

# UNDERIMMUNIZATION OF NIGERIAN CHILDREN

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## INTRODUCTION

Nigeria's immunization coverage for children is the lowest in the world in which 3.9 million children were unvaccinated (WHO & UNICEF, 2017). UNICEF, GAVI (Vaccines Alliance), and Melinda & Bill Gate Foundation in collaboration with Nigerian Federal Ministry of Health have shown commitment to make vaccines available in Nigeria. However, Children in Nigeria continue to have low immunization coverage due to humanitarian crises including armed conflict, natural disasters, and hard to reach areas. 5.9 million babies are born in Nigeria every year.



## Trends in Childhood Vaccination:

It is an important measure of immunization coverage of the proportion of children age 12-23 months.

A child is considered to have received all basic vaccination if he or she has received a bacillie calmette-Guerin (BCG) vaccination against tuberculosis; three doses of DPT vaccine to prevent diphtheria, pertussis, and tetanus; at least three doses of polio vaccine; and one dose of measles vaccine.

The Local government is the major health implementation units in Nigeria. There are 774 local governments with the responsibility of overseeing the immunization coverage.

## INTERVENTION

The federal, state, and local government areas, including the stakeholders, are the players to ensure there is a steady flow of vaccines and immunization are carried out successfully. The federal government of Nigeria procures the vaccines with the assistance of UNICEF. The state ministry of health is expected to support and supervise the local government. The state provides fund and equipment to ensure vaccination of children is carried out successfully.



## ADDRESSING LOW IMMUNIZATION OF NIGERIAN CHILDREN

- Allocate 15 percent of the budget to health to meet Abuja contract with African countries
- Governments release of funds are more regular and timely for immunization
- Improve communication and information sharing among the National, State, and Local Government Areas, and community levels
- Partners with communities
- Introduce solar refrigerators to each facility
- Implement Reaching Every Ward-use of boats, motorcycles, and Immunization Plus
- Improvement of quality data is necessary to determine weak performing areas and targeted
- Stakeholders undertake responsibility



Percentage of Children age 12-23 months who received all basic vaccination

1990	1999	2003	2008	2013	2018
29%	17%	13%	23%	25%	31%

Percentage of children age 12-23 months who received no vaccination

1990	1999	2003	2008	2013	2018
36%	38%	27%	29%	21%	19%

Nigeria Demographic and Health Survey 2018

## BARRIERS TO IMMUNIZATION

**Low Budget:** Nigeria continues to allocate a small percentage of the budget to health. In 2001, African countries agreed to allocate 15 percent of the budget to health. Unfortunately, Nigeria has failed to do so; the highest was in 2012 of 5.95 %. In 2018, the country allocated 3.9%.

**Delivery, transportation, and storage of vaccines:** Distribution of vaccines, transportation, and storage continues to be a massive problem in Nigeria.

Reaching the target population is lacking; vaccines could not reach the communities in need. Select vehicles carrying the vaccines are not reliable

Vaccines are poorly stored- the cold chain is not adequate (fridge or freezer). Not frequently maintained

**Availability of vaccines:** World Health Organization and GAVI staff provide monthly information on the delivery of routine immunization vaccines. however, the availability of vaccines is disrupted by lack of continuous power/electricity for running the cold chain equipment

Sometimes the cold chain equipment is broken and not properly maintained

**Lack of funding:** by the local government Areas- do not have reliable vehicles to reach hard to reach the target population

**Poor community involvement:** members do not participate actively.

**Distance to walk:** Seventy-one percent of Nigerians have access to the primary health center facility located within a 5km or 3 miles' radius of their homes.

**Health facilities:** The quality of care is low. Basic requirements are lacking, such as power supply, water, equipment, and drugs (vaccines).



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