

Webinar BriefMarch 30, 2021
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WEBi: PH-13 •

Increasing Vaccine Demand and Uptake During The COVID-19 Vaccine Infodemic

Introduction

During the past year, the world has faced the emergence of the COVID-19 disease pandemic. Like other pandemics in history, this pandemic resulted in the disruption of the national and global social and economic norms. However, unlike other pandemics in history, the COVID-19 pandemic has emerged with an additional burden. During a time like no other, people are excessively relying on the internet and media to stay informed and connected. Media and social networks create an environment for sharing information, thoughts, and feelings.

During disease outbreaks, communities experience a massive flow of information or infodemics. The World Health Organization (WHO) defines an infodemic as “the over-abundance of information – some accurate, some not—that spreads alongside an epidemic”. Due to the uncertainty that results during disease outbreaks, people become more susceptible to the spread of false information. The COVID-19 pandemic has created a pool of misinformation spreading rapidly across the media and social networks. The rapid spread of unverified information on media triggers harm by building confusion and drowning out accurate health information.

About EMPHNET

EMPHNET is a regional network that was founded in 2009 with the focus on strengthening Public Health Systems in the Eastern Mediterranean Region (EMR). EMPHNET works in partnership with Ministries of Health, non-government organizations, international agencies, private sector, and other public health institutions in the region and globally to promote public health and applied epidemiology. In 2015, EMPHNET created Global Health Development (GHD) as a regional initiative to advance its work in the EMR and support countries strengthen their health systems to respond to public health challenges and threats.

It can cause a change in behavior, amplification of panic and the use of unproven and harmful treatments. It can also form negative attitudes to vaccination, and consequently increases the level of vaccine hesitancy among vulnerable populations.

Tackling the infodemic during the COVID-19 pandemic requires the application of effective and actionable approaches that communities, health institutions and authorities can take to promote the flow of accurate health information and mitigate the harm that rumors and misinformation can cause. Efforts must be joined together to increase the demand for vaccine uptake and facilitate effective vaccine rollout plans.

Webinar Specifics

The rapid spread of unverified information in the media triggers harm by building confusion and drowning out accurate health information. It can also cause a change in behavior, amplification of panic, and the use of unproven and harmful treatments. Furthermore, it can also lead to negative attitudes to vaccination, and consequently, an increase the level of vaccine hesitancy among vulnerable populations.

To discuss these issues further, EMPHNET held its thirteenth webinar within the EMPHNET WEBi Series on Tuesday March 30, 2021. Titled “Increasing Vaccine Demand and Uptake During the COVID-19 Vaccine Infodemic.”, to tackled the causes and effects of the infodemic witnessed during the COVID-19 pandemic.

Webinar Objectives

This Webinar was conducted with the following focus:

- Exchange knowledge, best practices, and lessons learned from global and regional infodemic trends and approaches.
- To share a real country experience in tackling the COVID-19 infodemic and discuss what have been seen or tried to address misinformation in this country.
- To discuss and propose actionable approaches and strategies to address the COVID-19 infodemic and misinformation.
- To discuss building resilience against misinformation in health systems and the public using available different resources.

Webinar Speakers

The Webinar hosted the following expert speakers:

Mr. AbdelHalim Abdallah, Crisis Communications Officer for the World Health Organization (WHO) Regional Office for Africa and coordinator of the Africa Infodemic Response Alliance (AIRA).

Dr. Saad B. Omer, Director of the Yale Institute for Global Health, and a Professor of Medicine and Epidemiology at Yale University, Schools of Medicine and Public Health.

Dr. Niaz Muhammad, Director General for Health, KP, Pakistan.

The webinar was facilitated by:

Prof. Hyam Bashour, Professor of Epidemiology and Community Health at the Al Sham Private University and Public Health Expert.

