

# **ET**

# BEHAVIOR PROFILE: FULL COURSE OF IMMUNIZATIONS

**HEALTH GOAL** 

Improve maternal and child survival



Caregivers complete a full course of timely vaccinations for infants and children under 2 years

Percentage of children 12-23 months who had received all 8 basic vaccinations

# BEHAVIOR ANALYSIS STRATEGY

STEPS

#### EACTORS

## SUPPORTING ACTORS AND ACTIONS

## POSSIBLE PROGRAM STRATEGIES

What steps are needed to practice this behavior?

- Accept first course of vaccinations at birth or at the first well-baby visit
- 2. Mobilize transport, resources, and logistics
- Seek immunizations on schedule from a qualified provider
- Complete all immunizations per age requirements

What factors may prevent or support practice of this behavior? These should be analyzed for each country context.

#### STRUCTURAL

**Service Experience:** Caregivers do not return for immunizations because vaccines were not available during past visits

Accessibility: Caregivers do not use immunization services because they are o. en located far from households and they lack transportation options

**Accessibility:** Caregivers are unable to immunize their children because of lack of vaccines

## **Service Provider Competencies:**

Caregivers do not visit health providers for vaccinations because they don't trust them or believe they are doing a good job

## **Service Provider Competencies:**

Caregivers do not visit health providers because they feel mistreated by them

#### OCIAL

**Norms:** Many caregivers do not take their child for vaccinations because of religious opposition

# INTERNAL

**Attitudes and Beliefs:** Many caregivers do not take their child for vaccinations because they fear side effects

Attitudes and Beliefs: Many caregivers do not take their child for vaccinations because they feel that immunization is not important and does not prevent illnesses

**Knowledge:** Caregivers do not adhere to the immunization schedule because they do not know about the need for immunizations

**Knowledge:** Caregivers do not adhere to the immunization schedule because they do not know when theor child should return for their next vaccine

Who must support the practice of this behavior?

#### INSTITUTIONAL

**Policymakers:** Ensure vaccinations are available through regular mobile outreach

**Managers:** Conduct regular supervision to reinforce competencies of providers

**Providers:** Discuss importance, schedule and any concerns regarding vaccinations with all new mothers

**Logistics Personnel:** Actively monitor stocks of vaccine and cold chain viability

## COMMUNITY

**Religious Leaders:** Actively support and encourage all new families to fully vaccinate their children

#### HOUSEHOLD

**Family Members:** Encourage and provide support to caregivers to complete immunization schedule

How might we focus our eo rts based on this analysis?

#### **ENABLING ENVIRONMENT**

Partnerships and Networks: Increase ownership and governance of programs by involving local communities in the planning and supervision of activities

**Policies and Governance:** Ensure vaccinations are oe red for free and explore reimbursement or vouchers for transport

Policies and Governance: Ensure vaccine providers are both men and women or from religious groups to alleviate religious and cultural concerns

## SYSTEMS, PRODUCTS AND SERVICES

Quality Improvement: Implement pre and inservice education training and learning opportunities for health care providers that focus on vaccination, such as to proactively address caregiver concerns during consultations

#### DEMAND AND USE

**Communication:** Highlight significant benefits of vaccinating children in communication activities to ensure that caregivers place high priority on immunization completion

**Communication:** Promote use of the Child Health Card to help families track immunizations