National immunization days and child health days

National immunization days (NIDs) originated as one-day mass polio vaccination campaigns across the developing world. NIDs, which still take place in many countries, are supplementary and do not replace routine immunization. Their original aim was to prevent the spread of polio by immunizing all children under the age of five, regardless of their previous polio vaccination history.

The concept of setting aside a day for mass interventions on child health is not new. Successful trials of days took place in the 1980s in such places as Burkina Faso, Colombia and Turkey. More recently, active civil wars have been halted to provide days of tranquility that allow children to be safely vaccinated in such countries as Angola, Sierra Leone and Somalia. Mass vaccinations allow for economies of scale, as skilled professionals can supervise a cadre of volunteers, especially for oral polio vaccine, which does not require a needle and syringe.

Child health days have expanded the scope of interventions beyond polio immunization to include vitamin A supplementation, and in the case of Zimbabwe, distribution of insecticide-treated mosquito nets and other immunizations. Other countries that conduct similar events include Nepal and Nigeria.

Nepal's national vitamin A programme is particularly noteworthy because it employs an existing network of female community health volunteers to deliver the supplements. The programme is found to be highly cost-effective, with a cost per death averted estimated at US$327–$397, while the cost per disability-adjusted life year (DALY) gained was approximately US$11–$12. The programme was steadily expanded, from the original 32 priority districts to cover all 75 districts, in annual increments of 8–10 districts over an eight-year period. Expansion was assisted by using national immunization days to advance coverage.

Integrating the delivery of a range of interventions in a single location and at a single point in time, child health days are efficient for both households and health service providers. Related concepts, such as child health weeks, are enhancing the opportunities to reach a large number of usually excluded children with essential interventions.

See References, page 106.