

ABSTRACT

Background:

Globally immunization remains a key strategy for reducing child illness and death in children below five years. However not every mother or caretaker can afford to take children to health facilities for the services due to economic and cultural barriers. The situation is worsened by increasing cost of health care services, attitude of health workers and lack of logistics to carry out quality immunization services especially in Sub Saharan Africa, Latin America and Asia. As a result many countries including Uganda established outreach immunization services purposely to bring services closer to those who cannot afford to reach established health facilities to take children for immunization in the effort to reduce child illness and death due to avoidable diseases.

Objective:

To assess routine outreach determinants influencing the utilization of immunization in two selected parishes of Rubaga division, Kampala district.

Methods:

Community based cross-sectional study was conducted in four villages of Mutundwe and Kasubi parishes in Rubaga division in the month of September. The study was designed based on reports from the nearby health facilities. Two villages with highest compliance to outreach immunization services and two with the lowest were selected to participate in the study. With the use of self-administered questionnaires and Key informant guides 200 respondents and 12 informants participated in the study. Analysis of data was performed using SPSS version 16.0 at univariate, cross tabulation and multivariate levels.

Major findings:

The study pointed at the perceived deterrent reasons (OR 2.3, C.I =0.891-6.045), Negative beliefs (OR 2.117, CI= 0.321-13.954) and Availability of OIS sites (OR 2.593, C.I=0.201-33.489) as factors to consider while planning for outreach immunization services in the two parishes. Attitude of health

workers, source of information for outreach services, distance to immunization sites, social demographic factors and other factors were not positive predictors of outreach services in this area.

Conclusion:

The need to address negative rumors on immunization services and creation of enough immunization sites in the division were essential in the effort to reduce child mortality and morbidity rates in the division. Government, Donors and the directorate of health services in KCCA need to invest more in those two issues rather than focusing on other issues commonly believed to influence health services such as staff enrollment, remuneration and mobilization in communities.

Recommendations:

1. Increased investment in infrastructural development of health services in the area especially the creation of more outreach posts.
2. Increased sensitization of people on the importance of outreach immunization services through creating a group of people to counteract negative rumors.
3. Provision of logistics such as vaccine carriers, motorcycles for staff and umbrellas may facilitate the importance of the created immunization sites in the area.