

# **AEFI MEDIA**

## **COMMUNICATION PROTOCOL**





# AEFI MEDIA COMMUNICATION PROTOCOL

The goal is to make the AEFIs non newsy at district, state and national level.

News on AEFIs should be dealt with carefully at the district level itself so that the issue doesn't grow bigger.

## The protocol is divided into two parts:

1. Crisis communication (When the media calls, what should be done?)
2. Regular communication (When there are no AEFIs, proactive communication)

## Situations for which the protocol is designed

1. When an AEFI has occurred in the field and there are media queries
2. When a cluster of AEFIs have been reported and there are media queries
3. When there is wrong information reaching the media
4. When the wrong message is reaching the community
5. When media reports negatively about AEFIs, Govt. programme

## Reporting of AEFIs in media

- When an AEFI gets reported, the media will look for immediate answers (especially in case of a severe AEFIs like hospitalization or death)
- **CHALLENGE:** AEFI causality assessment takes long and therefore the actual cause cannot be known immediately.
- **SOLUTION:** The media will have to be given immediate but limited response.

## Crisis communication

WHO SHOULD RESPOND	WHAT TO RESPOND	DON'Ts
First respondent: Govt./ Immunization division (identified spokespersons)	Limited information. Immediate response. (templated response)	<b>No comment</b> on causality unless it is finalized
Second respondent: National AEFI committee (as an independent source)	Simplify technical information. Along with Govt. response	<b>No comment</b> on causality unless it is finalized

## Regular communication

1. Proactively reach out the media on benefits of 
2. Proactively reach out to the media with factual information on AEFIs and put the official response on website.
3. Periodic press release (templated) on RI including information on AEFIs to be published on the website.



DISTRICT	WHO	WHEN	HOW	WHAT
First respondent	<b>District Immunization Officer (DIO)</b> (Phone number, email id to be floated to the media)	<b>Within 6 hours of media query</b> Before the story goes to print, that is by 6pm.	<b>Written</b> (Fill the media response template)	<p><b>What to do</b></p> <ol style="list-style-type: none"> <li>Respond to media using District media response template. When the reporter calls, if you don't have all the information, tell them to wait and call back or mail the queries and that response will be given.</li> <li>Notify SIO/CMO/DM on the event, media queries and response on phone and email.</li> </ol> <p><b>What to say</b></p> <p>Give basic details of the AEFI <b>without</b> speculating on the cause. Convey that case/s have been noted, the investigation is on, kind of investigations conducted and that reporting AEFIs do not mean the vaccine has caused it. The AEFI surveillance is very active and closely monitors all cases. Close the message by stating that vaccinations are safe and the programme protects against vaccine preventable diseases and saves lives.</p> <p><b>*In states or districts where the CMO is the identified media spokesperson, he/she can be the first respondent.</b></p>
Second respondent (independent source)	Chief Medical Officer (CMO) Chairman, District AEFI committee	Simultaneously with the first response	Spoken	<p><b>What to do:</b> Notify DIO on media queries and response simultaneously on phone.</p> <p><b>What to say:</b> Demystify AEFIs to media as per queries.</p>
	<b>District Immunization Officer (DIO)</b> _____ Second respondent	<b>12-24 hours of media query</b>	Statement (written)  BYTE (can read out facts or take support from written statement)	<p><b>What to do</b></p> <p>Scan channels and newspapers. Check newspapers/electronic media channels for coverage - correct facts used, proper message given, balanced reporting, not creating panic, harming the programme.</p> <ol style="list-style-type: none"> <li>In case of discrepancies in reporting of facts or if panic is being created, call the reporter and clarify politely and offer further support.</li> <li>Do not lose temper and close communication channels</li> </ol> <p><b>* Second respondents to support DIO demystify AEFIs and AEFI surveillance as system strengthening.</b></p> <p><b>What to say</b></p> <p><b>Verify facts given earlier. Add updates on new information/changed situation/progress of investigation. Do not speculate on cause of AEFI.</b> Reiterate that reporting AEFIs do not mean the vaccine has caused it. Vaccinations are safe and the programme protects against vaccine preventable diseases and saves lives. Vaccines are given during infancy/childhood when morbidity and mortality are naturally high so this could be a coincidental. However, other causes are not ruled out until investigations are over.</p> <p><b>*In states or districts where the CMO is the identified media spokesperson, he/she can be the first respondent.</b></p>
	<b>District Immunization Officer (DIO)</b> _____ Second respondent	<b>48 hours or later</b> – if media reports persist	Byte/Talk to reporters	<p><b>What to do</b></p> <p>Keep the media informed about further investigations. In case of discrepancies in reporting of facts or if panic is being created, call the reporter and clarify politely and offer further support. Convey that such reports could harm the immunization programme and put more children at risk of diseases.</p> <p><b>*In states or districts where the CMO is the identified media spokesperson, he/she can be the first respondent.</b></p>

