

Validation of administrative coverage for vitamin A supplementation and deworming through Integrated National Immunization Days in Guinea

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Background: Since 2007, distribution of vitamin A supplementation (VAS) and deworming has been integrated with polio vaccination through twice-yearly National Immunization Days (NIDs) in Guinea. Although reported administrative coverage for VAS and deworming are consistently $\geq 90\%$, validation of coverage is needed as denominators are based on the number of children reached during the previous year and many districts report coverage of $>100\%$.

Methods: A post-event coverage (PEC) survey was conducted in the regions of Boké and Faranah to validate coverage following the NIDs in May 2013. Boké and Faranah regions were selected as their administrative VAS coverage was among the lowest (87%) and highest (102%) reported in Guinea, respectively. 900 caretakers were interviewed in each region using a PPS randomized 30x30 cluster design and WHO EPI sampling methodology.

Results: VAS coverage by PECS for children 6-59 months was similar in Boké (89.4%) and Faranah (92.4%) among children 6-59 months despite large variability in administrative data. Deworming coverage reported by PECS was significantly lower than VAS and polio coverage in Boké (73.9%, 88.9%, 87.1%,) and Faranah (65.2, 93.1%,91.8%), respectively, for children 12-59 months and significantly lower than deworming administrative coverage (Boke: 93.1%, Faranah: 111%).

Discussion: Despite significant variability in administrative coverage, VAS coverage measured by PEC survey in Boké and Faranah regions of Guinea was comparable and high. Deworming coverage however was significantly lower than that reported by administrative data and that reported for similar interventions. Follow-up is needed to address the large discrepancy between PEC and administrative data for deworming.