

Door-to-door child immunization: an acceptable alternate way to continue essential services for vulnerable population of informal settlements in Nairobi, Kenya

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Context

- Save the Children International in Kenya (SCI-Kenya) has been implementing a child immunization project in three counties of Kenya (Mandera, Nairobi and Wajir) since January 2020.
- In the first quarter of 2020, due to COVID-19 pandemic, there was a considerable disruption of immunization services in the informal settlements of Kibra and Langata in Nairobi county
- There was rising concern for outbreaks of vaccine-preventable diseases.
- Given the high population density within informal settlement areas in Nairobi county, SCI-Kenya facilitated and supported to conduct door-to-door immunization outreach services

Objective

The main project objective is to reach every last child with immunization services within project area.

4500 4000 3500 3000 2500 2000 1500 1000 500 0 Jan Feb Mar Apr May Jun Jul Aug Sep Oct —PCV1 —PCV2 —PCV3

Figure: Children received PCV vaccination, Jan – Oct 2020

What we did

- We facilitated vaccination to vulnerable children as well as locating, tracing and vaccinating missed children, since May 2020, in collaboration with Nairobi County's Ministry of Health (MOH) and local partners.
- In addition to child immunization, the services adopting a door-to-door approach included treatment of minor illness among children and their families, child nutritional services, maternal services like cervical cancer screening, antenatal care services for pregnant women and Family Planning to eligible couples.
- Simultaneously, SCI-Kenya also continued their support and facilitation to MOH in other counties within project area for maintaining child immunization and essential services for infectious disease control, especially focused on continuing immunization outreach sessions as per and above the plan.

Disclaimer

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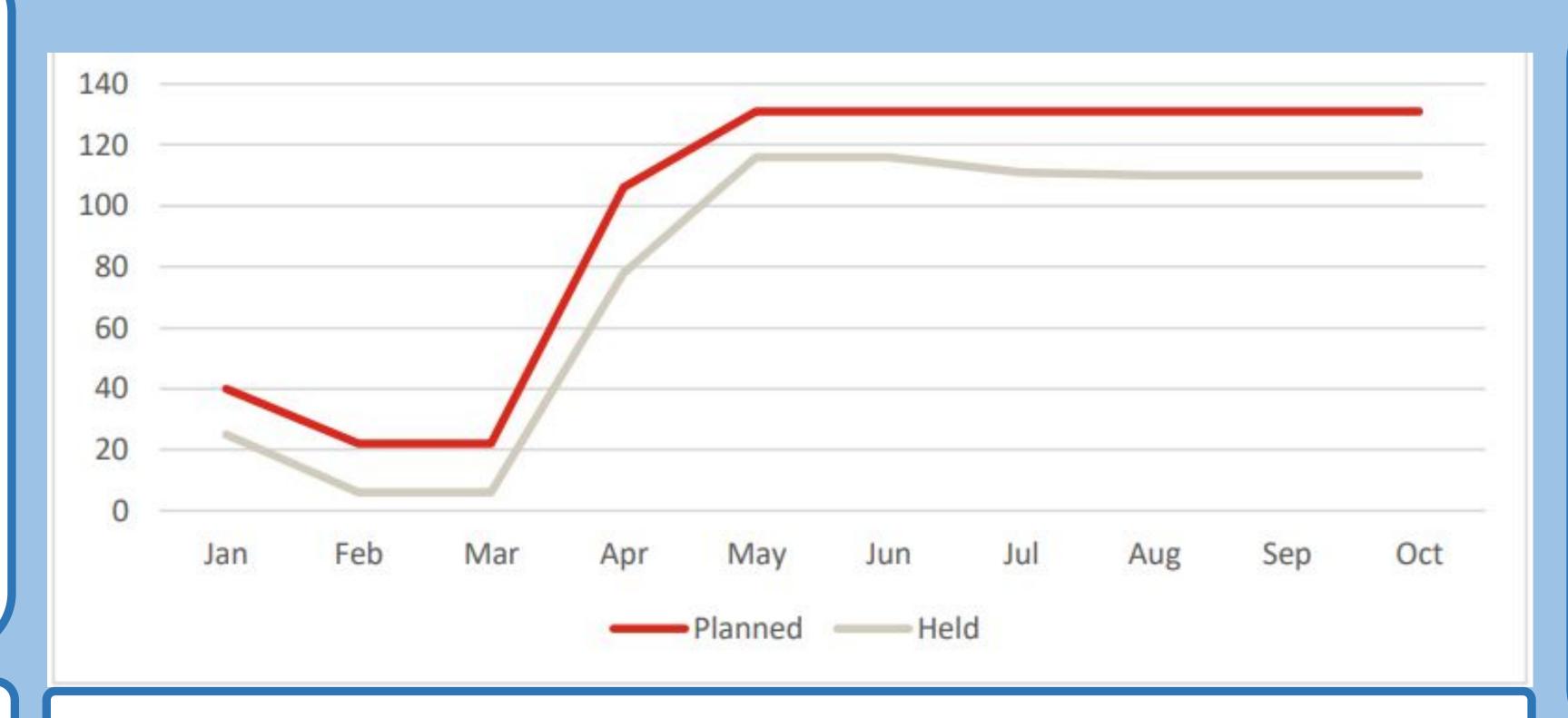


Figure: Planned vs. Held EPI sessions, Jan – Oct 2020

Results

- Reportedly, 710 children under five years of age received immunization services, 277 children were dewormed, 211 children received vitamin A supplementation, 110 young women were screened for Human Papilloma Virus, and 728 community members were treated for minor illnesses, during these door-to-door campaigns.
- A total of 403 defaulting children also were all successfully traced and received their scheduled but missed vaccines.
- Child immunization session data from three counties within project area revealed minimal observed disruption to outreach immunization activities, with a considerable increase in both planned and delivered outreach sessions during March to October 2020.
- Similarly, the number of children who received PCV (Pneumococcal Conjugate vaccine) doses during January October remained relatively stable, with little major disruption observed. However, there was a slight decline in numbers of children vaccinated in 2020 compared to 2019 (24% reduction in April-June average relative to January-March for PCV3 compared to only a 1% reduction in 2019).

Lessons Learned

- Community members in informal settlements of Kibra and Langata sub-counties were found extremely supportive of these door-to-door immunization activities.
- Collaboration with MOH and local partners is mandatory for continuing such community-focused alternate business model to keep the essential services available to vulnerable populations
- Also important is to ensure community support and community participation in those adopted strategy implementation steps.
- Despite the burden of the COVID-19 pandemic on the traditional health service delivery model, and when demand for vaccination decreased because of physical distancing requirements/community reluctance, these achievements are attributable to the adopted strategy for organizing door-to-door immunization outreach sessions as well as SCI's uninterrupted support to Kenya MOH and local partners in project area.