STATE	WHO	WHEN	HOW	WHAT
First respondent	<b>State Immunization Officer (SIO)</b> (Phone number, email id to be floated to the media)	<b>Within 6 hours of media query.</b> Before the story goes to print in the evening, that is by 6pm.	<b>Written</b> (Fill the media response template)	<p><b>What to do</b></p> <ol style="list-style-type: none"> <li>Respond to media using state media response template. When the reporter calls, if you don't have all the information, tell them to wait and call back or mail the queries and that response will be given.</li> <li>Notify state immunization division on the event, media queries and response on phone and email.</li> </ol> <p><b>What to do</b></p> <ol style="list-style-type: none"> <li>Give basic details of the AEFI case/s, where it has occurred, <b>without</b> speculating on the cause. Convey that case/s have been noted, the investigation is on, what kind of investigations are conducted and that reporting AEFIs do not mean the vaccine has caused it. Give the latest information on investigations conducted and if a team from the state AEFI committee has gone to investigate it.</li> <li>Close the message by stating that vaccinations are safe and the programme protects against vaccine preventable diseases and saves lives.</li> </ol>
Second respondent (independent sources)	Chairman, State AEFI committee	Simultaneously with the first response	Spoken	<p><b>What to do</b></p> <p>Notify SIO on media queries and response simultaneously on phone.</p> <p><b>What to do</b></p> <p>Demystify AEFIs to media as per queries.</p>



STATE	WHO	WHEN	HOW	WHAT
	<p><b>State Immunization Officer (SIO)</b> _____</p> <p>Second respondent</p>	<p><b>12-24 hours</b> if queries persists</p>	<p><b>Statement (written)</b></p> <p><b>Byte</b> (can read out facts or take support from written statement)</p>	<p><b>What to do</b></p> <ol style="list-style-type: none"> <li>1. Notify central govt. on media queries and response on phone and email.</li> <li>2. Scan channels and newspapers. Check newspapers/electronic media channels for coverage - correct facts used, proper message given, balanced reporting, not creating panic, harming the programme. May use help from IEC officer.</li> <li>3. In case of discrepancies in reporting of facts or if panic is being created, call the reporter and clarify politely and offer further support.</li> <li>4. Do not lose temper and close communication channels</li> </ol> <p>* Second respondents to support SIO, demystify AEFIs and AEFI surveillance as system strengthening.</p> <p><b>What to do</b></p> <p><b>Verify facts given earlier. Add updates on new information/ changed situation/progress of investigation. Do not speculate on cause of AEFI.</b> Reiterate that reporting AEFIs do not mean the vaccine has caused it. Vaccinations are safe and the programme protects against vaccine preventable diseases and saves lives. Vaccines are given during infancy/childhood when morbidity and mortality are naturally high so this could be a coincidental. However, other causes are not ruled out until investigations are over.</p>
	<p><b>State Immunization Officer (SIO)</b> _____</p> <p>Second respondent</p>	<p>48 hours or later – if media reports persist</p>	<p>Byte/Talk to reporters</p>	<p><b>What to do</b></p> <ol style="list-style-type: none"> <li>1. Notify central govt. on media queries and response on phone and email.</li> <li>2. Keep the media informed about further investigations. In case of discrepancies in reporting of facts or if panic is being created, call the reporter and clarify politely and offer further support. Convey that such reports could harm the immunization programme and put more children at risk of diseases.</li> </ol> <p>* Second respondents to support SIO, demystify AEFIs and AEFI surveillance as system strengthening.</p>

