaving the vaccination site. The integration of COVID-19 vaccines into the nationwide measles campaign proved to be a successful endeavor as it expanded access to COVID-19 vaccination for mothers and caregivers

Figure 2. Adapted client flow to include COVID-19 vaccination during the integrated measles campaign of Dec 2022



who brought their children to the vaccination posts for measles immunization and other services. This adjustment to the client flow in real time highlighted the importance of adaptable strategies during public health campaigns. These learnings were subsequently applied to the May 2023 nationwide COVID-19 vaccination campaign.

Nationally, the project assisted the MOH by:



Supporting planning and coordination.



Revising and standardizing campaign training materials.



Facilitating training sessions for regions and partners.



Supporting the development of guidelines on how to integrate services during a vaccination campaign.



Reviewing national and regional campaign readiness.

The MOH's Expanded Program on Immunization (EPI) conducted a fourth nationwide COVID-19 vaccination campaign in May 2023. Based on the successful integration of services during the measles campaign, the MOH integrated human papillomavirus (HPV) vaccines and PHC services into the campaign.

In Addis Ababa, the project provided technical, financial, and logistical support to AACAHB and the three supported sub-cities during the May 2023 COVID-19 vaccination campaign. In addition to fixed vaccination sessions at health centers where COVID-19 vaccinations were promoted and administered during RI and PHC services, the project provided vehicles so vaccination teams could organize temporary outreach and mobile vaccination sessions during the campaign. Throughout the campaign period in Nifas Silk-Lafto sub-city, only 50 percent of the priority population was vaccinated, totaling 36,914 individuals. Recognizing the need to improve vaccination coverage, the project worked with the AACAHB and sub-city health offices to extend the campaign by four additional days. To assure the success of the extension period, the project supported the sub-city in developing a tailored plan to identify and reach segments of the target population that had been missed during the regular campaign period. This strategic approach aimed to maximize vaccination coverage and ultimately contribute to the overall campaign objectives. This extension was made possible through the provision of resources, such as vaccines, community mobilizers, supervisors, and vehicles. As a

result, the sub-city successfully vaccinated an additional 12,853 people, increasing its campaign performance from 50 percent to 67 percent of the target.

The project also provided technical support to the three sub-cities and its 22 PHC facilities to integrate COVID-19 vaccination into RI. The project worked with sub-city health offices to plan for integration; conducted supportive supervision for the health facilities, specifically focusing on integration; and included integration as an agenda item during review meetings. Currently, all 22 health centers in the three sub-cities have COVID-19 vaccines available to provide COVID-19 vaccination routinely as part of RI/PHC. While this is a good start to increase COVID-19 vaccine availability in the three project-supported sub-cities, more support is needed to better integrate COVID-19 vaccination into antenatal care and care for people with chronic illnesses and to reach other target populations, such as older people. During non-campaign months, uptake of COVID-19 vaccination at health facilities has been low. The project recommended to the MOH that facilities need an integration manual, demand creation training, and a strong monitoring system to improve uptake of COVID-19 vaccines.



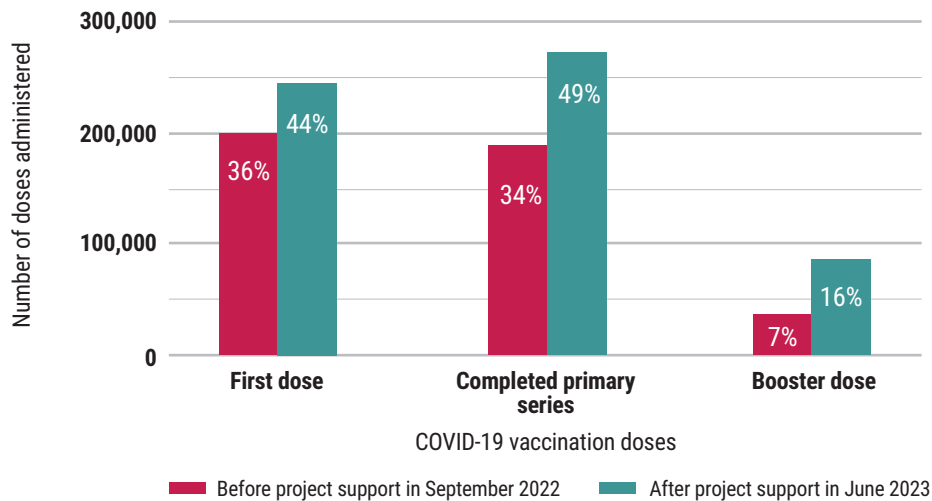
Over the project period, the project administered **177,188 doses** in the three project-supported sub-cities, using **85 percent of the available COVID-19 vaccine supply** for those sub-cities.



