

**AN INVESTIGATION INTO THE DETERMINANTS OF THE LOW UPTAKE
OF MEASLES VACCINATION OF THE CHILDREN OF 9-12 MONTHS IN
MATHARE , NAIROBI COUNTY, KENYA**

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REG. NO. PGDME/2014/66585

**RESEARCH PROJECT SUBMITTED IN PARTIAL FULFILLMENT OF THE
REQUIREMENT FOR THE AWARD OF POSTGRADUATE DIPLOMA OF
MOUNT KENYA UNIVERSITY**

JULY, 2015

ABSTRACT

Immunization is the cornerstone of health care policy and a key component in infectious diseases control. A country with effective and efficient health care systems is likely to achieve its development objectives faster than those with ineffective systems. This study was conducted in Mathare No. 10 slum. The purpose of the study was to assess measles vaccine uptake among children aged between 9- 12 months at the study area. The vaccine uptake at Mathare slums has been sub-optimal and the reasons not yet determined, therefore the need for the study. Despite the Kenyan government commitment to achieving good health for 'ALL' vide vision 2030 and Millennium development goals (MDGs) through subsidized health schemes, there is still low-uptake of Measles vaccination in the area. The specific objectives of the study were to find out the determinants that may be contributing to low-uptake of Measles vaccination. The study investigated demographic characteristics of the caregivers as well as those of the children. Specifically it investigated the level of education of the mother; the level of knowledge of (caregiver) mother; the child birth order and accessibility to facility (distance). The study was based on the Needs Hierarchy Theory that was developed by Abraham Maslow. The theory states that human needs are fulfilled in an orderly manner, with physiological needs being the first to be satisfied and highest needs fall under self-fulfillment or self-actualization category. The target population for the study was 5,000 children who were between 9 and 12 months. The researcher selected a sample of 384 children using simple random sampling method. Simple random sampling technique was more appropriate because it allows for generalizations of findings of the study and minimization of bias. In a cross-sectional investigation the sampled 384 caregivers of children aged 9-12 months were interviewed using structured interview schedules and questionnaire. Structured interview schedules were used to collect on demographic and personal characteristics of the mother as well as accessibility to facility. Data on caregivers' attitude was collected using a questionnaire with 5-point Likert scale. Data validity and reliability were ensured by pre-testing the structured interview schedules and by observing ethical issues. Authority to conduct the study was obtained from the area chief and confidentiality of the collected information was observed. Data was coded, keyed-in and analyzed using Microsoft Excel and SPSS. Presentation of data was in form of frequency tables, and charts. Analysis of data was done using the Chi square and Fisher's exact tests. Differences in proportions between the unvaccinated and vaccinated groups were compared using the Chi square and Fisher's exact tests. Out of 384 children, 296 (77.1%) had received Measles vaccine while 188 (22.9%) had not. The study findings showed that caregivers' knowledge of (KEPI) immunization schedule and measles vaccine and distance to the nearest facility were associated with increased uptake of Measles vaccination. The findings also revealed that the unvaccinated group lacked knowledge on immunization and measles vaccination and they lived far from immunization point. However level of education of caregiver and child birth order did not show any significant difference between the groups. According to the findings there is need for interventions that target impartation of knowledge on measles vaccine and childhood immunization to caregivers.