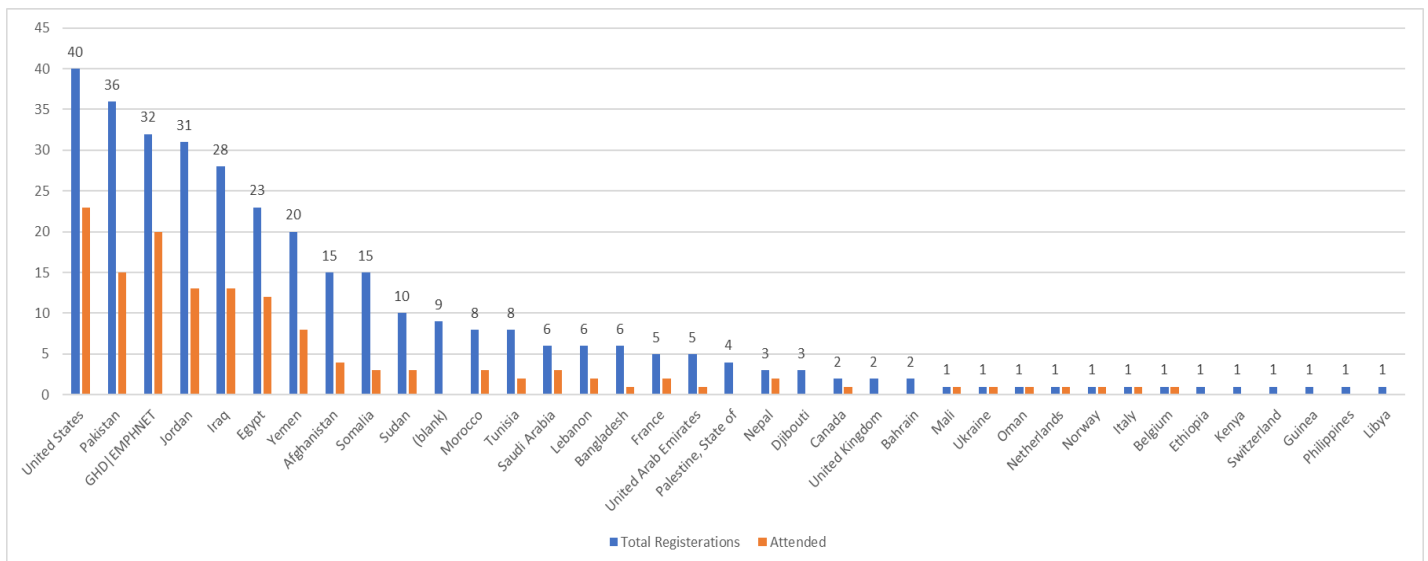
Mr. Atsuyoshi Ishizumi, fellow on the Demand for Immunization Team at US Centers for Disease Control and Prevention.

Webinar Attendees

Registration was open one week prior to the webinar and was announced through EMPHNET’s communication and networking channels. In total, 334 registered to attend, 41% (n= 138) attended the webinar. The following graph displays the distribution of registered and attendees by countries.

Overview of Presentations

The webinar was conducted in English and included three presentations (15 minutes each). The first presentation was titled “The Emergence of the COVID-19 infodemic and its effect on vaccine demand and uptake” and was presented by Abdelhalim Abdullah, with focus on the African region. It was followed by a presentation by Dr. Saad Omer titled “Building resilience against the COVID-19 infodemic”. The last presentation was a case study from Pakistan and was jointly presented by Dr. Ikramullah Khan followed by Dr. Niaz Muhammad. The presentations covered important areas on how the current COVID-19 infodemic affects vaccine uptake and demonstrated how different regions and countries respond to such infodemic, and ways build resilience to increase vaccine demand and uptake, with a focus on learned lessons from the region. Relevant questions and comments received from the attendees were answered by the panelists. Following is a brief of these presentations in the order that they



were presented. The webinar started and ended on scheduled time, with a duration of 1.5 hours.

Webinar Introduction
Prof. Hyam Bashour

Dr. Hyam Bashour welcomed the participants and followed that with a brief on the global COVID-19 situation, and briefly introduced the webinar. She defined the term infodemic and described how infodemics can lead to the spread of misinformation, and the masking of true information, especially about the COVID-19 vaccine. She talked about how the COVID-19 infodemic is an important topic to tackle in this webinar, as it leads to various negative behaviors towards vaccination, thus leading to expansion of disease outbreaks.

Dr. Bashour introduced the first webinar speaker and handed over to him to start his presentation.

