**2018 PAKISTAN FACTSHEET**

**DEMAND GENERATION FOR ROUTINE IMMUNIZATION**

**KEY FACTS**

- 22% of caretakers were fully aware of the vaccination schedule.
- 67% of caregivers trust doctors and LHWs as a reliable source of information about immunization.
- Less than 50% for all diseases are Spontaneous awareness of Vaccine Preventable Diseases (VPDs) among LHWs.
- 95% of caregivers believed that vaccinations prevent diseases.

**MILESTONES FOR DEMAND GENERATION IN ROUTINE IMMUNIZATION (RI)**
- National Communication Strategy
- Provincial Communication Strategies and Action Plans
- KAP Study conducted routine immunization
- Government funds allocated for demand generation
- Implementation research to improve social mobilization initiatives

**TIMELINES**

1. Disease awareness and risk perceptions for vaccine preventable diseases among caregivers - DEMAND
2. Doubts about the efficacy and safety of vaccines - DEMAND
3. Alternative means of prevention - DEMAND
4. Missing home-based vaccination cards/immunization record - DEMAND
5. Transport and waiting time - DEMAND & SUPPLY
6. Healthcare provider risk perception - SUPPLY
7. Unavailability of vaccines and vaccinators - SUPPLY

*National KAPB Survey 2014*

"We trust the doctors and lady health workers of our area and consult them regarding child health."
(Mother - Lahore, Punjab)
WORKING TOGETHER TO REACH MORE CHILDREN WITH IMMUNIZATION SERVICES | By Fatima Shahryar

PESHAWAR DISTRICT, PAKISTAN

“I feel our collective productivity has improved manifold, ever since we started working together with the Community Based Vaccinators (CBVs) from the Polio Eradication Initiative (PEI),”

said Syed Mussayab Shah - vaccinator posted at Gulbahar Civil Dispensary, Peshawar district, Khyber Pakhtunkhwa (KP).

“We are determined to reach and vaccinate every child in our area. And to ensure this, we exchange information and notes with the CBVs twice every week.”

The Civil Dispensary is the only government health facility in the area that caters to the residents of Gulbahar and also those living in adjoining slums. The CBVs from adjoining areas are attached to the government health facility where they share their micro plans containing, housing maps and vaccination details of children under five with the vaccinators from the Expanded Program on Immunization (EPI). The CBVs also refer clients from their communities to the health facility where immunization record is updated regularly.

Despite the residents living in concrete housing units in urban slums, access to health care is still a persisting challenge. The urban and peri-urban slums are often unrecognized, lack required infrastructure and are given low priority by local health authorities. Peshawar as the provincial capital hosts migrant population from all over KP including FATA. With this increasing population, it became a challenge for the EPI program to provide immunization services to children living in the slum areas. As a solution, the two programs – EPI and PEI collaborated to benefit from each other’s resources and reach more children under five years of age.

“Keeping record of families in urban slums is a very difficult job. Families are constantly moving in and out from here — and many of those that move in, usually do not have an EPI/vaccination card. They can only recall the number and time of vaccination. However, now I have all the families, pregnant mothers and children under five from this community registered and their data is maintained at the Gulbahar Civil Dispensary,”

shared Tabassum Shabir, the CBV from Peerza Gala, UC Sikandar Town, Peshawar.

Reflecting on this synergy, Dr. Akram Shah, Director EPI, KP said,

“With increased migrant population and urbanization during the past decade, the burden of ensuring access to basic life and health resources to all has also increased. The synergy between the two programs has been a blessing as we are reaching more children with vaccination every day, including those living in urban slums.”