

MISSED OPPORTUNITY STUDY FOR VACCINATION IN HEALTH FACILITIES IN THE GAMBIA.

INTRODUCTION:

Since the inception of Expanded Programme on Immunization (EPI) in The Gambia in 1979 the country has been doing well. However the objective of meeting the target of having above 90% of fully immunized children is still a problem.

In order to find out what are the contributing factors to this the Gambia decided to undertake this study of missed opportunities for vaccination in health facilities in The Gambia. Within the country it is an established fact that our health services are well utilized by both mothers and parents and therefore the Department of State for Health decided to undertake this study to determine the extent of missed opportunities for vaccination that exists in the health facilities in The Gambia. Establishing the degree of missed opportunities for vaccination in the health facilities and their causes will help in raising the immunization coverage levels in the country.

The missed opportunity is when a health care visit during which a child of a women of child bearing age who is eligible for vaccination on the day of the visit and with no contraindication for vaccination does not receive the needed shots.

OBJECTIVES:

The objectives of the study are as follows:

1. To determine the extent of failing to administer vaccines simultaneously.
2. To determine false contraindication attached to immunizations
3. To review the attitudes of health workers towards clients
4. To determine the logistical problems associated with immunizations.
5. To determine the magnitude of refusal by the parent/family for their children to be immunized

METHODOLOGY.

The standard WHO EPI protocol for assessing missed opportunity for vaccination was adapted and used to conduct this study. It involved client exit interviews and reviews of health cards plus observations. All the public health facilities in the country were covered. The target age group covered in the study was 0-5years and women of childbearing exiting each health facility. A sample of ten children and ten women of childbearing age were interviewed. A sampling method of one in every 5 mothers was adopted.

RESULTS.

Table 1. Showing the number of children who have had up-to-date immunizations and the number of missed opportunity per division.

Division	No. of respondents.	No. fully immunised/immunization up-to-date	%	No of missed opportunities	%
Western division	121	104	86.	17	14
North Bank division-west	35	22	62.9	13	37.1
North Bank Division-East	45	34	75.6	11	24.4
Lower River Division	40	39	97.5	1	2.5
Central River Division	90	77	85.6	13	14.4
Upper River Division	60	55	91.7	5	8.3
Total	391	331	84.7	60	15.3

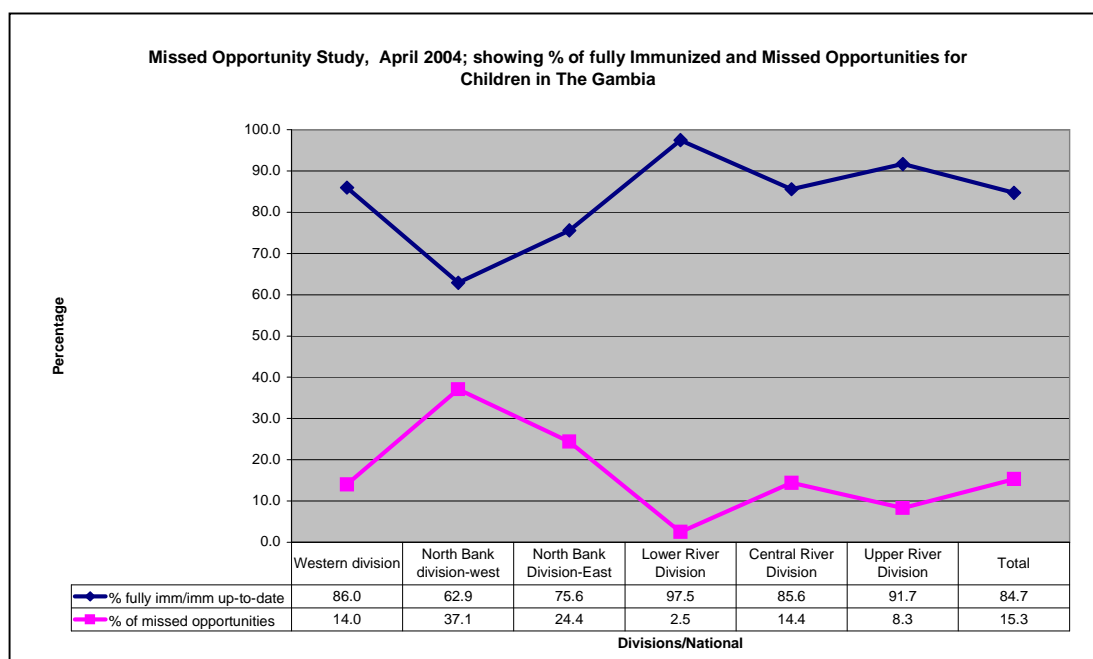


Table II. Showing the number of women of childbearing age who have had up-to-date immunizations and the number of missed opportunity per division.

