

**Abstract Category: Poster**  
**Topic: Innovative Approach to Reaching Under-served Children Using Religious Leaders in Polio High Risk Area of Northern Nigeria**

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**Background**

CGPP is Major partner in Nigeria's PEI. The Iftar (breaking of Ramadan Fast) was an innovative intervention to address unresolved non-compliance (vaccine rejection) in CGPP focal settlements in four states. CGPP noticed that Heads of Households where vaccine is rejected do listen to their Religious Leader (Imam) in the Mosque. CGPP built the capacity of the Imams to enable them teach Household heads about the benefits of vaccination while the LGA ensured availability of polio vaccines for vaccination.

**Imam of Mai'Anguwa Mosque, Yobe State Speaking to Worshipers During Iftar**



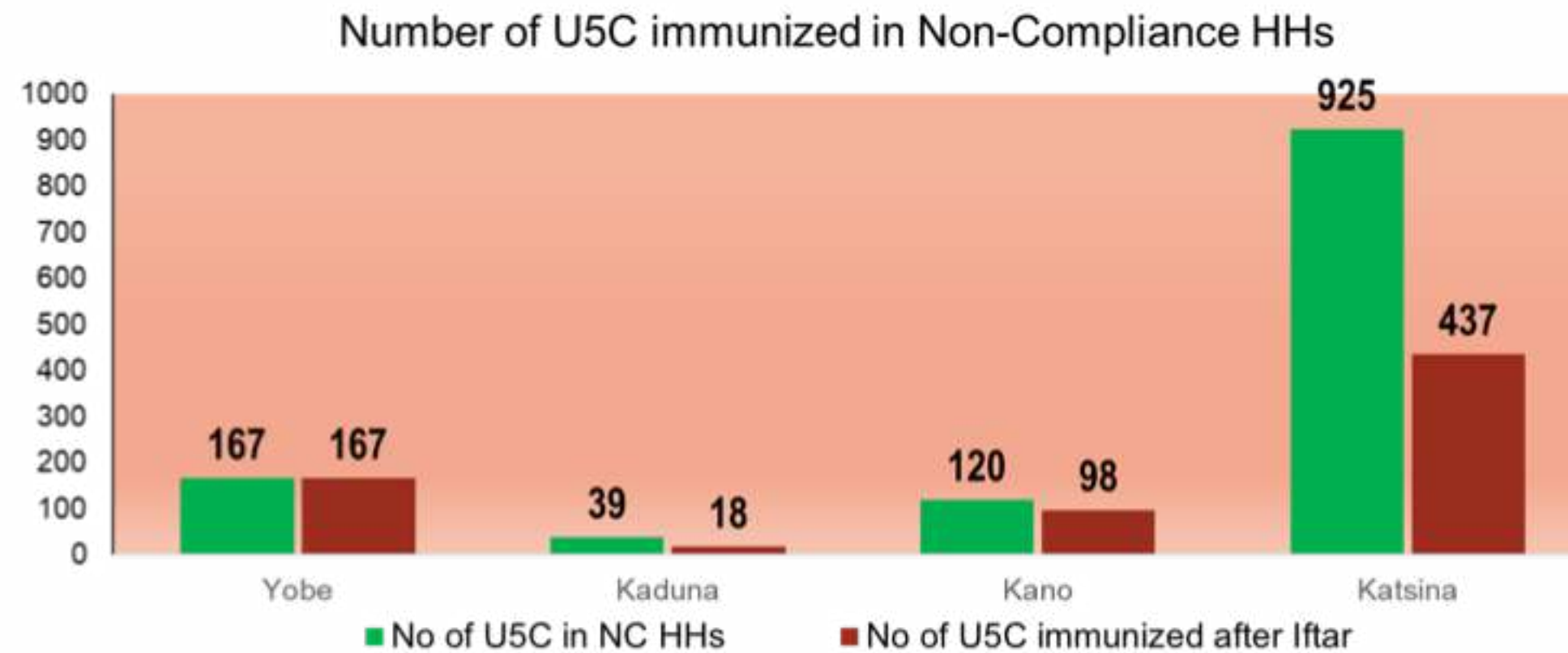
**Methodology**

A line list of missed children that were not immunized due to rejection by their parents or caregivers was developed by CGPP Community Volunteers (VCM).. Advocacy was then conducted to the district heads and the Imams of selected mosques in CGPP focal areas whose capacity has been built on the benefits of vaccination.

A suitable community mosque was identified for the Iftar with the aim of reaching as many Household Heads as possible. Through consultation with the Imams, an estimated number of daily worshipers was made to determine the number of worshipers expected on Iftar implementation day. Worshipers are usually adult males (Household heads).

Vaccination of missed children from NC households followed a day after the Iftar (at dusk) when breaking of fast is done by Muslims. This is based on the premise that the Imam will have an influence on the non-compliant fathers who will also be influenced by the Compliant fathers in the same congregation.

