
Customer Journey: User Experience Mapping for Demand Creation for Immunization Services via Community Activation & LHW-Assisted Telemedicine

Journey Step 1: Visit to Caregiver Parveen's home by Lady Health Worker (LHW Rabia)

1. Rabia greets Parveen, introduces herself & explains her role/mission
2. Rabia establishes trust with Caregiver via common reference points
3. Rabia ascertains Parveen's overall family health status & her children's immunization history (Parveen has 3 kids ages 11, 8 and 3)
4. Rabia raises awareness of Immunization Camp in village that day



STEP 1

Journey Step 2: Parveen & other Caregivers Participate in an Interactive Group Discussion with family, neighbours & social peers Facilitated by Rabia

1. Rabia promotes concept of 'herd immunity' and need to exceed community threshold for effective herd immunity
2. Rabia helps the Caregivers to Identify common myths and misconceptions
3. Rabia helps to break thought patterns & dismantle stereotypes held by Parveen and her community regarding vaccines (e.g. vaccines cause sterilization)
4. Rabia uses her tablet and 4G connectivity to provide Parveen with a potential solution to her non-immunization related medical issues (via wifi-enabled HD consultation with female doctors)
5. Rabia invites Parveen and the other Caregivers to the immunization camp being held in the village that afternoon



STEP 2

Journey Step 3: Parveen's husband Mushtaq Participates in a Key Community Stakeholder Meeting Just prior to the Immunization Camp

1. A Male sensitizer (Abdul Rehman) describes the plan and objective of the immunization camp
2. Abdul Rehman enlists other male stakeholders to provide in-kind resources required for the camp (co-ownership and co-operation)
3. Abdul Rehman discusses goals of the related activities (e.g. TB screening)



STEP 3

Journey Step 4. Parveen attends the Immunization camp with her children

1. LHWs demonstrate safe vaccination method to attendees (cold chain maintenance, sterility maintenance, proper sharp disposal)
2. Trained and qualified vaccinators are made available at camp

3. LHWs facilitate urgent care services via HD video-consultation with remotely located female doctors
4. Camp environment is organized and regulated with the help of LHWs/ CHWs
5. Data is collected at point-of care via wifi-enabled devices (tablets)
6. LHWs provide additional awareness around low-risk or possible side effects associated with vaccines
7. LHWs reassure caregivers, provide a Vaccination Record card (with electronic back-up) and reinforce the importance of follow up visits
8. LHWs provide information about nearby health facilities for non-vaccination related physical interventions/procedures
9. LHWs ensure the waste disposal of the vaccine.
10. LHWs ensure that a vaccine cold chain is maintained



STEP 4

Journey Step 5: LHWs Maintain Traceable Immunization Records

1. LHWs maintain e-records (on a cloud-based platform) for follow up and scheduling of follow-up camps
2. LHWs Identify community child immunization needs according to age groups
3. LHWs Identifying potential barriers to campaign success (e.g. breakdown in vaccine cold chain)

Journey Step 6: Continuous Community Education Delivered to Caregivers by LHWs

1. LHWs continue to engage Caregivers and cultivate a long-term relationship via ongoing sensitization, video-consultation sessions with remotely located doctors, provision of digital diagnostic services and patient follow-up via patient care coordinators
2. LHWs continue to liaise with community leaders to tackle known barriers to completion of vaccination schedules



STEP 6