

Fast & Fair Vaccine Response Update August – October 2021



Purpose

CARE's Fast and Fair initiative supports countries to equitably deliver COVID-19 vaccines through four pillars: **Advocate, Facilitate, Protect** and **Mobilize**.

CARE has identified 22* countries (and counting) with strong capacity, partnerships, and readiness to scale

Sub-Saharan Africa

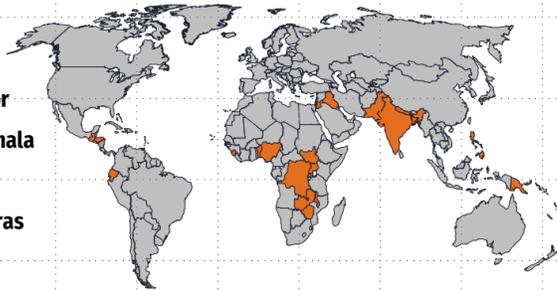
- Benin
- DR Congo
- Nigeria
- Malawi
- Uganda
- South Sudan
- Sierra Leone
- Tanzania
- Zambia
- Zimbabwe

Asia

- Bangladesh
- India
- Philippines
- Pakistan
- Nepal
- Papua New Guinea

LAC

- Ecuador
- Guatemala
- Haiti
- Honduras
- MENA
- Iraq
- Jordan



*Burundi, Cameroon & Rwanda to be added as of November to total 25 countries

Pillars

Advocacy: represents CARE's work to ensure rights-enabling policies that unlock equitable access to vaccines and catalyze structural changes to "build back" more inclusive, accountable and resilient health systems.

Facilitate: represents CARE's support to the government health system and multilateral partners to provide operational support to prepare for and roll-out vaccine delivery.

Protect: represents investments in the capacity and leadership of frontline health workers (70% women) to improve access to vaccination and build a stronger, more resilient health system.

Mobilize: represents CARE's deep engagement with communities to provide safe, accurate information, facilitate dialogue and partner with local leaders and influencers.

Fast & Fair in Action - Country Spotlights

Bangladesh – In June, the Khulna district in the southwestern part of Bangladesh only had a 7% vaccination rate, the second-lowest rate in the country. The Government of Bangladesh asked for CARE's support to improve this rate. By mid-October, Khulna had a 36% vaccination rate, with more than 1 million additional vaccine doses reaching people who need them most. In addition to being a 5 times improvement from July, Khulna's vaccination rate rose to the second highest in the country, after Dhaka—the capital. The results are so impressive that the government of Bangladesh has now asked CARE to support the two neighboring districts—and the team is actively looking for more resources to scale this success.

How did CARE do it? The vaccine registration system is fully online in Bangladesh, and the CARE team helped people who do not have access to smart phones or digital literacy to register online, and to help them follow up and make sure they make it to their vaccination appointments. We hosted education sessions for over 16,000 people (> 60% women) in communities to get people the information they needed to trust vaccines, and organized door-to-door visits for nearly 45,000 people (64% women) to build trust in the vaccines. CARE also supported 650 government health workers (like health inspectors) so they can strengthen vaccine deployment and make sure the system is working. CARE trained 900 volunteers to support vaccine registration and community awareness.

~ Dr. Ikhtiar Uddin Khandaker and Emily Janoch



Vaccine registration in Bangladesh @CARE



Capacity building training in Bangladesh @CARE

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CARE Stats from the CI Humanitarian Update FY22 Q1