Division	No. of women respondents	No. immunized up-to-date/fully immunized	%	No. missed opportunity	%
Western	95	89	93.7	6	6.3
North Bank-West	35	27	77.1	8	22.9
North Bank-East	45	43	95.6	2	4.4
Lower River	40	40	100	0	0
Central River	90	79	87.8	11	12.2
Upper River	60	56	93.3	4	6.7
Total	365	334	91.5	31	8.5

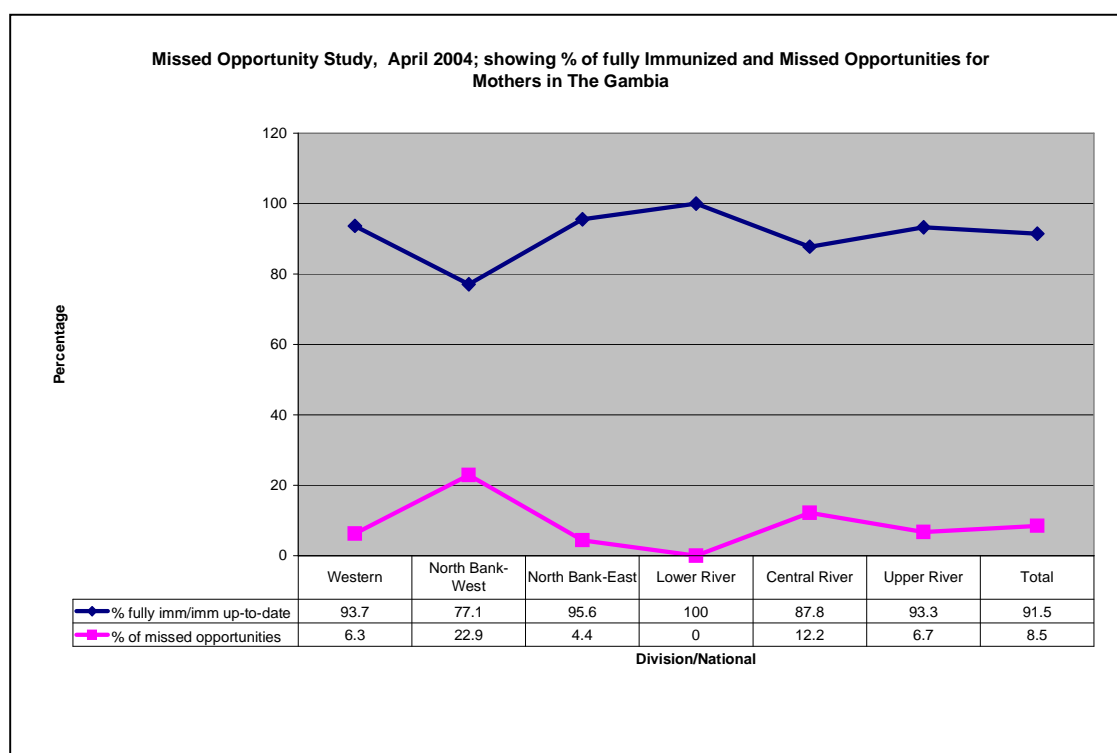
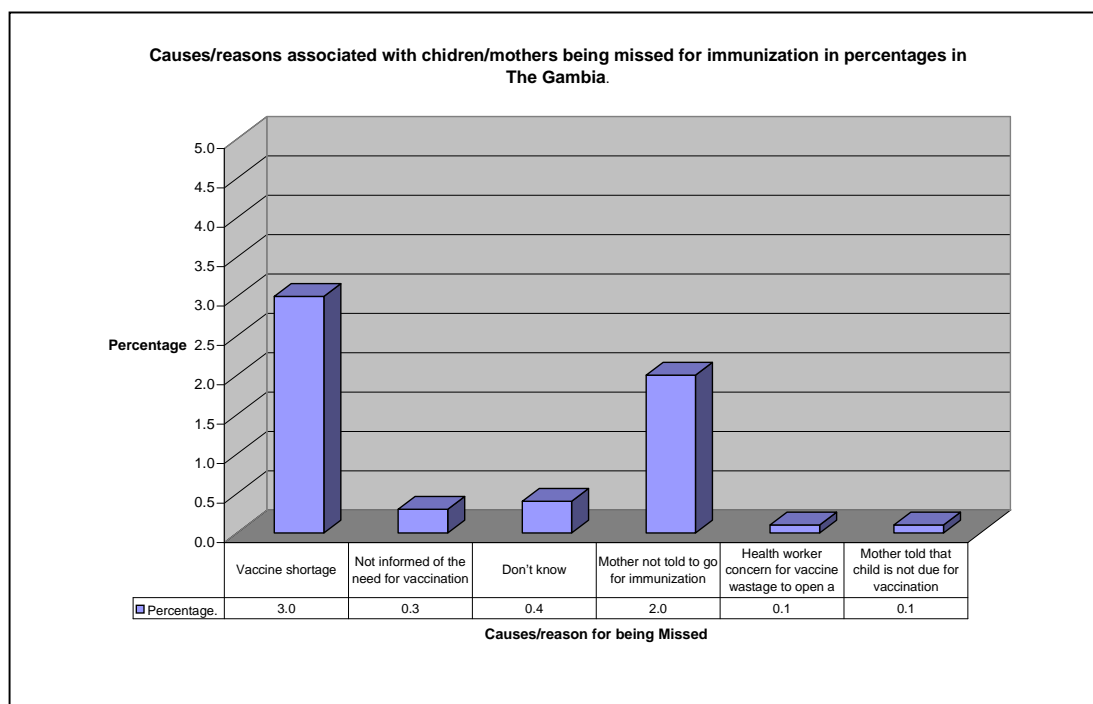