Vaccination at Mekedonia Home, a care center for older people and people with psychiatric disabilities.

Credit: MOMENTUM Routine Immunization Transformation and Equity Ethiopia

Figure 3. COVID-19 vaccination coverage of the three project-supported sub-cities before (end of September 2022) and after (end of June 2023) project support



With support from the project, the COVID-19 vaccination coverage of the three project-supported sub-cities has increased from the initial situation analysis. Figure 3 shows the coverage increase in the three sub-cities for the first dose, completion of the primary series, and a booster dose. The overall coverage in these three sub-cities for completing a primary series of COVID-19 vaccination has increased by 40 percent. This support was central to improving uptake for COVID-19 vaccination and laying the groundwork for integrating COVID-19 into RI services. The AACAHB is poised to continue strengthening service delivery.

Community Engagement and Demand Generation

Recognizing the importance of effective communication for vaccine acceptance and uptake, the project provided technical support to enhance COVID-19 vaccine demand generation and communication efforts at both national and regional levels. The situation analysis the project conducted indicated a lack of confidence in COVID-19 vaccines among health workers, including a high perceived fear of adverse effects from the vaccine and misconceptions that the COVID-19 vaccine causes sterility. Misconceptions and misinformation that spread through social media also led people to believe that

the vaccine itself causes COVID-19 or physical and mental harm. Based on the results of the situation analysis, the project saw a clear need for designing a comprehensive social and behavior change (SBC) communication campaign to address the concerns, misconceptions, misinformation, and hesitancy about the COVID-19 vaccine.

To help support messaging for vaccination campaigns, the project participated in the national-level communications TWG and advocacy meetings, contributing to the development of messages for information, education, and communication materials dispelling myths and misconceptions and promoting the benefits of COVID-19 vaccination.

Essential workers were listed as a priority population within Ethiopia's COVID-19 National Deployment and Vaccination Plan during the introduction of COVID-19 vaccines in the country in 2021. In Addis Ababa, the project identified that workers within industrial parks, which house commercial factories and warehouses, had low uptake of COVID-19 vaccines. To better reach this community, the project developed messaging and materials specific to the workers' needs, including a public service announcement television commercial that aimed to dispel COVID-19 vaccine myths and encourage vaccination. It was filmed in an industrial textile and garment factory and featured actors portraying industrial workers who encouraged their coworkers to get vaccinated. The commercial aired in April 2023 on one of Ethiopia's national entertainment television channels just prior to the start of the May COVID-19 vaccination campaign. In addition, the project adapted messages developed by the USAID MULU project into engaging



Audio mounted vehicle promoting the MOH national COVID-19 vaccination campaign in May 2023.