The Emergence of the COVID-19 infodemic and its effect on vaccine demand and uptake: Africa Infodemic Response Alliance

Mr. Abdelhalim Abdallah

Mr. Abdelhalim's presentation aimed to give an overview on the work of the Africa Infodemic Response Alliance, which is a network of hosted by WHO, among other partners to counter misinformation and information gaps. He presented the work of this alliance in preventing the harmful effects of infodemics and misinformation and their effects and challenges on vaccine demand and uptake. Mr. Abdelhalim talked about the importance of joining efforts to respond to the COVID-19 infodemic and in empowering media partners to share, exchange and amplify their experiences and life-saving information to combat the spread of rumors, misinformation and disinformation.

Mr. Abdelhalim moved to talk about debunking misinformation and introduced the UNICEF framework that was developed for this topic, and the efforts made to increase the social media coverage in the spread of correct information in collaboration with various partners.

Building Resilience Against the COVID-19 pandemic

Dr. Saad Omer

Dr. Saad Omer started his presentation by introducing the vaccine hesitancy continuum and explaining the determinants of vaccine hesitancy. Then he introduced the "Vaccine Misinformation Management Field Guide", which was developed by Yale Institute of Global Health, with other partners including UNICEF and First Draft. He went through the key components of the field guide, starting with terminology of information, misinformation, disinformation and rumors, the steps of misinformation management: preparation, listening, understanding, and engaging.

Through this framework, Dr. Omer provided strategic actionable insights on managing infodemics and debunking misinformation, linking the spread of misinformation with human values and beliefs across different communities. The key message of the section was to give actionable insights to engage and empower communities to be able to seek correct information from reliable sources.

Dr. Omer then introduced the many efforts that were done to combat infodemics and increasing demand and uptake of vaccines. These efforts included the "Vaccine Messaging Guide" that was developed by Yale Institute of Global Health, in collaboration with Facebook and other partners. This guide highlights how information can be "sticky" and the role of effective communication in debunking infodemics. Additionally, WHO's "Behavioral Considerations for Acceptance and uptake of COVID-19 vaccines" was introduced, highlighting the actions countries can take for better vaccine uptake, these include creating an enabling environment, harnessing social influences and increasing motivation.

Learning from Country infodemic experiences in responding to infodemics: Pakistan case study

Dr. Ikramullah Khan and Dr. Niaz Muhammad

Dr. Ikramullah Khan, the director of Public Health and EPI in Khyber Pakhtunkhwa (KP), led this session. He started by describing how KP responded to the emergence of COVID-19, initially in Wuhan, by holding meetings of the public health committee, screening for cases at the borders, and developing a provincial action plan for detection, response, lab

testing, and developing guidelines for treatment and management of confirmed cases. KP developed a universal access hotline number, which gives people who dial it all information related to COVID-19, including information related to testing and lab services, and also information related to mental health and psychosocial support services, which were established as a response to the pandemic. Dr. Ikramullah Khan then gave some insights about the number of cases in Pakistan and KP. As the pandemic progressed, KP established labs for testing. He highlighted the importance of coordination and partnerships with different departments for detection and response. In KP, an example was made on a core group that was formed with different stakeholders. Dr. Ikramullah then talked about the drawbacks of the mass information and misinformation circulating the social media among the population of KP. In response, the public health department of KP partnered with the communications team to amplify correct messaging across different media, social media, and TV channels. The process involved celebrities and community leaders visiting hospitals and lockdown sites to circulate messages about the seriousness of the pandemic and emphasizing on the high-risk groups who are mostly affected by the disease. They also directed their messages to prevent mistrust of the governments. Resources were utilized to establish forums for health care workers and partners to spread messages across different media sources.

Discussion

Dr. Hyam Bashour and Mr. Atsuyoshi Ishizumi facilitated the question and answer at the end of each session. Below are some selected questions that were answered by relevant speakers.

Q1. What are the major challenges you are currently facing in managing the COVID-19 infodemic in general, and vaccine uptake in particular?

Answer by Abdelhalim Abdallah

Antivaccine content are seen from different parts of the world, for that they try to anticipate the discourse and try as much as possible to be ahead of them. Quantifying the volume of misinformation, which can be monitored using analysis and social listening tools, understanding the share of voice and trusted online media influencers, and measuring their media reach (conversation volumes).

Q2. in your infodemic management, are you digging deep to understand motives behind these infodemics? if so, does this affect infodemic management and how?

Answer by Abdelhalim Abdallah

There is lack of research on this topic, therefore they are collaborating with research agencies to initiate reports and research.

developed, including SOPs for tourism during the tourism season.

