

Reaching the hard to reach with vitamin A supplementation in low-performing health zones of DR Congo

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Background: Since 2002, mass campaigns have been held twice-yearly to reach children 6-59 months with vitamin A supplementation (VAS) and deworming, with coverage consistently over 80% in the majority of DR Congo's 515 health zones (HZ). However, between 2006-2010, 25 HZ achieved coverage <80% in at least 4/10 rounds, and were selected for formative research to identify barriers and motivators to receipt of VAS and inform delivery strategy.

Methods: Based on the formative research findings, a communication strategy was implemented to address barriers (husband disapproval, rumors, access to services) and motivators (will of God, self-motivation) in six low-performing HZ. A post-event coverage survey was conducted in December 2012 after two rounds of implementation using a WHO EPI methodology 30x30 cluster design to evaluate the effectiveness of these activities and identify remaining barriers to receipt.

Results: Eighty-five percent of caretakers reported their child received VAS during the last campaign (n=909) compared with administrative coverage of 104% and previous round administrative coverage of 72.8%. The primary sources of campaign information were town criers (65%), television (40%) and radio (40%). The most commonly cited reason for not receiving VAS was that the caretaker or child was not home when the distributors passed (37%).

Conclusion: Use of criers and television/radio spots broadcast in local languages were most effective in increasing awareness of the campaigns. Both community and national radio and television stations played a variety of communication advertisements prior to and during the campaign, which helped achieve coverage of over 80% to meet child mortality reduction guidelines.