Credit: MOMENTUM Routine Immunization Transformation and Equity Ethiopia

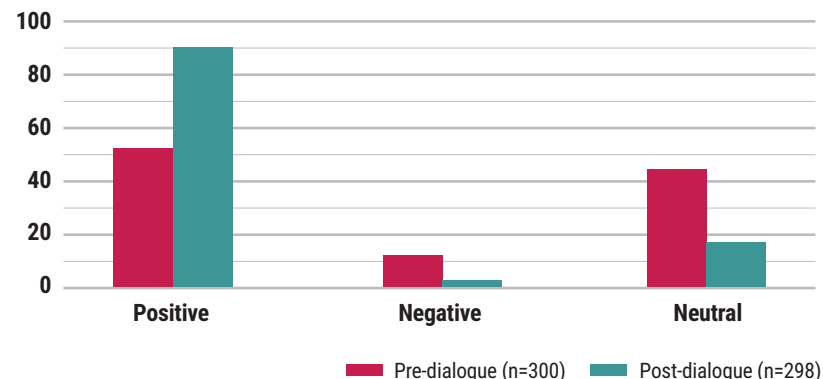
leaflets and brochures for industry park workers and high school and university students, another priority population for increasing COVID-19 vaccine uptake.

The project also deployed audio-mounted vehicles around the three sub-cities in Addis Ababa prior to and during the vaccination campaigns. The vehicles traveled to residential blocks, major roads, marketplaces, industrial parks, and schools, where they played tailored COVID-19 messages conveying information about locally available services and encouraging the community to get vaccinated.



More than 50,000 informational brochures on COVID-19 disease and vaccination were distributed among priority populations at schools, health centers, and industry parks.

Figure 4. Attitudes toward receiving COVID-19 vaccine before and after community dialogues



Health extension workers (HEWs) in Ethiopia are integral to reaching community members and supporting local health centers. Supervised by health center staff, their role is to provide community members with vital health information and promote healthy behaviors and PHC services within the community. Before the May 2023 campaign, the project trained HEWs on how to facilitate and organize community dialogues. To engage communities with low COVID-19 vaccination uptake, HEWs hosted community dialogues with specific groups in the three project-supported sub-cities, (members of women's association and development groups, older adults, youth associations, and community representatives) to generate demand. Activities during the dialogues included education on COVID-19, modes of transmission, vaccination and group discussions on myths and misconceptions of the disease and vaccine. The dialogues gave HEWs the opportunity to discuss and address any concerns community members had regarding COVID-19 vaccines. Project staff conducted in-person interviews with participants immediately before and after their attendance at 10 randomly selected community dialogue sessions to measure their attitudes toward COVID-19 vaccination. The interviews found that many participants reported an increase in positive attitudes and favorable intentions toward vaccination after the community dialogue, with many intending to get vaccinated (Figure 4). Immediately following some community dialogues, the project facilitated on-site vaccination.

Advocacy Meetings and Workshops

Leading up to the May 2023 COVID-19 vaccination campaign, the project organized four regional- and sub-city-level COVID-19 vaccine advocacy workshops that were attended by 299 governmental sector office heads, women and youth association leaders,



“Since I got the vaccine, I was very happy, and when the health vaccination worker called me, I was eager to attend this meeting. Even now, I am ready to get an additional booster dose after the event.”

—Community dialogue participant

Credit: MOMENTUM Routine Immunization Transformation and Equity Ethiopia

religious leaders, media representatives, and people in public relations. During the workshops, representatives from each group set action points to promote COVID-19 vaccines within their respective organizations. As an example, religious leaders set targets to include key messages about COVID-19 vaccination as part of their teachings during religious services, leaders of women and youth associations planned to mobilize their members and community members for vaccination, and the heads of sector offices developed an action plan to mobilize their staff for vaccination.