NATIONAL	WHO	WHEN	HOW	WHAT
First respondent	<p><b>Joint Secretary, RCH (JS) and Deputy Commissioner (DCs)</b> (Immunization division)</p> <p>(Phone number, email id to be floated to the media)</p> <p>Deputy Commissioner (DC)</p>	<p><b>Within 6 hours of media query.</b></p> <p>Before the story goes to print in the evening, by 6pm or the story is aired on electronic media.</p>	<p><b>Written</b></p> <p>(Fill the media response template)</p>	<p><b>What to do</b></p> <ol style="list-style-type: none"> <li>Respond to media using National media response template. When the reporter calls, if you don't have all the information, tell them to wait and call back or mail the queries and that response will be given.</li> <li>Keep the immunization division, national AEFI committee chairperson informed regarding the event, media queries and response on phone and email.</li> </ol> <p><b>What to say</b></p> <ol style="list-style-type: none"> <li>Give basic details of the AEFI case/s, where it has occurred, <b>without</b> speculating on the cause. Convey that case/s have been noted, the investigation is on, what kind of investigations are conducted and that reporting AEFIs do not mean the vaccine has caused it. The national AEFI surveillance is very active and closely monitors all cases. Reporting more AEFIs means that the system is getting strengthened. <b>Give the latest information on investigations conducted and if a team from the state or national AEFI committee has gone to investigate it.</b></li> <li>Should not appear as if we are keeping the info from the reporters. Close the message by stating that vaccinations are safe and the programme protects against vaccine preventable diseases and saves lives.</li> </ol>
Second respondent (independent sources)	<p>Chairman, National AEFI committee</p>	<p>Simultaneously with the first response</p>	<p>Spoken</p>	<p><b>What to do</b></p> <p>Inform JS/DC on media queries and response simultaneously on phone.</p> <p><b>What to do</b></p> <p>Demystify AEFIs to media as per queries.</p>





NATIONAL	WHO	WHEN	HOW	WHAT
	<b>Joint Secretary, RCH (JS)</b> <b>or</b> <b>Deputy Commissioner (DC)</b> <hr/> Second respondent	<b>12-24 hours</b> if queries persists	<b>Statement (written)</b>  <b>Byte</b> (can read out facts or take support from written statement)	<b>What to do</b> <ol style="list-style-type: none"> <li>1. Prepare a statement and keep it ready as soon as the AEFI is reported.</li> <li>2. Scan/check newspapers/electronic media channels for coverage - correct facts used, proper message given, balanced reporting, not creating panic, harming the programme. May use help from partners.</li> <li>3. In case of discrepancies in reporting of facts or if panic is being created, call the reporter and clarify politely and offer further support. Do not lose temper and close communication channels.</li> </ol> * Second respondents to support JS/DC, demystify AEFIs and AEFI surveillance as system strengthening.
	<b>Joint Secretary, RCH (JS)</b> <b>or</b> <b>Deputy Commissioner (DC)</b> <hr/> Second respondent	<b>48 hours or later</b> if media reports persist	Byte/Talk to reporters	<b>What to do</b> <ol style="list-style-type: none"> <li>1. Keep the immunization division informed on media queries and response by phone and email.</li> <li>2. Keep the media informed about further investigations. In case of discrepancies in reporting of facts or if panic is being created, call the reporter and clarify politely and offer further support. Convey that such reports could harm the immunization programme and put more children at risk of diseases.</li> <li>3. Convey that such reports could harm the immunization programme and put more children at risk of diseases.</li> </ol> *Second respondents to support JS/DC, demystify AEFIs and AEFI surveillance as system strengthening.

#### What to say

1. **Updates on new information/changed situation/progress of investigation. Do not speculate on cause of AEFI.** Reiterate that reporting AEFIs do not mean the vaccine has caused it. **Give the latest information on investigations conducted from the latest info from the state/national AEFI committee investigating it.**
2. The govt. runs an active national AEFI surveillance program that closely monitors all cases. Reporting more AEFIs means that the system is getting strengthened. Vaccinations are safe and the programme protects against vaccine preventable diseases and saves lives. Vaccines are given during infancy/childhood when morbidity and mortality are naturally high so this could be a coincidental. However, other causes are not ruled out until investigations are over.

# STATE AEFI RESPONSE TEMPLATE

*BHOPAL, MADHYA PRADESH* – DATE – As a part of the Universal Immunization Program, the government of *Madhya Pradesh* vaccinated \_\_\_\_\_ (*number of*) children against vaccine preventable diseases including Polio, childhood TB, Diphtheria, Pertussis, Tetanus, Hepatitis B, Measles and \_\_\_\_\_ in the state between the months of \_\_\_\_\_ – \_\_\_\_\_. The Government of \_\_\_\_\_ (*specify state*) *Madhya Pradesh*, through its ongoing efforts, has achieved an immunization coverage rate of \_\_\_\_\_% in \_\_\_\_\_ (*year*).

