

Background: Immunization refers to a process in which an individual's body becomes resistant or immune to infections through administration of a vaccine. The body's own immune system is stimulated by a vaccine to protect it from disease conditions (WHO, 2014).

Globally, immunization has proven to be a success in the eradication and control of various disease conditions (WHO, 2014). An estimation of two to three million deaths are effectively averted on a global scale each year through the use of immunization (WHO, 2014).

In Uganda, the immunization coverage for polio, measles and diphtheria is 85%, 81% and 85% respectively (AHSPR 2012/2013 financial year). Although, there was a 90% increase in immunization coverage in every district, most districts were still slow in the uptake of immunization services (UNEPI, 2013) making this study worthy of investigation thus the main aim of this study is to conduct a research on the factors influencing the uptake of immunization services for children under five years in the Somali community of Kisenyi, Kampala district and thus recommend appropriate measures for increased uptake of the immunization services.

The Main Objective: To assess levels of uptake, investigate parental factors, determine socio-economic and health systemic factors that influenced uptake of immunization services among the Somali community leaving in Kisenyi, a Kampala suburb.

Methods: The study was conducted using a descriptive cross sectional study in which the researcher administered questionnaires on a total of 138 respondents within the Somali community. The data was analyzed using SPSS version 16.0 and Microsoft excel and presented the findings in pie charts, bar graphs and frequency tables.

Results: 88% of the respondents had their children complete all the recommended doses of vaccines. Married and educated parents were likely to take children for immunization.

Households with higher socio-economic status had their children complete immunization. It was evident that parental factors such as knowledge of the immunization schedule ($X^2 = 10.829$, p-value 0.025); fear of outcome ($X^2 = 9.919$, p-value 0.015); and commitment to complete dose ($X^2 = 10.123$, p-value 0.027) influenced immunization among the Somali community. Health system factors such as distance of facility ($X^2 = 10.422$, p-value 0.024); means of transport ($X^2 = 7.152$, p-value 0.0165); attitude of health worker ($X^2 = 9.148$, p-value 0.018) and effectiveness of vaccine ($X^2 = 15.711$, p-value 0.001) influenced uptake of the immunisation services among the Somali community.

Conclusion: Adherence to completion of immunization among the Somali community was still low.

Recommendations: There should be health education activities to inform them of the health benefits immunization to their children and the community in order to prevent common communicable and yet preventable diseases. This will reduce sickness and death among the children under five years of age among the Somali communities.