One important barrier to addressing the low vaccination rates among industrial park workers was a lack of coordination and collaboration between Industrial Parks Development Corporation (the organization that manages all of the industry parks) and the health sector (i.e., MOH at the national level and AACAHB at the city level). The project facilitated a coordination meeting among these groups ahead of the May 2023 COVID-19 vaccination campaign, where it provided basic information about COVID-19



The project facilitated coordination and collaboration between the **health sector and private sector employers to enable workplace vaccination.**



A total of **177 community dialogue sessions** were held one week prior to and during the **May 2023 COVID-19 vaccination campaign**, which were attended by **5,355 people** (516 males and 4,839 females).

and discussed the rationale for COVID-19 vaccination of industrial park workers as a priority group. The project worked closely with human resource managers from multiple factories to enable demand generation activities and vaccination sessions for workers to take place during their break times. Once the schedule was finalized, the project worked with the sub-city health office to organize mobile vaccination teams. Thanks to these efforts, a total of 874 industrial park workers were vaccinated, and a system for vaccinating workers in industry parks was created.

Another priority population was school communities, which had high levels of misinformation from social media and a lack of information and coordination with the health sector, leading to a low risk perception of COVID-19 and low COVID-19 vaccination rates. To debunk misinformation and increase demand for COVID-19 vaccines among high school and college/university students in the three project-supported sub-cities, the project worked with the AACAHB and the three sub-city health offices to organize advocacy workshops for high schools, education offices, colleges, and universities; regional-level workshops for key stakeholders; and sub-city workshops for local health offices. The goal of these workshops was to increase support for COVID-19 vaccination activities at school communities and engage key stakeholders (e.g., religious leaders, sector heads/representatives, media representatives, women’s associations, and youth leagues) to generate demand for COVID-19 vaccines in their communities (Table 1).

Table 1. Number of advocacy workshops conducted by the project

Site and type of advocacy workshop	Number of sessions	Participants		Total
		Male	Female	
High school and education office	3	80	40	120
Colleges and Universities	1	25	14	39
Regional-level advocacy workshop for key influential people in the community	1	27	13	40
Sub-city-level advocacy for key influential people in the community	3	53	47	100

As a result of these four advocacy workshops, participants agreed that further training and support was needed for student representatives and their peers to facilitate discussion on COVID-19 vaccination and increase uptake. The project and sub-city health offices conducted student-centered training for representatives of students from high schools, colleges, and universities in the three sub-cities (Table 2). The two-day training included three different sessions (one session per sub-city) to equip students with skills to address misinformation and hesitancy among their peers and to organize question and answer sessions within their schools. At the end of the trainings, participants agreed to use communication avenues, such as “mini-media,” (student-produced school-wide announcements provided during the school day) to share positive COVID-19 vaccination messaging. They also organized question and answer sessions within their respective schools and used health clubs within high schools and colleges to deliver key messages about COVID-19. Prior to the May 2023 COVID-19 vaccination campaign, the project supported question and answer events about COVID-19 at 20 high schools in the three sub-cities to increase demand during the campaign. The high schools, colleges, and universities became temporary vaccination sites during the campaign and helped increase the uptake of COVID-19 vaccination among students.

Table 2. Number of student-centered trainings conducted by the project

Location of training session	Number of schools attended	Participants		Total
		Male	Female	
High schools	20	71	75	146
Colleges/universities	8	52	45	97

As part of its support to MOH at the national level, the project actively participated in the immunization communication TWG. Based on the performance and human resource structures of regions, the communication TWG identified two regions that needed high-level advocacy meetings with key regional-level stakeholders, decision-makers, and partners to support the May 2023 COVID-19 vaccination campaign and its integration with RI (specifically HPV vaccination) and PHC. The project joined the MOH during these high-level advocacy meetings conducted in South West Ethiopia (SWE) prior to the campaign in April 2023 and in Somali regions just after the end of the campaign in May 2023. The project provided technical support to the MOH in preparation for the meetings, attending and co-facilitating the sessions and ensuring the identification of action points at the end of the advocacy meetings. During the meeting in SWE, the project shared lessons learned from the December 2022 vaccination campaign, including the importance of integrating COVID-19 vaccination with RI. In the Somali region, the focus was on reviewing the progress and learnings from the campaign in May 2023 and advocating for continued provision of COVID-19 vaccination through integration into the RI system.



