

WORLD IMMUNIZATION WEEK – 24TH TO 30TH APRIL 2022

THEME: VACCINES HELP MAKE IT POSSIBLE FOR EVERY ONE TO PURSUE A LIFE WELL-LIVED

THE ACHAP AFYA PROJECT—EXPANDING IMMUNISATION COVERAGE THROUGH ROBUST COMMUNITY HEALTH SYSTEMS: *THE EXPERIENCE OF THE UGANDA CATHOLIC MEDICAL BUREAU IN WEST NILE.*

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The burden of vaccine preventable diseases in Uganda remains high, and according to MoH estimates, only 55% of children aged 12–23 months were found to be fully vaccinated with coverage being relatively higher in urban areas (61%) than rural areas (50%) yet childhood vaccination remains a cost-effective public health intervention and a key pillar for achieving Universal Health Coverage.

Vaccines have for more than two centuries, helped keep people healthy—from the very first vaccine developed to protect against smallpox (in 1796) to the newest vaccines used to prevent severe cases of COVID-19, but access challenges and bottlenecks remain.



Figure 1: A Nurse weighing a Baby during an Outreach Immunisation Activity

The Uganda National Expanded Programme for Immunization (UNEPI), which was established in 1983, is mandated to ensure that all children under the age of 1 year, 10-year-old girls, and all women of childbearing age receive full vaccination of high quality and effective vaccines—including recently introduced vaccines in the national routine—i.e. against hepatitis B virus infection, cancer of the cervix, Haemophilus influenzae Type B, and pneumococcal infections. To enhance access, coverage, and vaccination completion in Uganda, several vaccination strategies such as community-based outreaches, home-based vaccination, child day plus, and mass immunization campaigns and other strategies have been employed over the years. Despite these strategies, vaccination coverage in Uganda has remained relatively low over the past years.

In the West Nile Region, while recent estimates found that 64% of children aged 12–23 months were found to be fully vaccinated—having improved from 45% ten years earlier (2006)—the proportion remains lower than all surrounding regions of Bunyoro, Acholi & Karamoja.

Notable among the challenges hindering effective immunization services include low individual, household and community knowledge about available vaccines, poor transport terrain, long waiting times, inadequate stock to cover existing demand in some facilities. These factors deter mothers from bringing their children for Immunization services.

Community Health Workers (CHWs) are critical to the health systems in low income countries—like Uganda, delivering a range of preventive, promotive, and curative services at the community level with a 1:10 return on investment, and have played a pivotal role in the

improvement of immunisation uptake – including educating communities on disease prevention and supporting timely referral and linkage to health facilities. CHWs are at the forefront of continuing to deliver essential health services to communities.

The Catholic Church—through its health department, The Uganda Catholic Medical Bureau (UCMB)—with support from USAID ACHAP Afya project has supported the implementation of a social behaviour communication initiatives, and a community project to conduct Defaulter Tracing for Immunization, Antenatal Care and Vitamin A supplementation in the West Nile Region.

The project has trained 293 Village Health Team (VHT) members to increase the community's access to immunization services in poorly performing sub-counties in Nebbi and Arua districts.

Each VHT was given basic training and information about immunization. They mapped children in their villages, reviewed their status, provided basic education to households on immunization, and linked households to a nearby health care facility.

In a period of 11 months of project implementation, a total of 4,485

immunization defaulters were identified by VHTs, 4,059 Referred for services—i.e. 90.5% referral rate, and three of every 4 defaulter children referred (3,090) children received immunisation services.



Figure 2: A VHT—Angiru Beatrice, conducting community follow up visit in Orevu village, Arua District. In 11 months, period, Beatrice has linked 69 children below 1yr. —previously defaulting complete immunisation, in a catchment area of 138 households to immunisation services

Each April, World Immunization Week brings together people from around the world to highlight the importance of vaccines and how they protect people of all ages against many diseases, giving people and communities the opportunity to pursue a life well-lived.

This year's campaign comes at an especially critical time as the COVID-19 pandemic has disrupted essential health services, including routine immunization, setting back progress by more than a decade—e.g. MoH reports that measles immunization coverage under 1 year declined from 88% in 2019/20 to 86% in 2020/21.

Unfortunately, millions of people are still missing out on the life-saving benefits of vaccines, making it urgent to catch up and reach those who have been missed.

The 2022 theme “Long Life for All” aims to unify organisations & people around the idea that vaccines make it possible for us to follow our dreams, protect our loved ones and live a long, healthy life.

The Uganda Catholic Medical Bureau—which operates and coordinates the largest network of non-governmental faith-based health service providers in the country—coordinating nearly 300 accredited health facilities across the country, and accounted for 8.05% of the total

national immunisation doses given in FY 2020/21, joins the country and the rest of the world to commemorate the World Immunisation Week 2022.

A Long Life for All is not a promise, it's an ambition—since everyone deserves a chance at a fulfilling life, and the Catholic Health Network in Uganda—through the support of community health projects—such as ACHAP Afya project and its static health infrastructure is committed to supporting the achievement of the ambition.