

Effect of immunization reminder-recall systems in rural Africa

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Background: Despite substantial investment in routine immunization programs over recent decades, low vaccination coverage and high drop-out rates (i.e., proportion of children who received the first dose of pentavalent vaccine but do not receive the third dose) still remain a challenge in many developing countries, including Uganda.

Objective: To demonstrate the effect of a reminder/recall system in increasing immunization coverage and reducing drop-out rates.

Methods: A 6 month intervention was conducted in Kyalulangira, a rural sub-county of Rakai district. Mobilisers registered all children at their first contact with the immunization program and visited caregivers to remind them of upcoming sessions. Caregivers of children who did not return at the appropriate time were again visited by the mobilisers, and recalled for the next session. Mobilisers followed children until completion of their routine immunization series. Routine monitoring was done in Kibanda, the control sub-county. Population-based cluster surveys were conducted among children aged 12-23 months at baseline (April 2007) and evaluation (November 2007) in both sub-counties to assess vaccination coverage and drop-out.

Results: Coverage with the final vaccine series doses (i.e pentavalent dose 3 and measles vaccine) increased 16-24 percentage points in the intervention sub-county, and remained stable in the control. Drop-out was reduced, from 21% to 11% ($p < 0.001$), in the intervention sub-county, and did not decrease in the control sub-county.

Conclusion: This study suggests that reminder recall systems may be an effective mechanism for increasing coverage and reducing drop-out rates in rural Africa.

Biography

Nicholas Ayebazibwe has completed his MPH at the age of 30 years from Makerere University School of Public Health, Kampala, Uganda. He is currently an Epidemiologist at the African Field Epidemiology Network, a CDC/USAID funded not for profit working to strengthen field epidemiology in African through mostly setting up and supporting Field Epidemiology and Laboratory training Programs (FELTPs) now in over 13 Sub-Saharan African countries.

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