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Adapting and Strengthening Health System Management

COVID-19 Vaccination Coordination, Microplanning, and Data Review

To strengthen national-level COVID-19 vaccination planning and coordination, the project engaged with the MOH EPI team to provide technical assistance for the planning, implementation, and evaluation of nationwide vaccination campaigns. The project also worked closely with AACAHB and the three project-supported sub-cities in Addis Ababa to improve microplanning processes and capacity.

Microplanning is the process of developing a detailed work plan to reach communities with vaccination, especially identifying priority and underserved communities and reducing any barriers to access. It entails a set of decision-making steps and tools that are used to define the activities, resources, timing, and location for vaccination as well as a monitoring plan. The project supported the three sub-cities to develop microplans for 22 health facilities in advance of the December 2022 measles campaign, which integrated COVID-19 vaccines, and the May 2023 COVID-19 vaccination campaign, which integrated HPV vaccination and other PHC services, to better reach priority populations. This support from the project enhanced the ability of the sub-cities to set and revise targets and forecast vaccine and human/logistic resource needs for each vaccination team. The project supported sub-cities to use an Excel-based microplanning template provided by MOH to identify their targets and the necessary technical support for the development of bottom-up microplanning (starting with the health facility) relevant to their settings.

Within Addis Ababa, the project supported the AACAHB and the three sub-cities to plan and conduct post-campaign review meetings following the integrated campaigns. These meetings reviewed the campaigns' overall impact and effectiveness, enabled health officers and key stakeholders to assess the coverage and reach of the vaccination campaign, and identified gaps or areas that required improvement. This information helped in understanding the extent to which the target population had been reached and vaccinated, enabling better planning for future campaigns and allocation of resources. Support provided by the project in the review meetings included managing and analyzing data, preparing materials, and participating in discussions about lessons learned to

inform improvements for upcoming campaigns. Although Ethiopia has substantially increased COVID-19 vaccination coverage through campaigns, a key takeaway from the review meetings following the May 2023 campaign was the need to continue integrating COVID-19 vaccination with RI and PHC services to enable access to COVID-19 vaccination on a continual basis.



Strengthening the Health Workforce



Supportive Supervision and Trainings

To address health workers' hesitation and lack of information about COVID-19 vaccines, the project organized COVID-19 vaccination demand generation and IPC training for staff and health workers in Addis Ababa. The project conducted a training of trainers (TOT) for sub-city health officers, which focused on increasing knowledge surrounding COVID-19 and vaccination. With the support of the project, the sub-city health officers who attended the TOT then facilitated cascade training for health workers in the three project-supported sub-cities in November 2022. These trainings were designed to improve health workers' communication skills and approaches to increasing COVID-19 vaccination acceptance and confidence among priority populations.

The project conducted pre- and post-assessments to understand and identify training gaps among the participants, including communication skills, facilitation skills for community dialogues, and basic knowledge of the COVID-19 disease and how vaccines work. The project customized the training manual and community dialogue facilitation guide were created, along with community dialogue action plans for each project-supported sub-city.

The project collaborated closely with the AACAHB and sub-city health offices to encourage integration of COVID-19 vaccination, accurate data recording and reporting, and timely feedback through supportive supervision visits at health centers and vaccination posts in the three project-supported sub-cities during the campaigns.



The project conducted **172 supportive supervision sessions** across **45 health facilities** and **temporary vaccination sites**.

Throughout the campaigns, project staff supervised vaccination teams, supported sub-cities in daily data analysis, and provided feedback to each vaccination team.

The project provided day-to-day technical support to the sub-city health offices, including supporting revitalization and strengthening of the sub-city TWGs for COVID-19 and RI, extracting and analyzing vaccination data from the District Health Information Software 2 (DHIS2), attending review meetings, and providing feedback to the health facilities. Project staff identified health facilities in need of assistance based on the vaccination data from the DHIS2 and conducted supportive supervision visits to catalog supply stock, observe data management practices, identify implementation gaps and challenges, and build health workers' capacity in planning and forecasting.

