ViVac: Violence, trust, and vaccine hesitancy

Project data

Project type

☒ interdisciplinary pilot project ☐ cross-sector project ☐ global health postdoc fellowship

Research areas involved (check all that apply)

☐ Biomedical sciences ☒ Public health
☒ Social sciences and humanities ☐ Engineering and other sciences

Project duration

March 2024 – March 2025

Project team

Name	Organization	Discipline(s)
Dr. Aisha Aliyu Abulfathi	University of Maiduguri & University of Maiduguri Teaching Hospital	Public Health
Dr. Gbadebo Collins Adeyanju	University of Erfurt	Health Communication
Dr. Liliana Abreu	University of Konstanz	Public Health
Dr. Musa Muhammad Bello	Bayero University & Aminu Kano Teaching Hospital	Public Health
Dr. Muhammad Ibrahim Jalo	Women and Children Hospital, Damaturu	Public Health
Dr. Rabiu Ibrahim Jalo	Bayero University & Aminu Kano Teaching Hospital	Public Health
Lennart Kasserra	University of Hamburg & University of Konstanz	Data Science
Dr. Aminatu A. Kwaku	Aminu Kano Teaching Hospital	Public Health
Dr. Ahmad Mahmud	Modibbo Adama University & Modibbo Adama University Teaching Hospital	Public Health
Prof. Dr. Max Schaub	University of Hamburg & WZB Berlin Social Science Center	Political Science
Pia Schrage	University of Erfurt	Health Communication

Case study

Introduction

In conflict-affected settings, public health challenges are amplified by systemic instability, weakened infrastructure, and pervasive mistrust in state institutions. Nigeria's northeast, scarred by insurgencies and chronic violence, exemplifies this complexity, particularly for maternal and child health. Despite global efforts to improve vaccination uptake and healthcare access, the drivers of vaccine hesitancy and other health-seeking behaviors in such environments remain poorly understood.

Summary of the Project

Our interdisciplinary project aimed to explore the relationship between exposure to armed conflict, trust in state institutions, health literacy, and vaccine hesitancy in northeastern Nigeria. Combining public health, political science, and health communication expertise, the project deployed a mixed-methods design: a representative survey (n=3,006), a matched case-control study, 60 key informant interviews, and 9 focus group discussions across the states of Borno, Yobe, and Adamawa. We focused on caregivers of children under five – a population particularly vulnerable to disrupted healthcare systems. The research was structured around five work packages, from conceptual framework development and data collection to the dissemination of results through policy workshops and academic publications.

Findings

- **Systematic review:** Armed conflict in sub-Saharan Africa generally reduces maternal and child healthcare-seeking behavior, but in some contexts, humanitarian assistance may mitigate or even reverse this trend.
- **Survey and case-control analysis:** Direct exposure to violence significantly lowered health-seeking for children, notably for vaccinations and government-based care. Trust in state-run health services emerged as a key mediator.
- **Qualitative insights:** Health behaviors are shaped by poverty, gender norms, access barriers, and deep-rooted mistrust – fueled by both past experiences of violence and poor service delivery. Despite this, community networks and trusted local media can counter misinformation and improve vaccine attitudes.

Lessons Learned

- Conflict-exposed communities need interventions that go beyond infrastructure repair. Rebuilding trust is essential.
- Participatory research in insecure regions demands extensive local collaboration, ethical sensitivity, and flexibility in fieldwork planning.
- Health communication strategies must be culturally grounded and address the sociopolitical dimensions of care-seeking.
- Our methodology – linking qualitative and quantitative data with a trust-centered framework – can serve as a model for health systems research in fragile contexts.

Photo: Compilation of photos from fieldwork in Nigeria. ©ViVac

Resources

Adeyanju, G.C. et al. (2025): *Armed Violent Conflict and Healthcare-Seeking Behavior for Maternal and Child Health in Sub-Saharan Africa: A Systematic Review*. PLOS ONE 20(2): e0317094.

Schaub, M. et al. (2025): *Maternal and Child Healthcare-Seeking among Victims of Violence in Armed Conflict: A Matched Case-Control Study in Northeast Nigeria*. [Pre-print as of September 2025].

Abreu, L. et al. (2025): *Caregivers' Qualitative Insights on Access to Care in Conflict-affected Northeast Nigeria*. [Pre-print as of September 2025].

Contact

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