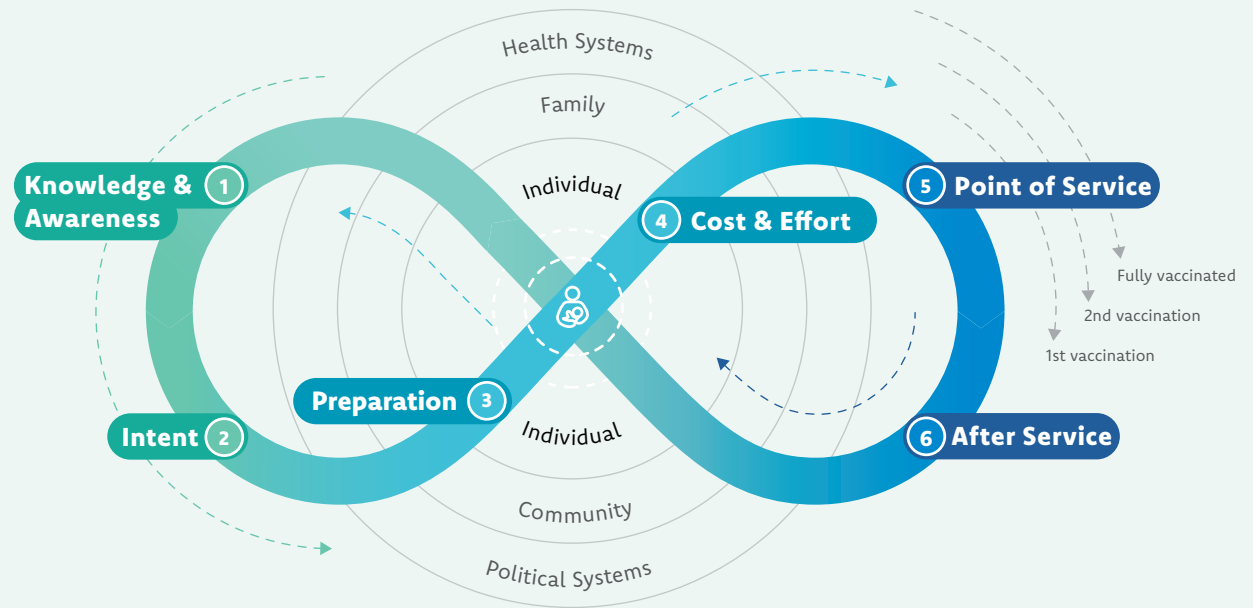


## Journey to Immunization

Using the Journey to Immunization model on this page, think about what areas need the most attention, and what we can learn at each stage.

Reference the Assumption Catalogue to further investigate the questions that need to be answered. While the model follows a caregiver journey to immunization, consider the journey of the health-care provider as well, since both work in equal parts toward the goal of immunization. What must they know and prepare? What cost and efforts must they make to be present both physically and mentally?



### Knowledge and Awareness

Awareness of vaccination, of disease, of service (when/where) and how to get it.

### Intent

Overcoming the gap between intention and behaviour. Caregivers readiness to vaccinate is determined by three things: their attitude towards the specific behaviour, their subjective norms and their perceived behavioural control.

### Preparation

Preparing for vaccination including consideration of the disease/vaccination/service, planning the logistics of accessing services, finding transportation, arranging child care and mitigating opportunity costs.

### Cost and Effort

Cost is not only financial – there is effort to find the time and make the required trade-offs to travel to the point of service. Opportunity, transport, lost income, uncertainty of service, and social and security costs are all part of this step.

### Point of Service

All aspects of the vaccination experience, including client satisfaction, interpersonal communication with health workers, missed opportunities and health center experience. It is also important to remember the health workers's experience, and how that affects their ongoing perceptions and performance.

### After Service

Short-term factors include immediate feedback, understanding the next steps and getting home from the clinic.

Long-term factors include side effects, cues to action, reminders, reinforcement and vaccination as a social norm.

### Surrounding Mental and Social Models

Surrounding every stage are socio-ecological levers that help us understand what rationalization and logic cannot. Consider interwoven levels of influence on each step: subjective/social norms, trust, confidence, social values, community-level political structures, gender dynamic within families, policy within health systems, and community outreach mechanisms/channels.