



THE REPUBLIC OF UGANDA
MINISTRY OF HEALTH

THE ROLE OF SCHOOLS IN PROMOTING ROUTINE IMMUNISATION



**Educate pupils about Routine
Immunisation and mobilise
parents to take their children for
immunisation**



World Health
Organization



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for every child

INTRODUCTION

Immunization is one of the most important health interventions that protects people (especially children, boys and girls and women of child bearing age) from vaccine preventable diseases.

The Uganda National Expanded Program on Immunization (UNEPI) was established in 1983 with a mandate of ensuring that infants and women of child bearing age are fully immunized. In 1987, the program was re-launched by His Excellency the President of Uganda with a call on the leaders to support immunization services throughout the country.

The goal of UNEPI programme is to ensure that all children under one year (boys and girls), the 10 year old girls and women of child-bearing age, are fully vaccinated with high quality and effective vaccines against the following vaccine preventable diseases: Tuberculosis, Polio, Whooping Cough, Diphtheria, Tetanus, Measles, Hepatitis B infection, Cancer of the Cervix, Haemophilus influenza and Pneumococcal infections.

According to the Uganda Demographic Health Survey of 2016, the National Immunization Coverage for the following antigens/vaccines were:

2016 National Immunization Coverage Results

VACCINE	TARGET (%)	COVERAGE (%)
BCG	90	96%
DPT-HepB-Hib 3	90	79%
PCV 3	90	64%
Polio 3	90	66%
Measles	90	80%

Source: UDHS - 2016

The National target for all vaccines is 90%. However, the coverage was below the desired target, except for BCG. **This shows that the uptake is low due to inadequate awareness.**

The low coverage above is the reason the country has been experiencing outbreaks of some vaccine preventable diseases e.g. Measles. This shows that some children have not been fully immunized.

Schools are key avenues and partners for successful immunisation. Schools have the targeted populations (age-groups) for immunization, like the under five year children, the 10 year old girls and the 15 years and above adolescent girls. The school setting is also ideal for execution, education and promotion of immunisation. This therefore calls for urgent action to get all children immunized.



This information package therefore is aimed at providing you (the school headteachers, administrators, management committees and teachers) with basic facts about immunization. The package also contains key messages which you can deliver to teachers, school nurses, parents, guardians and school children, to ensure that all children in your schools are fully immunized.

Facts about immunization

- Immunization is important, it protects children against the vaccine preventable diseases.
- Vaccines are effective when given at the right time according to the immunization schedule
- A child should be taken for immunization 5 times to complete their doses before the 1st birthday.
- Girls aged 10 years in and out of school should receive two doses of HPV to be fully protected against cancer of the cervix.
- All Women of child bearing age (15-49 years) should receive Tetanus vaccination, five times to be fully protected.
- Remind parents, guardians and school children to keep their Child Health Cards.
- It is safe to immunise a child who has a minor illness, disability or is malnourished.
- The vaccines are **SAFE, EFFECTIVE, FREE** and available at Government and Non-Government facilities. The vaccines are approved by Ministry of Health, World Health Organisation (WHO) and UNICEF.

All children have a right to full immunisation



BENEFITS OF IMMUNIZATION

- It strengthens a child's ability to fight diseases and reduces the chances of suffering from childhood immunisable diseases
- It protects children from liver disease and cancer later on in life
- It prevents complications such as lameness and blindness in children
- It reduces the burden/costs on parents/caregivers and communities in terms of time and money spent on treatment. This contributes to socio-economic development
- It contributes to a child's proper growth and development
- It protects the entire community from childhood vaccine preventable diseases
- It protects the mother and her unborn baby from Tetanus
- Once a child is immunised, he/she is protected against vaccine preventable diseases for his/her entire life
- Makes children healthy and strong - this enables them to perform better in class

Who should be immunised?



All children below one year



Girls aged 10 years in and out of school



All adolescent girls and women of child bearing age (15-49 years)



Who provides immunisation services?

Immunisation services are provided by qualified health workers.

How is immunisation done?

Immunisation is done by administering vaccines through the mouth and/or by injection



