Applying the caregiver's journey to vaccination



Aarya, 23

- Sudan
- Mother
- **क** Married
- * x1 Child

Aarya is a 23-year-old day mother of one child. She is married and lives with her husbands two brothers, their wives and children and his parents.

VAX APPROVAL LEVEL: 6



PASSIVE SUPPORTER:

Aarya thinks vaccination is a good idea, but will not go out of her way to do it. In order to get her child vaccinated, her husband must approve the vaccination and travel with Aarya. If a health worker comes to the home, the health worker may not enter the home unless she is a female. Aarya thinks vaccination is good, but needs her husband to be present.

IMMUNIZATION NEEDS:

- Convenient access to vaccination
- Vaccinators and mobilizers she can trust
- Her husband's approval and presence



Let's assume you've conducted some primary research and you've landed on the following persona. This persona is a composition of several people you observed and interacted with.

FRUSTRATIONS

- Only 6 hours of power in her village per day
- Her husband has Inconsistent employment
- Lack of Health Services
- Feeling isolated

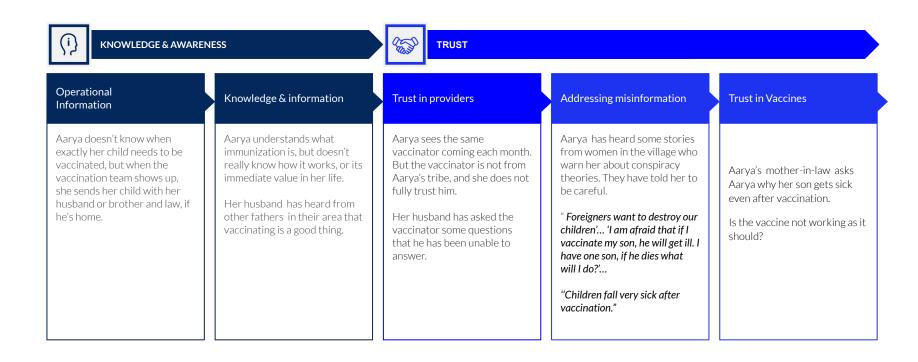
DELIGHTS

Family

♂ GOALS

- To take care of her family and raise her child well
- To give her child opportunities she missed, including being able to attend school

Here's an example of the barriers you found mapped onto Aarya's journey



Here's an example of the barriers you found mapped onto Aarya's journey





PREPARATION



COST & **EFFORT**

Aarva's mother-in-law is adamant that vaccinating is a foreign thing. In her day they had no vaccinations and she turned out fine

It's a good thing her mother-in-law sees the other children in the neighborhood going for vaccinations, so Aarya doesn't have to challenge her directly.

Aarva's child has frequent fevers and coughs. She understands that immunization can help him be healthier in the future, but day by day, she needs medicine to bring her sons fever down and help him stop coughing.

The vaccinator has nothing to offer her except preventive methods. The vaccinator assures her that vaccination will pay off in the long run.

Distance and logistics to the health facility

Having vaccination teams come to Aarya's village once per month makes it much easier to get her child vaccinated

If she had to go out of her way to do it, she probably wouldn't vaccinate. It's about 3 km to the nearest health facility, and the roads are often flooded during the rainy season.

The health facility cannot be reached without a motorbike

Gender Dynamics

The vaccinators are male. which is not helpful for Aarva to communicate with them

They are also not from the area, so Aarva cannot take her son for vaccination alone

Immunization is free

Since the vaccinators started coming to the village once a month, vaccination has become much easier. Aarva is happy about this.

But her son often gets a fever after vaccination days, and Aarva doesn't sleep for several davs in a row.

Here's an example of the barriers you found mapped onto Aarya's journey



POINT OF SERVICE



AFTER SERVICE

Health workers are an appropriate profile

Aarya's husband is at work the next month when the vaccinators arrive, so

Mohamed, Aarya's brother-in-law takes their son.

Her brother-in-law doesn't know anything about the vaccination visit. But he brings some orange booklet with him that Aarya asked him to bring.

Skilled health workers

When Aarya's son comes back home, he's quiet.

Mohamed had to cover his face and look away when Aarya's son was getting vaccinated.

Mohamed doesn't want to take Aarya's son for vaccination again.

Positive reinforcement in the community

No information about side-effects is given to **Mohamed** from the vaccinators. Any scars, swelling, or fevers will be left to Aarya to decipher.

Aarya can hear someone outside the house yelling at **the vaccinator**

'I got my three year old grandchild vaccinated. After the vaccination, he couldn't stand straight'... '*

Next appointment reminder

Aarya doesn't know exactly when she's supposed to vaccinate her son again. As she says:

"Vaccinator comes, that means it's time for the next vaccination ... if the child is ill and we take him to the center, the doctor will tell us if the time is due for vaccination'

The journey begins again





Aarya's journey to vaccination



Knowledge & Awareness

AWARE OF THE VALUE OF



- 10









Preparation

MAKE PLANS TO MOVE FORWARD

WITH GETTING VACCINATED



Vaccination timing (and location) is unpredictable

Vaccination does not have immediate value for child's life

Health workers are not equipped to answer basic questions

Need for repeated doses is not understood

She does not know about potential AEFI

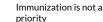


Vaccinator is not local. Aarya is not allowed to communicate with the vaccinator.

Disease and vaccination exist together so she doesn't trust vaccines - complete protection not understood

AEFI misunderstandings contribute to rumours and distrust of vaccines

Vaccine is free and always available





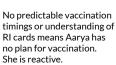
Ease of outreach vaccination helps increase likelihood of vaccination



Visible vaccination in the community helps strengthen social norms and intention

Painful vaccination experience for her son reduces intent

Effort to go to outreach is minimal - but male workers only mean Aarya cannot interact directly with them..





After Service
PERCEIVE VACCINATION EXPERIENCE POSITIVELY &

PLAN ON RETURNING

No clarity about next visit. Neighbours discuss AEFI after vaccinators leave, with nobody to correct misunderstandings



Lack of medicine to address AEFI means vaccination is more costly for her family.









Cost & Effort

TAKE TIME TO TRANSPORT TO

HEALTH FACILITY