**Outcome of CGPP – Planned Iftar Across Four states**



**Results After Iftar Intervention By CGPP**

S/n	States	No of NC HHs	No of U5C in NC HHs	No of U5C immunized	% of U5C immunized 1-day after Iftar
1	Yobe	85	167	167	100.0
2	Kaduna	15	39	18	46.2
3	Kano	61	120	98	81.7
4	Katsina	426	925	437	47.2
	<b>Total</b>	<b>587</b>	<b>1251</b>	<b>720</b>	<b>57.6</b>

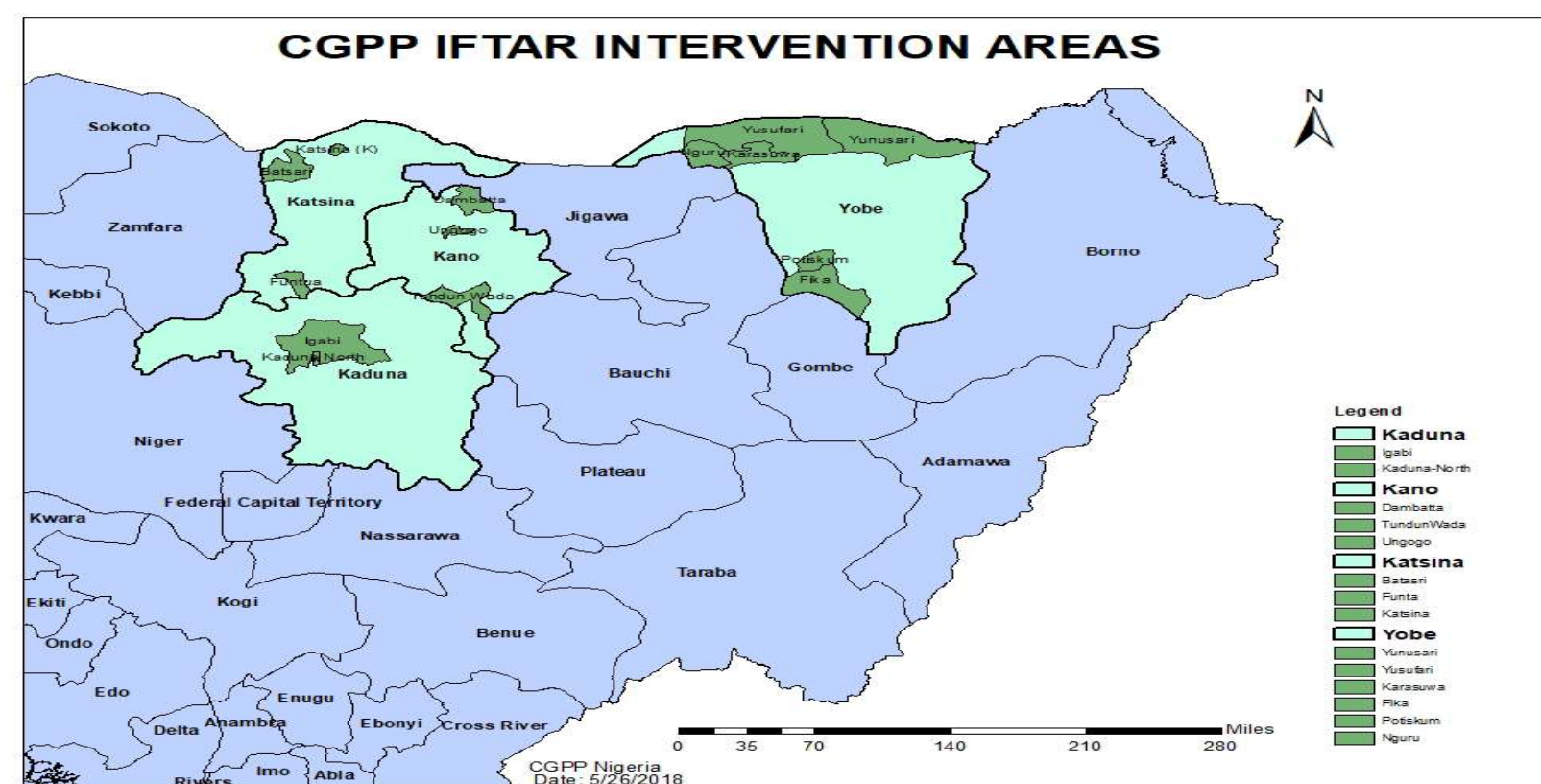
**Challenges**

There was lesser number of children vaccinated after the Iftar in Kaduna and Katsina States. Some chronic non-compliance in the two states especially Katsina believed that CGPP was only using food to deceive them, hence deciding not to allow their children to be vaccinated.

Also, the time frame of two days given to vaccinate the children and report back was not enough to reach all the missed children.

Vaccination teams were not able to meet with some parents within the period. Some of the children were however vaccinated during in-between round, but not captured in this report.

**Map Showing CGPP Iftar Intervention Areas**



**CGPP Team Vaccinating Missed children**



**Distribution of Food in Mosque (Kano)**



**Lessons Learnt**

1. Religious Leaders (Imams) can be used to reach areas of vaccine rejection if they are trained and the right environment is created through working with NGOs, Government and other stakeholders
2. Targeting Household heads with the right messages using local resources can improve Vaccination coverage.

**Conclusion**

Using local Religious leaders during Ramadan Fast is an innovative approach for improving access of under-five children to vaccination in areas of vaccine rejection.