Giving vaccines through the mouth



Giving vaccines by injection





List of Vaccine preventable diseases

Disease	Description	Vaccine
<ul style="list-style-type: none"> Tuberculosis 	Tuberculosis -- or TB, as it's commonly called -- is caused by bacteria. It is a contagious infection that usually attacks the lungs.	BCG
<ul style="list-style-type: none"> Poliomyelitis 	Polio is a highly infectious viral disease that can cause irreversible paralysis.	OPV/IPV
<ul style="list-style-type: none"> Diphtheria 	Diphtheria is a highly contagious and potentially life-threatening bacterial disease that usually affects the upper respiratory tract, but can also infect the skin.	DPT --HepB -Hib
<ul style="list-style-type: none"> Whooping Cough 	Whooping cough is a serious disease caused by bacteria. Whooping cough is also known as pertussis.	DPT -HepB -Hib
<ul style="list-style-type: none"> Tetanus 	Tetanus is caused by a bacterium. Common in dirty wounds or in the umbilical cord if it is not kept clean. It produces a toxin which can cause serious complications or death.	DPT-HepB --Hib
<ul style="list-style-type: none"> Measles 	Measles is a highly contagious disease caused by a virus, which usually results in a high fever and rash, and can lead to death.	Measles Vaccine
<ul style="list-style-type: none"> Hepatitis B infection 	Hepatitis B is a viral infection that attacks the liver.	DPT --HepB -Hib
<ul style="list-style-type: none"> Cancer of the Cervix 	Human papilloma virus is the most common viral infection of the reproductive tract, and can cause cervical cancer, other types of cancer, and genital warts in both men and women.	HPV vaccine
<ul style="list-style-type: none"> Pneumococcal infections (pneumonia and meningitis) 	Pneumococcal diseases include pneumonia, meningitis as well as sinusitis and bronchitis.	Pneumococcal Conjugate Vaccine
<ul style="list-style-type: none"> Haemophilus Infuenza 	Haemophilus influenza type b (Hib) causes meningitis and pneumonia.	DPT --HepB -Hib
<ul style="list-style-type: none"> Diarrhoea 	Rotaviruses are the most common cause of severe diarrhoeal disease in young children.	Rotavirus vaccine

IMMUNISATION SCHEDULE

The immunisation schedule helps you to know the type of vaccines and when you are supposed to receive it. There is a schedule for:

1. Schedule for Children below one year

- The schedule reflects all the vaccines a child should get before their first birthday and to be considered as fully immunised
- Child must be taken for immunisation 5 times before their first birthday, according to the immunization schedule below

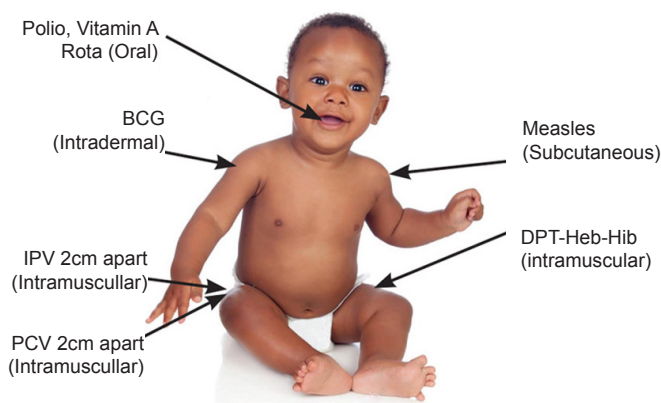
NUMBER OF VISITS	AGE OF THE CHILD	VACCINE	DISEASE PREVENTED	HOW AND WHERE VACCINATION IS GIVEN
1st	AT BIRTH	Polio 0 BCG	• Polio • Tuberculosis	2 Drops in the mouth Injection on the right (upper arm)
2nd	AT 6 WEEKS (One and a half month)	Polio 1	• Polio	2 Drops in the mouth
		DPT-HEPB-HIB 1	• Diphtheria, • Whooping cough, • Tetanus, • Hepatitis B, • Haemophilus influenza type B	Injection on the (left thigh)
		Pneumococcal Conjugate Vaccine 10 (PCV1)	• Meningitis and • Pneumonia (caused by streptococcal Pneumoniae)	Injection on the (right thigh)
3rd	AT 10 WEEKS (Two and a half months)	Rotavirus Vaccine1	• Diarrhoea	Slow release into the mouth (Baby sucks)
		Polio 2	• Polio	2 Drops in the mouth
		DPT-HepB-Hib 2	• Diphtheria, • Whooping cough, • Tetanus, • Hepatitis B, • Haemophilus influenza type B illnesses	Injection on the (left thigh)
		Pneumococcal Conjugate Vaccine 10 (PCV 2)	• Meningitis and • Pneumonia (caused by streptococcal Pneumoniae)	Injection on the (right thigh)
4th	AT 14 WEEKS (Three and a half months)	Rotavirus Vaccine 2	• Diarrhoea (caused by Rotavirus)	Slow release into the mouth (Baby sucks)
		Polio 3	• Polio	2 Drops in the mouth
		Injectable Polio Vaccine (IPV)	• Polio	Injection on the (left thigh)
5th	AT 9 MONTHS	Pneumococcal Conjugate Vaccine 10 (PCV 3)	• Diphtheria, • Whooping cough, • Tetanus, • Hepatitis B, • Haemophilus influenza type B illnesses	Injection on the (right thigh)
		Vitamin A Supplement	• Prevent blindness and strengthen resistance against other diseases	Drops in the mouth
	At 6 months and every 6 months until child is 5 years	Vitamin A Supplement	• Prevent blindness and strengthen resistance against other diseases	Drops in the mouth
		Measles Vaccine	• Measles	Injection on the (left arm)

Parents take your children for immunisation 5 times before their first birthday
All vaccines are SAFE, EFFECTIVE and FREE
(For further information please contact: Toll free line: 0800100066)



EPI vaccines and route of administration


Vaccines are given to a child through the mouth (orally) and/or by injection.





