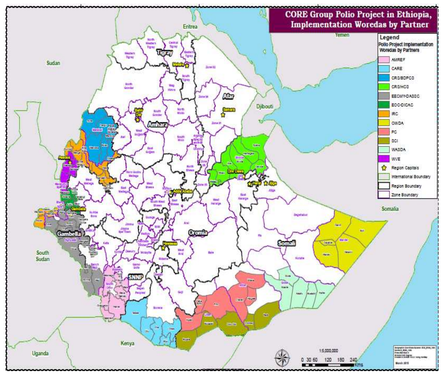
Role of religious leaders and knowledge of caretakers on child immunization in hard to reach and pastoralist communities in Ethiopia: Evidence from Gavi support project implementation areas

Legesse Bezabih (MSC), Filimona Bisrat (MD, MPH), Asrat Asress (MPH)

BACKGROUND:

Immunization is one of the most powerful and cost-effective public health interventions to prevent devastating illness and disability. Immunization program in pastoral communities needs locally sound and proven approaches to increase immunization uptake. Therefore, involvement of religious leaders to enhance immunization services is crucial. They have deep and trusted relationships with their followers and often have strong linkages with the most disadvantaged and vulnerable members. They are well placed to address issues related to social norms, behaviors and practices that affect access to services and thus facilitate efforts towards the realization of the positive actions



OBJECTIVE:

To assess the role of religious leaders and knowledge of mothers/caretakers on child vaccination in Abobo District, Gombella Regional State.

METHODS:

Key Informant Interview (KII) to assess role of leaders to child vaccination and Focus Group Discussion (FGD) to know mothers' knowledge on child vaccination respectively. Purposive sampling was used for religious leaders and randomly selected mothers/caretakers having children 12-23 months of age were included in the study.

RESULTS:

Twelve(12) Mechane-Yesus church leaders were participated in the in-depth interview. According to the In-depth interview, In the previous days, 'caretakers perceived that immunizing a child causes a disease". Religious leaders said "They became role model to their communities by vaccinating their children first and then convinced near by families and gradually reach to the wider community/followers" . They used articles related to child health from the bible to educate parents/caretakers during preaching session and conference days. Currently, "immunization become a culture and a caretaker whose child is not immunized will be marginalized by her community".

146th APHA Annual meeting and Expo. November 10 – 14, 2018, San Diego, USA

RESULTS …

Four FGDs of caretakers/mothers having 12- 23 months children were conducted. FGD findings indicated that religious leaders have been educating the followers during preaching times. As a result "caretakers' knowledge on immunization has been improved and they are taking their children to the vaccination site".

A cross sectional study conducted in the same implementation areas showed improved knowledge of caretakers on immunization. Majority (78%) of the caretakers of children aged 12 -23 months were able to list common vaccine preventable diseases. Polio (55.4%), Measles (45.6%) were among the common diseases reported by mothers followed by diarrheal diseases (22%), Pertussis (17.4%), Diphtheria (15.4%), Tetanus (15.4%), and Tuberculosis (11.7%)). Mothers reported their child got vaccinated at Health Post (62.3%), outreach immunization site (36%) and Hospital (11%). Only (26.7%) reported child to start vaccination at birth, 11.7% with in 15 days and 43% after 45 days of birth.

Fig: KII with religious leaders

Fig: FGD with Parents/caretakers

CONCLUSION AND RECOMMENDATION:

Caretakers trusted the words of the religious leaders and committed to change in to action. Engaging religious leaders on immunization is crucial to reach marginalized and unreached communities. Caretakers knowledge and practice on immunization has shown improvement due to the involvement of religious leader. Partners and government should continue engaging the religious and other influential leaders to improve immunization program and ensure sustainability through community ownership.