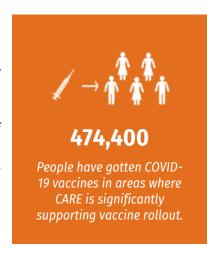




How Bangladesh Is Getting Vaccines to the Last Mile

Bangladesh has been one of the fastest countries receiving COVAX support to scale up vaccines, delivering more than 221 million vaccines by March 14, 2022. 54% of Bangladesh's population is fully vaccinated, and another 22% have received at least one dose. Bangladesh is on track to meet its goal of 70% of the population fully vaccinated by September 2022.

Close coordination across multiple actors—from the Government of Bangladesh to INGOs like CARE to local health entrepreneurs—have been one of the keys to success. Working closely with the government-led National Vaccination and Deployment Plan and innovating when there have been gaps and challenges have helped achieve this success. These strategies continue to make sure that vaccines reach the people who need them most.



Closing gaps at the last mile

Go where it's hardest to reach people. CARE prioritized working in areas that struggled to ensure 100% online registration, and planned support with national and local health actors. In June 2021, the government of Bangladesh asked CARE to focus on Khulna district, where vaccination rates were the second worst in the country, only 7%. One area included Dakhin Bedkashi Union in Khulna—one of the hardest to reach remote coastal geographic areas—more than 100 km away from Khulna district where planning and health operations are based. Since 2007, cyclones Sidr and Ayla and continuous flooding and climate impacts severely damaged access to health care, agriculture, sanitation, education, communication, and other services. Online registration status was only 24% when CARE started activities.

Fill gaps in the digital system. CARE saw that one of the barriers to vaccination was that most people did not have effective ways to register for vaccines online—either they had no smart phones or no access to the internet. With CARE training and support, 22 Union Facilitator helped 83,105 people (44,295 women) in the Khulna district register for vaccines who could not have registered without help. By September 2021, vaccination rates in this Khulna had jumped from 7% to 36%.

This is an important strategy to scale—on February 26th, the government vaccinated 10 million people in a single day of mobile vaccinations. For that campaign—based on the success in Khulna—the government waived online registration requirements. That saves time and human resources. It also makes vaccinations more accessible, especially for the 45,000 12-18 year-olds who do not have the required paperwork for online registration. Ensuring that all **the hard-copy data makes it into national vaccine tracking systems** and ensuring that people can get their vaccine certificates requires support from CARE and other partners. Right now, the government has no additional people assigned to ensure that this data makes it into the national system—a gap CARE is helping to fill to make sure the data is updated as quickly as possible to inform new vaccination strategies.

Support and pay health workers. CARE worked with 22 health volunteers in Khulna, each of whom receives a monthly stipend of 32,000 BDT (\$373 USD). These Union Facilitators usually work 8 hours a day, 5 days a week, although in emergency situations they may work special vaccination days. They also often work non-traditional hours to ensure that they are available at convenient hours for community members. They also get uniforms and a monthly allowance of 750 BDT (\$8.73 USD) to pay for mobile phone credit and internet access.

Get people ready to accept vaccines. In addition to helping people register for vaccines, health workers conducted 33,207 home visits to promote COVDI-19 awareness, reduce misconception, and explain the importance of vaccine registration and vaccination. Together, these visits reached 1,17,660 people (including 71,726 women) during last six months. Through These household visits also offered another opportunity to register people for vaccines on the spot, and follow-up by taking registered people to the vaccination center to get their shots.

Provide training at multiple levels. The CARE staff hosted 52 training sessions for 1,580 participants between July and December 2021. That included 650 governments frontline staff, such as Health Inspectors, Assistant Health Inspector, Health Assistant and Community Health Care Providers. It also included 900 Multi—purpose Health Volunteers that the government selects to support communities and 30 district and sub-district level health managers and statisticians. Training costs 750 BDT (\$8.73) per member. The government not only helped connect to the relevant health workers, it also provided training venues and multimedia support free of cost.



The trainings covered frontline health services—like administering the vaccine and understanding different brands of vaccines. It also included trainings on how to help someone register for a vaccination, build community confidence in vaccines, and how to supervise vaccination days.

Partner with the private sector

Get vaccines into garment factories. Through our longstanding work with <u>garment workers</u> and <u>garment factories</u>, CARE noticed that garment workers couldn't leave work to get vaccines, which meant they weren't getting vaccinated at all. Vaccinations were only available at health centers during traditional business hours, and garment workers could not afford to lose a day's wages to get vaccinated. CARE connected the government to the garment factory owners to extend vaccine training to healthcare staff working at garment factories –and women got vaccines without taking time off.

CARE was also able to leverage existing relationships with the garment factories, private sector and the government. Part of why this worked was because CARE could connect to buyers in the garment supply chain who asked the factories they buy from to help ensure workers could get vaccinated. Now other garment factories are copying this model because it worked so well.

Support women entrepreneurs. CARE Bangladesh developed a sustainable private-public approach to develop and train skilled birth attendants from remote, underserved rural districts. These birth attendants built their own businesses, called Skilled Health Entrepreneurs (SHEs). Integrating 410 SHEs into health networks and systems since their inception in 2013, CARE SHEs have reached almost a million patients. When COVID-19 hit, even though health facilities were required to stay open, movement restrictions due to lockdown together with fear of contracting the disease, hindered health-seeking behaviors at static health facilities. Despite pressure to stay home from their families and their own concerns, over 300 SHEs not only continued to maternal and child health services but also engaged in COVID-19 risk communication and community engagement and awareness raising on mitigation practices such as mask use, hand washing and social distancing. Furthermore, SHEs established a functional system for identification and referral of COVID-19 cases. Besides helping extend the health system to cover routine health care and COVID-19 care, 100 SHEs got training as vaccinators to get COVID-19 vaccines to the last mile, either as vaccinators themselves or as other supporters on mobile vaccination days and in government vaccination efforts.

Authors

This brief was written by Dr. Ikhtiar Uddin Khandaker, SM Rezaul Islam, Emily Janoch, and Shefa Sikder. The information in this brief is up to date as of March 21, 2022. Further updates will be made as more data becomes available.