Title: Senegal health systems double COVID-19 vaccination rate in Kaffrine district through systems thinking, localized solutions, and human-centered design.

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The Senegal Building a Resilient Health System (BRHS) Project is being implemented by Cheiron International

Context: Senegal launched its COVID-19 vaccination campaign in February 2021. One year later, vaccination coverage had been lagging behind the set targets. However, a night-time vaccination strategy showed promising results. The main reason for the low coverage was due to a combination of supply and demand factors, including misunderstanding about vaccines among the general population and health workers, among others. The dearth of accurate information about the value and effectiveness of vaccines, the cost of travel, and the fear of health personnel for protection, even when resources were available, were significant challenges.

At the request of USAID Senegal, the Building a Resilient Health System activity (BRHS) initiated and organized a COVID-19 vaccine acceleration initiative, which consisted of a one-month campaign to accelerate vaccination in 9 regions of Senegal through a result-based financing (RBF) mechanism. The Kaffrine district was one of the pilot regions. BRHS worked with local health authorities, both political and medical, community leaders and women’s groups, during which all stakeholders were involved in the planning process.

Activity Description: The preparation phase of the vaccination campaign in Kaffrine began with a two-day orientation meeting with local health authorities. The planning process included small groups representing the supply side of the health systems (district health authorities, technical staff), the demand side (local stakeholders, community leaders), and the BRHS technical team. The goal was to identify the context-specific drivers of the supply and demand side of a COVID-19 vaccination system were identified, including supply barriers and health system challenges.

Barriers: Barriers included the vulnerabilities of the context-specific drivers of the supply and demand sides of the health systems and the populations. The most important barriers were:
- Limited access to health facilities
- Limited travel and transport infrastructure
- Lack of vaccine coverage among vulnerable populations
- Limited awareness of the importance of vaccination

Solutions: The BRHS team and local stakeholders designed a comprehensive strategy to increase vaccination coverage. The strategy included:
- Mobilization of the community
- Use of mobile vaccination teams
- Integration of vaccination during routine health care visits
- Use of traditional media and community leaders

Evidence: Kaffrine district reached its initial vaccination target by 127% (15,687 people vaccinated in one month compared to a target of 12,749 people), allowing Kaffrine to increase its full vaccination coverage (a 2-dose series, depending on the vaccine from 1 to 10 and 10 to 21) by 15%. This was achieved by targeting adults over 18 (COVID-19 vaccine eligible population) who are not the targets of EPI.

Challenges: Several challenges were encountered:
- The number of health personnel available to conduct night vaccinations was limited, as healthcare facilities were closed during the night.
- Barriers to vaccination included misinformation about the seriousness of COVID-19, the population at risk and side effects of the vaccines; lack of integration of vaccination during routine health care visits in facilities, explained by the opening hours of health facilities and long distances to a facility limit their equitable access to care.

Facilitators: Several factors contributed to the success of the night vaccination strategy:
- The leadership of the district health authorities and the community leaders.
- The use of mobile vaccination teams.
- The integration of vaccination during routine health care visits.
- The use of traditional media and community leaders.

Lessons Learned: Several lessons can be drawn from this experience that can benefit Senegal, COVID-19 programs, and other similar settings.
- The importance of community engagement in the design of the immunization campaign.
- The importance of mobilizing local communities to inform target populations about the vaccination campaign and the benefits of vaccination.
- The importance of providing support (logistical and financial) before and during the campaign.
- The importance of mobilization of the community and informing them of the night vaccination sessions and even helping with the logistics.
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