The project provided technical assistance to the MOH to update the Immunization in Practice manual, a training manual used nationwide to train health care workers. The revised manual includes information about COVID-19 vaccination and incorporates learning from the project.

Lessons Learned



Tailoring SBC and stakeholder engagement to adapt messaging builds trust and increases vaccine uptake.

- A multipronged community-based SBC approach helped increase demand for COVID-19 vaccines for residents in urban areas.
- One-to-one and one-to-small group discussions (such as community dialogues) were able to address vaccine hesitancy and bring positive intention and attitude toward COVID-19 vaccines.
- Coordination meetings contributed to creating strong inter-sectoral collaboration to vaccinate industrial park workers, a priority population.



Improving access is a critical component to vaccination uptake.

- Holding vaccination sessions during early mornings or evenings, hosting mobile sessions at workplaces, and conducting campaigns at schools are all ways to reach under-vaccinated populations in ways that are easily accessible to them.
- Demand creation activities should be accompanied by concurrently improving access to vaccination services. When vaccination services were made available immediately after community dialogues through temporary mobile sessions, the uptake of COVID-19 vaccines was high.



Reflecting on and adapting activities help to strengthen service offerings.

- During the COVID-19 integrated measles campaign in December 2022, the project applied an adaptive learning mindset to make real-time improvements to service delivery.

- Observations made during supportive supervision visits were crucial in identifying workflow gaps.
- Successful integration requires a well-defined pathway for clients to access multiple services at the vaccination site.
- Incorporating healthcare worker and mobilizer training during supportive supervision to improve adoption of the modified client flow during the integrated measles campaign is essential for effective implementation.
- Daily debrief meetings reviewing data and presentations of successes and lessons learned facilitated timely action and rapid scale-up of the modified client flow by all health facilities and vaccination posts.



Integrating services is an important strategy to continue vaccination uptake.

- Collaboration and coordination among partners, public, and the private sector is essential to improving access to vaccination.
- Successful integration requires a well-defined and organized pathway for clients to access multiple services during the same health center visit.
- Strong and continual community engagement and demand generation activities are important to promote COVID-19 vaccination at PHC and RI services.
- Capacity building of health workers on COVID-19 and RI/PHC protocols is vital to the successful integration of COVID-19 and RI.

A Way Forward

In Ethiopia, the project collaborated closely with the MOH and the AACAHB to enhance COVID-19 vaccine uptake through increased demand and improved service delivery. By providing strategic technical support at both the national and sub-city levels, the project strengthened planning and coordination platforms, promoted evidence-based approaches, and facilitated effective monitoring and evaluation of the program. The project's targeted assistance to the sub-cities of Lemi Kura, Bole, and Nifas Silk-Lafto in Addis Ababa addressed low vaccination uptake and prioritized underserved populations, contributing to a more impactful approach to increasing COVID-19 vaccination coverage.

Tailored SBC strategies, including stakeholder engagement and adapted messaging, have proven effective in building trust and increasing vaccine acceptance. Community-

based SBC approaches, such as community dialogues, successfully addressed vaccine hesitancy and fostered positive attitudes toward COVID-19 vaccination. Additionally, improving access to vaccination services through convenient timing, mobile sessions, and campaigns at schools facilitated reaching under-vaccinated populations. Reflecting on activities and adapting service offerings based on timely data review, conducting supportive supervision visits, and training health care workers have all played vital roles in strengthening service delivery and laid the groundwork for successful approaches to adapt as the MOH seeks to integrate COVID-19 vaccines into RI and PHC services in the future.

Readers can find additional information about MOMENTUM Routine Immunization Transformation and Equity's work at the following website: <https://usaidmomentum.org/>





MOMENTUM Routine Immunization Transformation and Equity Ethiopia

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