of people vaccinated in areas where CARE supports vaccination rollout

Total CARE countries: 126.2M

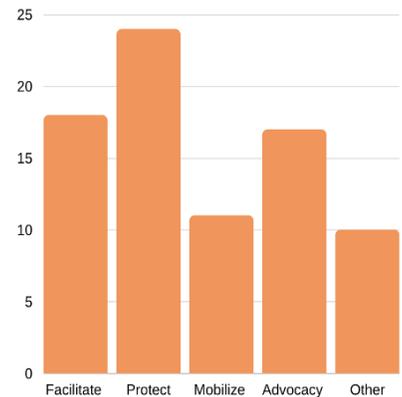
F&F countries: 89.9M

of people reached through mass media or one-way information dissemination

Total CARE countries: 263.3M

F&F countries: 249.6M

of countries implementing vaccine related activities

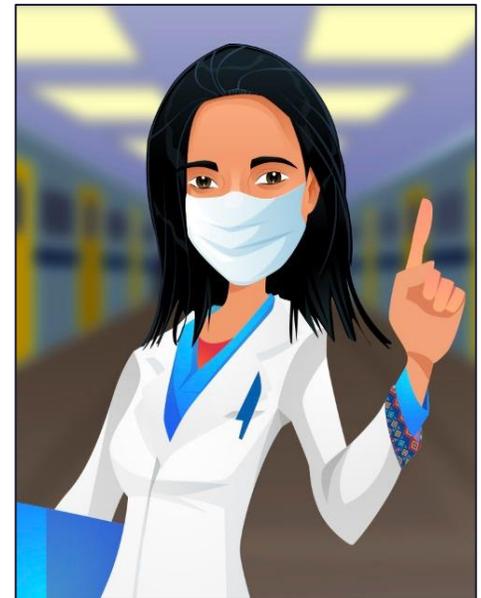


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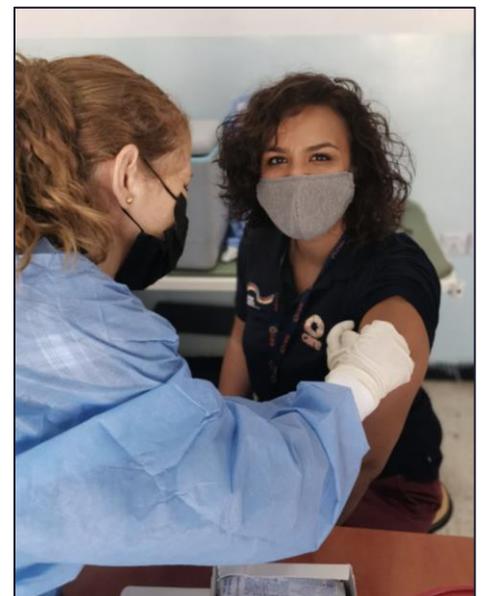
South Sudan – CARE is providing comprehensive support including service provision in coordination with MOH and health cluster to meet needs despite conflict. Vaccinators and community health workers have been doing community mobilization whose strategies have helped promote increased number of vaccinations. Even in the gap when there was one month with no vaccines available, these mobilization sessions helped drive demand and ensure that there were people coming to get vaccines when they became available. As of Sep 2021, more than 28,000 people have been fully vaccinated, 71,414 have received a first dose, including 11,363 health workers. There is high hesitancy about receiving the vaccine, especially among women. Of those who have been vaccinated, 74% of doses gone to men and just 26% to women.

Guatemala – Where the health system is stressed but in place, CARE is bridging cultural and linguistic gaps to make sure marginalized groups, especially women and girls, are comfortable and confident getting vaccinated. For example, CARE has developed an animated video to promote the vaccine in 5 languages (Spanish and 4 Mayan languages). CARE also plans to produce a version of the video in sign language.

Iraq – Iraq is experiencing extreme vaccine hesitancy, possibly driven by lack of trust in a system under strain. CARE Iraq conducted an in-depth assessment of the factors driving hesitancy and discovered that gender gaps as well as mistrust play a major role. *"Women score lower than men on essentially every indicator of knowledge, attitudes, and practices about the COVID-19 vaccine. In particular, 64% of men and 52% of women know where they could get a vaccine. 50% of men and only 30% of women know how to register for a vaccine, and only 10% of them have registered for vaccines."* CARE's work continues to help address these gaps.



CARE Guatemala's videos on the COVID-19 vaccine are available in 5 languages



CARE staff getting vaccinated in Iraq. @CARE

Want more information on CARE's work to support equitable access to COVID-19 vaccines? Check out:

- [Gender Gaps in COVID-19 Vaccines \(CARE analysis\)](#)
- [Who Pays to Deliver Vaccines? CARE's Analysis of WB Funding for COVID-19 Vaccination & Recovery](#)
- [Piloting the Community Score Card approach to support more equitable vaccine rollout in Malawi](#)
- [Global Health Cluster profile on CARE South Sudan](#)
- [CI Humanitarian Update FY22 Q1](#)
- [CARE Fast & Fair Vaccine Delivery Initiative SharePoint site](#)