When the vaccine was released to Pakistan, priority groups, i.e., health care workers were the first to get vaccinated, followed by at risk and older people.

Vaccination centers were opened.

Dr. Niaz Muhammad provided information about the vaccination strategy for KP and their progress so far.

Closing remarks and key messages

Dr. Hyam Bashour and Mr. Atsuyoshi Ishizumi

Dr. Hyam Bashour thanked the esteemed speakers, facilitators, and audience. Mr. Atsuyoshi also thanked the panelists and audience, and wrapped up this webinar by the following key messages:

- Infodemics are multifaceted, in terms of typologies of misinformation and disinformation.

- The infodemics are affected by social behaviors of people and their experiences of past events that are related to vaccines.

- Because of the complex nature of infodemics, this webinar highlighted that infodemic management is a whole of society and whole of government approach.

- Infodemics need to involve research, advocacy, coordination, and country support.

Kindly, click [this link](#) to listen to the recorded webinar

Q3. what are challenges in dealing with demand while supply is low or in some countries vaccine is still not available?

Answer by Abdelhalim Abdallah

Priority groups are encouraged to sign up to take the vaccine. Demand creation activities are focusing on those priority groups, i.e healthcare workers.

Q4. What's the reason behind high level of vaccine hesitancy? lack of information?

Answer by Dr. Saad Omer

Vaccine hesitancy is high in many countries, but declining in other countries. Reasons are underlying concerns about vaccines, and because the COVID-19 vaccines are new, that vaccination campaigns are affected by misinformation, and due to the potential side effects of vaccines.

Q5. How we encourage applying misinformation risk evaluation matrix on the ground?

Answer by Dr. Saad Omer

Answers and details are in the field guide, for example, using social listening tools.

Q6. In war zone areas, how does infodemic engage people?

Answer by Dr. Saad Omer

Information pathways are disrupted in populations of conflict zones, general channels are sometimes old school, such as person to person communication, or they use other channels such as WhatsApp etc. Therefore, it is important to identify the mode of communication used by these populations. As a response, it is important to rely on consistent communication channels and not on disrupted channels.

Q7. When it comes to engaging and empowering communities, do you think that we have enough behavioral scientists to respond to the COVID-19 pandemic?

Answer by Dr. Saad Omer

Some skills and competencies must be part of people and advocates responding to the pandemic. These skills can be disseminated and deployed as basic skill sets for all people responding to the pandemic, not just social scientists.

Q8. Do you think the Covid-19 vaccination will support the polio eradication or disturbing it?

Answer by Dr. Ikramullah Khan

A polio campaign already started in KP with a plan to vaccinate 6.4m children under 5. During this campaign, 7000 were vaccinated for COVID-19 so far, 1.3m children were vaccinated for polio, so both vaccination processes are ongoing and going side by side.

Q9. How do you see synergies between demand creation for COVID19 vaccine and the demand for Polio vaccine in Khyber Pokhtunkhwa?

Answer by Dr. Ikramullah Khan

Vaccination for COVID-19 started for HCW but very slowly, people were reluctant. They were observing for side effects among those vaccinated. Fortunately, only minor side effects were reported in KP. This caused an increase in the number of people seeking the vaccine.

Similarly, for the polio vaccine, number of people refusing the vaccine are declining each year.

Q10. Was the mental health status affected by the pandemic?

Answer by Dr. Niaz Muhammad

Mental health services were present before the pandemic. During the pandemic, KP MOH partnered with UNICEF to support and expand these services. This was a in response to fear by people from getting infected and fear from infected people. Clinical psychologists were assigned to do outreach and are also present at secondary health facilities. Other HCWs were also trained on MH.



EMPHNET
The Eastern Mediterranean
Public Health Network

EMPHNET WEBi Series

Increasing Vaccine Demand and Uptake During the COVID-19 Vaccine Infodemic

Tuesday, March 30, 2021

17:00 to 18:30, Jordan Local Time (UTC+2)

Speakers



Dr. Saad Omer

Director of the Yale Institute for Global Health, and Professor of Medicine and Epidemiology at Yale University, Schools of Medicine and Public Health.



Dr. Niaz Muhammad

Director General Health Services, Khyber Pakhtunkhwa, Pakistan.



