From Evidence to Action: How Local Networks Drive Zero-Dose Solutions

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Photo Credit: African Field Epidemiology Network

Closing the zero-dose gap requires partnering with local networks to understand why children are missed and turning insights into action. This was the focus of Gavi's Zero-Dose Learning Hub (ZDLH) webinar, From Evidence to Action: How Local Networks Accelerate Zero-Dose Evidence Uptake, which convened the Mali and Nigeria Learning Hubs and the Clinton Health Access Initiative (CHAI), part of the Gates Foundation Zero-Dose Learning Agenda (ZDLA). Hosted by JSI, the ZDLH global learning partner, the session highlighted how engaging local networks, uncovering barriers, and translating evidence into tailored strategies are essential to closing the zero-dose gap and sustaining progress.

Building local solutions through iterative learning

Sustained progress depends on continuous learning cycles that revisit zero-dose drivers, deepen understanding, and adapt interventions.

In Nigeria, the ZDLH's Decentralized Immunization Monitoring uses lot quality assurance sampling to rapidly assess immunization performance at the local level. This approach combines immunization data with social and behavioral insights, such as low maternal education and limited engagement with health services, to quickly adapt outreach strategies, like targeting caregivers who knew where to vaccinate but remained hesitant. In Mali, the Learning Hub's implementation research included two innovations: Coach2Pev, a coaching tool to improve microplanning and reach zero-dose children, and Medexis, an electronic logistics system offering real-time vaccine stock visibility. Participatory workshops helped refine these tools, aligning outreach with local realities and enabling health workers to analyze zero-dose data, prioritize underserved areas, and adapt microplans, even in conflict-affected districts.

Turning insights into action: knowledge translation in practice

Knowledge translation was central to efforts in both Mali and Nigeria. In Nigeria, the Learning Hub's Decentralized Immunization Monitoring and budget analysis informed advocacy, contributing to the creation of new state-level budget lines for immunization, helping ensure timely funding and stronger accountability systems. Stakeholder mapping and community scorecards facilitated dialogue with government officials, aligning data with planning and financing decisions.

These achievements reflect how evidence-based local engagement can unlock resources to improve immunization services. By validating tools and applying a participatory knowledge translation process—which includes identifying findings, translating them into actionable products like briefs, disseminating through collaborative platforms, monitoring use, and documenting changes—the Mali Learning Hub strengthened shared understanding and prepared health teams to act on evidence, even in complex environments.

> **"The idea is really to use the evidence to create real change. We worked with the Ministry of Health and partners to engage stakeholders with important information translated into concrete products that influence decisions from national to local levels, not just creating something for a project that ends, but embedding knowledge into existing systems so it continues beyond the project's life,"** explained Dorothy Leab of the Mali Learning Hub.

CHAI's work under ZDLA in Nigeria highlighted how iterative, community-led processes can break down cultural and social barriers. Through the Immunization Advocacy Network, male caregivers worked with religious and traditional leaders to design and refine mosque sensitization and household outreach, to address barriers. Structured feedback enabled rapid adaptation, informed decisions, and built shared ownership.

> **"The male caregivers developed interventions that included sensitization sessions in mosques to improve awareness and address permission issues. They engaged caregivers of zero-dose children through facility data, house-to-house visits, focus group discussions, and key informant interviews to identify barriers,"** explained Dr. Salisu Sulaiman. **"The male caregivers found that fears about adverse effects after immunization were a major barrier. To address this, they expanded mosque discussions to include information on adverse effects and introduced periodic outreaches to reach communities where cultural norms prevented women from leaving home."**

These activities showed how continuous learning and local networks can iteratively refine interventions.

Local networks drive evidence-based change

The experiences shared during the webinar underscored a central theme: real progress comes when locally-generated evidence drives practical decisions. Reducing zero-dose prevalence depends on embedding timely insights into planning and action. Engaging stakeholders, contextualizing findings, and using evidence at the right moment can transform how programs identify and reach missed children.

> **"It's important to understand how stakeholders make decisions, what role evidence plays, and how to act on opportunities. We need timely, relevant evidence to unlock and build a learning culture,"** noted webinar facilitator Gustavo Corrêa from Gavi.

Because evidence needs and opportunities for its use vary across partners and decision levels, methods for generating and translating evidence must be tailored to the decision being made and the stakeholders involved. This responsive, locally driven approach will be essential for sustaining progress toward identifying and reaching every zero-dose and under-immunized child. To learn more, access the full webinar recording and additional resources on the ZDLH website.

About the ZDLH

Led by JSI with partners the International Institute of Health Management Research (IIHMR) and The Geneva Learning Foundation (TGLF), Gavi's Zero-Dose Learning Hub is a global learning initiative to generate evidence and engage stakeholders to identify and reach zero-dose and under-immunized children. As the global learning partner, JSI supports Country Learning Hubs in Bangladesh, Mali, Nigeria, and Uganda to advance evidence-based strategies aligned with Gavi's Identify-Reach-Monitor and Measure-Advocate (IRMMA) framework. Key ZDLH achievements include demand-driven technical assistance and the development of tools and resources, all aimed at identifying and reaching zero-dose children and integrating evidence into policy and practice.

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