

Increase demand and improve community trust among high-risk mobile and migrant populations in Afghanistan through community engagement and interpersonal training for health workers

Project Information

- ◆ Department: Polio and RI
- ◆ Unit: Polio and RI

OBJECTIVES

1. Strengthen community demand for immunization through targeted community engagement and mobilization strategies.
2. Improve trust between high-risk mobile, migrant, IDP, and underserved communities and health workers and immunization services.
3. Strengthen the interpersonal communication (IPC) skills of frontline health workers to effectively address vaccine hesitancy, misinformation, and community concerns.
4. Promote community ownership and participation in immunization activities, particularly among populations that are difficult to reach through routine services.

BENEFICIARIES

EPI and Polio EOC staff at national and subnational levels, with priority given to staff from low-performing and high-

REGIONS OF WORK

Eastern Afghanistan, covering 15 high-risk districts, with a focus on mobile, migrant, IDP, and underserved populations where immunization coverage remains suboptimal and the risk of vaccine-preventable diseases is high.

PROJECT PHASES

This project will have two phases as follows:

Phase 1 – Assessment and Preparation:

Conduct baseline assessments in three selected high-risk districts to understand community knowledge, attitudes, practices, trust levels, immunization uptake, and barriers to vaccination. Develop and contextualize IPC training materials and community engagement approaches in Pashto and Dari and finalize implementation arrangements.

Phase 2 – Implementation and Follow-up:

Implement community engagement and mobilization activities across 15 priority districts, establish community support groups, engage religious and community leaders, disseminate targeted vaccination messages through mobile phones/SMS, and conduct 15 three-day IPC training sessions for frontline health workers. A follow-up assessment will be conducted in the selected districts to measure changes in community trust, immunization demand, and perceptions.

PROJECT DESCRIPTION

EMPHNET, will implement a community-centred intervention to increase immunization demand and strengthen trust among high-risk mobile, migrant, IDP, and underserved populations in Eastern Afghanistan. The project addresses both demand- and supply-side barriers to immunization by strengthening community engagement while improving the interpersonal communication capacity of frontline health workers.

The intervention will begin with a baseline assessment in three selected high-risk districts to assess community knowledge, attitudes, practices, trust levels, immunization coverage, and barriers to accessing vaccination services. Findings will guide the development and adaptation of communication messages and implementation strategies.

Community engagement activities will subsequently be implemented across 15 priority districts in collaboration with religious leaders, community elders, women and youth representatives, and other trusted local influencers. Community dialogues will address vaccine-related myths, misinformation, and concerns, while community support groups will promote sustained demand and local ownership of immunization activities. Targeted SMS messages will also be used to disseminate vaccination information, reminders, and messages promoting routine immunization and vaccine uptake.

In parallel, EMPHNET will strengthen the IPC skills of frontline health workers through 15 three-day training sessions. The training will focus on effective communication, trust-building, addressing vaccine hesitancy and misinformation, cultural sensitivity, and community-centred approaches. Training materials and job aids will be developed in Pashto and Dari to ensure contextual relevance.

The project will use a results-based monitoring framework to track progress at output, outcome, and impact levels. Baseline and follow-up assessments, routine immunization data, program records, community surveys, supervision findings, and service utilization data will be used to measure changes in immunization demand, community trust, communication capacity, and vaccination uptake.

Through these interventions, the project will contribute to improving immunization coverage, strengthening community ownership, and reducing barriers to vaccination among hard-to-reach populations. The initiative will directly support Afghanistan's polio eradication and routine immunization priorities while contributing to broader efforts to reduce vaccine-preventable diseases.

Moreover, GHD will continue the first cohort of training initiated in Year 3, which will involve Workshop 2, 3 and 4 along with 2 field works. Following the completion of this workshop, GHD will commence the second cohort of training. The existing FETP program in Afghanistan will play a vital role in contributing to the PHEP-PEO by providing mentorship and supervision for training activities, particularly during the fieldwork sessions.

Project Start and End Date	08/1/2026 – 07/31/2027
Funded by	Centers for Disease Control and Prevention (CDC)
Collaborators	Afghanistan Ministry of Public Health (MoPH) and Emergency Operations Center (EOC)

Currently . . .

Afghanistan continues to face significant challenges in reaching high-risk mobile and migrant populations with immunization services. Population mobility, limited access to health services, misinformation, cultural and language barriers, and low levels of trust in healthcare providers contribute to vaccine hesitancy, missed opportunities, and low immunization uptake.

The Eastern region remains a priority due to the presence of underserved and mobile populations and the continued risk of vaccine-preventable diseases, including polio. Strengthening community engagement, building trust, and improving the communication skills of frontline health workers are therefore critical to increasing acceptance and uptake of immunization services.

What's next . . .

GHD|EMPHNET will continue implementing the planned community-centred interventions across the 15 priority districts. The project will focus on strengthening community engagement, supporting community groups, engaging religious and community leaders, delivering IPC training to frontline health workers, and using mobile/SMS messaging to improve access to reliable vaccination information.

Monitoring and follow-up assessments will be used to measure changes in community perceptions, trust, vaccination intent, and immunization uptake and to inform adaptive implementation.

OUTCOMES BY NUMBERS



GHD|EMPHNET Information: Global Health Development (GHD) and Eastern Mediterranean Public Health Network (EMPHNET) works at achieving its mission by responding to public health needs with deliberate efforts that allow for health promotion and disease prevention.

- ◆ Abdallah Ben Abbas St, Building No. 42, Amman, Jordan
- ◆ Email: comm@emphnet.net

- ◆ Tel: +962-6-5519962
- ◆ Fax: +962-6-5519963
- ◆ www.emphnet.net