Mr. AbdelHalim AbdAllah

Crisis Communications Officer for the World Health Organization (WHO) Regional Office for Africa.

Facilitators



Prof. Hyam Nicola Bashour

Professor of Epidemiology and Community Health at Al Sham Private University and Public Health Expert.



Mr. Atsuyoshi Ishizumi

Research Fellow at US Centers for Disease Control and Prevention (CDC).

The webinar will focus on

1. Exchanging knowledge, best practices, and lessons learned from global and regional Infodemic trends and approaches.
2. Sharing a real country experience in tackling the COVID-19 Infodemic.
3. Proposing actionable approaches and strategies to address the COVID-19 infodemic and misinformation.
4. Building resilience against misinformation in health systems and the public using available different resources.



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Biographies of Guest Speakers and Facilitator

AbdelHalim AbdAllah is the Crisis Communications Officer for the World Health Organization (WHO) Regional Office for Africa. He is the coordinator of the Africa Infodemic Response Alliance (AIRA) and its social media arm Viral Facts Africa. He is also the co-chair of the Risk Communications and Infodemics Pillar of WHO's COVID-19 Vaccine Demand and Readiness Task Force (ACREDT).

Saad B. Omer is the Director of the Yale Institute for Global Health, and a Professor of Medicine and Epidemiology at Yale University, Schools of Medicine and Public Health. He has conducted studies in the United States, Guatemala, Kenya, Uganda, Ethiopia, India, Pakistan, Bangladesh, and South Africa. Dr Omer's research portfolio includes epidemiology of respiratory viruses such as influenza, RSV, and - more recently - SARS-Cov-2 (COVID-19); clinical trials to estimate efficacy of maternal and/or infant influenza, pertussis, polio, measles and pneumococcal vaccines; and trials to evaluate drug regimens to reduce mother-to-child transmission of HIV. He has published over 330 papers in peer reviewed journals and has mentored over 100 junior faculty, clinical, and research post-doctoral fellows and PhD and other graduate students.

Dr. Niaz Muhammad, is the serving Director General for Health, KP. He graduated from Khyber Medical College, Peshawar Pakistan in 1986 and then joined the Department of Health in September 1987 as a Medical officer. He also served as the District Medical Superintendent from 1998 to 2001 in District Head Quarter Hospital, Mansehra. Given his dedication and professionalism he was sent on deputation by the DoH on an international mission for 3 years in MOH of Kingdom of Saudi Arabia. Dr. Muhammad joined as Deputy District Health Officer, Mansehra in 2004 after his return to Pakistan. Later in his career, he was given the charge as Medical Superintendent at District Head Quarter Teaching Hospital Mansehra from 2005 to 2014 and during which he also completed his MPH in 2006. Afterwards, he was deputed as District Health Officer, district Swabi from 2014 to 2020 and worked additionally at BKMC Swabi. Finally, Dr. Muhammad

was promoted to the post of Additional DG Health for a period of 6 months and given his excellent managerial skills and vision for the province and was appointed as the Director General Health Services, Khyber Pakhtunkhwa in June 2020

Dr. Hyam Bashour is a Professor of Epidemiology and Community Health at the Al Sham Private University and Public Health Expert. Professor Bashour graduated as Medical Doctor from Aleppo University in Syria and received her MSc in Community Health and PhD in Epidemiology from London School of Hygiene and Tropical Medicine, UK. She also holds a master's degree in Health Professions Education. Since 1991 she had been working for Damascus University where she chaired the Department of Family and Community Medicine from 2001-2007 and served as a Vice Dean for Scientific Affairs in 2008-2009. Before her early retirement from Damascus University in 2013, she served as a Vice President for Scientific Affairs. Dr Bashour served for six years as a member of the WHO Strategic Advisory Group of Experts on Immunization (SAGE). She is also the Chair of the Regional Verification Commission (RVC) for Measles and Rubella in the Eastern Mediterranean Region of the World Health Organization.

Atsuyoshi Ishizumi is a fellow on the Demand for Immunization Team at US Centers for Disease Control and Prevention. He has been involved in a number of research and implementation projects for improving vaccine confidence and demand globally. Currently, he is supporting an infodemic management project in Indonesia, coordinating behavioral assessments and intervention development in collaboration with in-country partners.