

All children should enjoy the benefits of immunization

Immunization is one of the most beneficial public health interventions of our time, protecting the population from preventable diseases (like poliomyelitis, diphtheria, measles, whooping cough, and pneumonia) and death. In 2008, the World Health Organization estimated that 17% of deaths in children aged under 5 years were due to preventable diseases¹, representing 1.5 million deaths. This is a colossal yet avoidable loss.

Despite the improvements made in global immunization coverage, a substantial number of children remain at risk. Eighty-six percent of children worldwide received three doses of a diphtheria-, tetanus- and pertussis-containing vaccine (DTP3)² in 2015, leaving an estimated 19.4 million children, corresponding to 1 in 7 children, under or unimmunized³. In South Sudan the situation is even grimmer, 1 in 2 children missed lifesaving immunization services in 2015⁴. Children who are under or unimmunized miss out on its benefits, and ultimately are deprived of their right to good health and life.

No child should die of a preventable disease, especially in the era of available potent and improved vaccines. Because of the benefits of immunization, access and uptake barriers should be identified and tackled promptly. Important barriers include lack of knowledge about the benefits or availability of immunization services among parents and guardians, poor access to health services due to physical or political challenges, restrictive traditional beliefs, and poverty. These barriers and the prevailing situation in South Sudan, which is characterized by transient populations, mass displacements, and pockets of insecure areas, lead to many children not having access to basic health services, including to life-saving immunization services. *A field experience in 2014 revealed that communities living along administrative boundaries frequently missed scheduled immunization services because of the uncertainty around who had the mandate to deliver immunization services in these communities.* It is these types of complexities that hinder access and sustained use of immunization services in South Sudan, leading to a high number of children missing vaccinations and being unnecessarily exposed to preventable diseases and death.

IN SOUTH SUDAN 1 IN 2 CHILDREN MISSED LIFESAVING IMMUNIZATION SERVICES

These barriers notwithstanding, deliberate efforts must be made to reach all children. First, communities with no or little access to immunization services should be identified. Second, factors affecting access and uptake of immunization services in these communities should also be identified. Thirdly, during planning at national and subnational level, the needs of these communities should be prioritized and measures instituted to enable tracking of progress. Lastly, beneficiaries should be part and parcel of the planning, implementation, and monitoring of immunization services. It is everyone's (community members, government, and private for-profit and non-profit organizations) responsibility to make the benefits of immunization accessible to all children, most especially children in South Sudan who are in a very precarious situation.

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1. http://apps.who.int/immunization_monitoring/diseases/en/ and <http://www.who.int/gho/immunization/en/-2008>
2. DTP3 is used as the main indicator of immunization coverage as it captures the ability of the system to identify and routinely administer three doses of vaccine to the same children.
3. WHO. Global Health Observatory Data Repository, 2015. http://apps.who.int/gho/data/view.main_CM1300RWB?lang=en
4. http://www.who.int/immunization/monitoring_surveillance/data/ssd.pdf