Table III. Showing the causes of missed opportunities and their percentages.

Causes	Cumulative total no. of respondents	No of respondents who said yes to the cause.	Percentage.
Vaccine shortage	756	23	3.0
Not informed of the need for vaccination	756	2	0.3
Don't know	756	3	0.4
Mother not told to go for immunization	756	15	2.0
Health worker concern for vaccine wastage to open a new vial	756	1	0.1
Mother told that child is not due for vaccination	756	1	0.1



Discussion.

From the study, missed opportunity for vaccination in the health facilities in the Gambia is not very serious 15.3% of a 391 children that is 60 missed their opportunity of being vaccinated. Although this shows that more efforts needs to be done to address the issues among which vaccine shortage tops the causes. The reasons for vaccine shortage at the health facility level could have been due to the inability of the health facility staff to properly forecast the vaccine needs because there was no vaccine shortage in country during the study period. The other cause that stood out next to vaccine shortage is mothers not told to go through the vaccination point for their vaccination and as a result the mother goes home and thereby the child misses to take the vaccine he/she is due to for that day. From the study North Bank Division-west has the highest percentage of Missed opportunity for children and pregnant with 37.1% and 22.9% respectively, followed by North Bank Division-east with 24% for children.

CONCLUSION AND RECOMMENDATIONS

Missed opportunity for immunisation in the Gambian health services for children and women of childbearing age is not a major problem with 15.3% and 8.5% respectively. Although there is still room for improvement from the part of the service providers, in the areas of clearly communicating to mothers that should receive the vaccine and also properly forecast the quantity of vaccines they would need for each clinic especially outreaches.

The recommendations therefore would be to:

- ❖ Intensify the supervision both at the Divisional and Health facility levels.
- ❖ Retrain health staff in calculating vaccine requirement for both catchment area and clinic sessions.
- ❖ To sensitize staff to be informing all mothers/caretakers of children or women of childbearing age who should receive the vaccine to go through the vaccination point for their vaccines.
- ❖ Frequently monitor their vaccine stock to avoid artificial vaccine stock outs.
- ❖ Rearrange/reorganize the clinic/immunisation sessions to avoid mothers going un-noticed without being vaccinated.