Fifth Child Project: closing the childhood immunization gap in Beninshangul-Gumuz Regional State, Ethiopia

Shiferaw Demissie, Ethiopia Health Coordinator
Naoko Kozuki, Technical Advisor, Health Research
International Rescue Committee
Ethiopia

• Great success story of MDG era
  • Met Goals #4 and #5
• Equity gap: Developing Regional States
  • Afar, Benishangul-Gumuz, Gambella, and Somali
  • Lowest development indices
  • Affected by ethnic conflict, refugee influx
• Benishangul-Gumuz (2016 DHS)
  • U5MR of 98
  • In comparison: national – 67, Addis Ababa – 39
Fifth Child Project

Started in BGRS by the IRC in 2014 - supports delivery of the Ethiopian Health Extension Program’s family health packages

Key objectives
• Increase demand for and access to perinatal services and increase vaccination coverage
• Foster community engagement and shared responsibility for maternal and child health
The need for the project

- DPT3 coverage in Nov 2014: 73%
- Total Fertility Rate in BGRS: 5.2
- Contraceptive Prevalence Rate: 28%
- Unmet need for FP among postpartum mothers nationally is 74%
Color-Coded Calendar

- HEWs and HDAs describe the color-coded images on the tool and place the same colored stickers on appointment days to help remind families.

- Calendar acted as a catalyst for health-related discussions within families & enabled: i) mothers to maintain better control over children’s health, ii) personalised interactions with HCWs.
Key findings from formative evaluation
“New way of working”: well adapted to the Health Extension Program

“This project has introduced a new way of working. Previously there was no mechanism to remind mothers about delivery and their vaccination schedule. Having the *Enat Mastawesha* (calendar) and the follow-up form is useful for reminding the women of their check-up dates and vaccination dates. This all-in-one format has proved to be very useful.” - Woreda health officer
Shared responsibility for immunisation

- Pre-existing community accountability structures facilitated shared responsibility

However:
- Varying levels of engagement within kebeles
- Some lack of clarity about kebele leaders active involvement in defaulter tracing
- Community-agreed sanctions for non-compliance
Immunization – Routine monitoring data

Jan 2013 – Dec 2016:

- Penta-3 coverage: 63% to 84% in Assosa, 78% to 93% in Bambasi
- Measles coverage: 77% to 81% in Assosa, 59% to 86% in Bambasi
- 54% of infants defaulted at least once → 84% identified and caught up on missed vaccinations
- Percent of mothers who arrive for child immunization who accept FP: 12% to 74% in Assosa, 18% to 43% in Bambasi
What’s Next?
Potential Applications for the Humanitarian Context

**Acknowledgements**