2. Schedule for TD Vaccine




- The schedule for Tetanus Diptheria (TD) shows the number of doses a women should get to be fully immunised against Tetanus and Diptheria.



UGANDA TETANUS - DIPHTHERIA IMMUNISATION SCHEDULE


Number of visits	Age	Vaccine given	Disease Prevented	How and where the vaccine is given
1st Dose	Women of Child bearing age (At 15 to 49 years)	Tetanus Diptheria (TD1) Vaccine	Tetanus Diptheria	Injection on the upper arm
2nd Dose	1 Month after 1st dose	Tetanus Diptheria (TD2) Vaccine	Tetanus Diptheria	Injection on the upper arm
3rd Dose	6 Months after 2nd dose	Tetanus Diptheria (TD3) Vaccine	Tetanus Diptheria	Injection on the upper arm
4th Dose	12 Months (1 Year) after 3rd dose	Tetanus Diptheria (TD4) Vaccine	Tetanus Diptheria	Injection on the upper arm
5th Dose	12 Months (1 Year) after 4th dose	Tetanus Diptheria (TD5) Vaccine	Tetanus Diptheria	Injection on the upper arm

The TD vaccine protects Women of Child Bearing Age from Tetanus and Diptheria
 All vaccines are **SAFE, EFFECTIVE** and **FREE**
 For further information please contact: Toll free line: 0800100066

3. Schedule for HPV Vaccine

- The HPV schedule shows the number of doses to be given and to be fully immunised against cervical cancer.



UGANDA HPV VACCINE IMMUNISATION SCHEDULE

Immunisation Schedule for HPV vaccine to protect girls against Cancer of the Cervix

Number of Visits	Age	Vaccine given	Disease prevented	How and where the Vaccine is given
1 st Dose	Girls at 10 years of age, in and out of school	Human Papilloma Virus (HPV) Vaccine HPV 1	Cancer of the Cervix	Injection on the upper arm
2 nd Dose	Six Months after 1 st dose	Human Papilloma Virus (HPV) Vaccine HPV 2	Cancer of the Cervix	Injection on the upper arm

Key Messages on Immunisation

- Immunisation is important for the overall well-being and survival of a child.
- Every child should be taken 5 times to the health facility to ensure completion of the immunisation schedule before the 1st birth day.
- It is safe to immunise a child who has a minor illness, disability or is malnourished.
- It is safe to give multiple vaccine injections in one visit..
- Children have a right to be immunised.
- All teachers and school management committees, have a responsibility to ensure that all children are fully immunised against childhood vaccine preventable diseases.
- Immunised children are the foundation for social, economic development of the nation.
- The vaccines are SAFE, EFFECTIVE, FREE and available at government and non-government facilities. The vaccines are approved by Ministry of Health, WHO and UNICEF.

Examples of Community Case Definitions

Disease / Condition	Case Definition (Key signs which the affected persons shows)
Diseases Targeted for Eradication or Elimination	
Acute Flaccid Paralysis (AFP) Polio	Any sudden lameness in a child, less than 15 years of age
Neonatal Tetanus (NNT)	Any newborn who is normal at birth, and then after two days, becomes stiff and unable to suck or feed or has convulsions.
Epidemic Prone Diseases	
Measles	Any person with fever and a skin rash
Meningitis	Any person with fever and neck stiffness



Roles of schools in promoting and supporting immunisation

As schools administrators, you are expected to:

- Ensure that every pupil/ student produces a fully completed immunisation card upon enrolment in school for the first time.
- Link up with Health Facilities to make sure your school is mapped for immunisation services.
- Identify pupils/ students to be immunised and also look out for those who missed immunization.
- Demand for the immunisation services to be organised and conducted in your school from the nearby health facility.
- Ask for information and posters, the schedules from the nearest Health Facility and display and use the materials to inform and educate your students
- Support school based immunisation activities e.g. vaccination against cancer of the cervix for Primary four girls, De-worming, Vitamin A supplementation etc.
- Educate the students/pupils and parents about the benefits of immunisation.
- Inform pupils/students to remind their parents to take their siblings for immunisation.
- Incorporate health related information especially on immunisation into school activities e.g. school assembly, health talks, quarterly review meetings.
- Identify children with signs and symptoms of vaccine preventable diseases, e.g. skin rash, and refer them to the nearby health facility immediately.



For more information about immunisation

Contact: The Health Promotion and Education Division
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