\_\_\_\_\_ (*number of*) doses of BCG/DPT//OPV/Measles/\_\_\_\_ (*others specify*) (*choose the vaccine in question*) have been administered between (*the dates*) \_\_\_\_\_ – \_\_\_\_\_.

As a part of the routine surveillance, \_\_\_\_\_ (*number of*) AEFIs have been reported on \_\_\_\_\_ (*date*) in the district/s \_\_\_\_\_ (*name of district/s*), including \_\_\_\_\_ (*details of case/s – e.g 4 deaths, 3 hospitalizations*) in \_\_\_\_\_ (*months*). The AEFI surveillance system records all minor adverse events (such as rashes, swelling at the injection site, fever etc) and investigates the serious cases (such as death and hospitalization) to strengthen the immunization program.

The District AEFI committee is investigating the above cases with support from the state govt. All medical records are being reviewed/ xx samples have been collected/postmortems are being conducted/ \_\_\_\_\_ (*please add particulars of the relevant investigation/s*).

AEFI surveillance is a reporting system to investigate the potential side effects after vaccination. Reporting an AEFI does not mean the vaccine has caused it. The cause can be determined only after proper investigation. There are wide ranging reasons for most side effects.

Vaccination has been recognized as the most effective public health intervention for child health, preventing disease mortality and morbidity. Every year, \_\_\_\_\_ (*number of*) children suffer from \_\_\_\_\_ (*diseases/specific to antigen in question–depending the available data*) in the state. Manufacturing of vaccines is a tightly monitored process with multiple checks at different stages of production. Post production, each batch goes through tests to ensure quality and safety before they are released for use.

## Contact Details:



# DISTRICT AEFI RESPONSE TEMPLATE

DISTRICT, MADHYA PRADESH- DATE - As a part of the Universal Immunization Program (UIP), the Government of Madhya Pradesh vaccinated \_\_\_\_\_ (number of) children against vaccine preventable diseases including Polio, childhood TB, Diphtheria, Pertussis, Tetanus, Hepatitis B, Measles and \_\_\_\_\_ in the state between the months of \_\_\_\_\_ - \_\_\_\_\_. The Government of \_\_\_\_\_ (specify state) Madhya Pradesh, through its ongoing efforts, has achieved an immunization coverage rate of \_\_\_\_\_% in \_\_\_\_\_ (year).

\_\_\_\_\_ (number of) doses of BCG/DPT//OPV/Measles/\_\_\_\_ (others specify) (choose the vaccine in question) have been administered between (the dates) \_\_\_\_\_ - \_\_\_\_\_.

As a part of the routine surveillance, \_\_\_\_\_ (number of) AEFIs have been reported on \_\_\_\_\_ (date) in the district \_\_\_\_\_ (name of district), including \_\_\_\_\_ (details of case/s - e.g 1 death, 3 hospitalizations etc.) on \_\_\_\_\_ (date). The AEFI surveillance system records all minor adverse events (such as rashes, swelling at the injection site, fever etc) and investigates the serious cases (such as death and hospitalization) to take programmatic actions so as to strengthen the immunization program.

The District AEFI committee is investigating the above cases with support from the state govt. All medical records are being reviewed/samples have been collected/postmortems are being conducted/\_\_\_\_\_ (please add particulars of the relevant investigation/s).

AEFI surveillance is a reporting system to investigate the potential side effects after vaccination. Reporting an AEFI does not mean the vaccine has caused it. The cause can be determined only after proper investigation. There are wide ranging reasons for most side effects.

Vaccination has been recognized as the most effective public health intervention for child health, preventing disease mortality and morbidity. Every year, \_\_\_\_\_ (number of) children suffer from \_\_\_\_\_ (diseases/specific to antigen in question – depending the available data) in the district. Vaccines are licensed products and licensing authority i.e. Drug Controller General of India gives license to manufacture vaccines after thoroughly examining all the issues concerning vaccines including safety reports. Before the vaccines are used for the program each batch goes through tests to ensure quality and safety before they are released for use.

## Contact Details:







**IMMUNIZATION  
TECHNICAL SUPPORT UNIT**

*Ministry of Health & Family Welfare*