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# **BASICS** **TRIP REPORT**

## **Research and Training for an Immunization IEC Campaign in Kyrgyzstan**

***BASICS is a USAID-Financed Project Administered by  
The Partnership for Child Health Care, Inc.***

**Academy for Educational Development (AED)**

**John Snow, Inc. (JSI)**

**Management Sciences for Health (MSH)**

**1600 Wilson Boulevard, Suite 300; Arlington, VA, 22209; USA**



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**RESEARCH AND TRAINING FOR AN IMMUNIZATION  
IEC CAMPAIGN IN KYRGYZSTAN**

November 8 - December 4, 1994

**Raisa Scriabine**

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## TABLE OF CONTENTS

### Acronyms

Purpose of Visit .....	1
Background .....	1
Trip Activities .....	1
Health Service Providers .....	2
Conference Activities .....	5
Results and Conclusions .....	6
Follow Up Action .....	6

### Appendices:

Appendix I	BASICS Kyrgyzstan Qualitative Research Training Participants, November 1994, Bishkek
Appendix II	Agenda: Conference on Social Mobilization, November 30, 1994, Kyrgyzstan
Appendix III:	Participants - Conference on Social Mobilization, November 30, 1994, Bishkek, Kyrgyzstan

## **ACRONYMS**

<b>BASICS</b>	<b>Basic Support for Institutionalizing Child Survival</b>
<b>DANIDA</b>	<b>Danish International Development Agency</b>
<b>IEC</b>	<b>Information, Education, and Communication</b>
<b>UNDP</b>	<b>United Nations Development Program</b>
<b>UNICEF</b>	<b>United Nations Children's Fund</b>
<b>U.S.</b>	<b>United States</b>
<b>USAID</b>	<b>United States Agency for International Development</b>
<b>WHO</b>	<b>World Health Organization</b>

## **PURPOSE OF THE VISIT**

Raisa Scriabine visited Bishkek, Kyrgyzstan November 8 - December 3, 1994 to assist BASICS staff in (1) the preparation of a draft research design plan to assess constraints to improve immunization coverage; (2) the coordination of the training of Kyrgyz staff in qualitative research techniques and data analysis; and (3) coordination of a conference on social mobilization for immunization to present preliminary qualitative research findings.

## **BACKGROUND**

Kyrgyzstan, while achieving relatively high immunization coverage (despite some slippage in 1993 due to an occasional lack of vaccines), faces some specific immunization problems. These include children completing primary immunizations late; recent outbreaks of measles, diphtheria and polio; and a long list of contraindications. As a result, the high coverage attained could decrease in the country.

Kyrgyzstan's national immunization strategy calls for the elaboration of a communications strategy to support social mobilization efforts in the country.

Training and research activities were conducted in November in support of Kyrgyzstan's National Immunization Strategy. These activities were aimed at better defining immunization problems in Kyrgyzstan and providing the research foundation upon which a communications strategy can be elaborated to support social mobilization efforts.

## **TRIP ACTIVITIES**

Training in focus groups, in-depth interviews, and qualitative data analysis was provided to the staff of the Republican Center for Immunoprophylaxis in Bishkek and to other pediatricians, sociologists, and health communications specialists recruited by the Center. In total, 13 people were trained. (Appendix I: List of Trainees).

Sociologist Elena Pervysheva from the Center for Sociological Research at Moscow State University was brought to Bishkek from Moscow to conduct a week-long Russian language workshop for Kyrgyz participants in focus group moderation, in-depth interview techniques, and data analysis. A video on the process of planning and implementing health communications programs (produced by HealthCom) was shown at the training workshop.

Accompanied by Nancy Keith (BASICS staff) and Raisa Scriabine (BASICS consultant), Kyrgyz trainees then conducted one week of field research in two oblasts of the country. The oblasts selected were Chuisakaya, a largely urban area in the northern part of the country, and Jalal

Abadskaya, a predominantly rural area in the south. Two raions (districts) were selected in each oblast using the same criteria.

At each research site the following activities were conducted: document search; case studies of children immunized late; case studies of children who had measles; interviews with providers (pediatricians and nurses); focus groups with mothers of one child; focus groups with mothers of four or more children; and some interviews with mothers-in-law.

Following the field research, preliminary analysis of the findings was conducted in workshops in Bishkek at the Center for Immunoprophylaxis. The preliminary findings were presented at an all day conference at the Center on November 30th.

Significantly, the research showed that most mothers understand the importance of immunization and want their children immunized; many want detailed information showing the full immunization schedule. However, many mothers have fears about the quality of vaccines and sterility of needles and syringes used, and most incorrectly believe that children should not be immunized if they have a minor illness.

Findings from provider interviews showed that doctors and other health workers also have fears about the quality of vaccines and doubts about the reduced list of contraindications. Many providers say they would respond to published scientific proof on such issues as the safety of vaccines used in combination, appropriate immunization schedules, and true or false contraindications. Providers would welcome training and printed materials to support communication on immunization and other health topics.

### ***Health Service Providers***

A total of 15 pediatricians and 12 nurses were interviewed in the Chuiskaya and Jalal Abadskaya oblasts. All medical workers expressed a positive view toward immunization noting that immunization cuts morbidity. They generally noted that even if an immunized child becomes ill, he will be able to bear the diseases better. The principal negative view of immunization held by providers is that post vaccination complications can result.

Health providers view the chief constraints to immunization as:

(1) **Contraindications**

Contraindications are a major cause of late vaccination. Vaccinations are postponed through medical deferments issued for a variety of conditions including general weakness; malnutrition; inherited anomalies; anemia; low weight; hormone deficiencies; disorders of the digestive and endocrine systems; and neurological disorders.

Providers view children as weakened by the heightened radioactivity considered to be present in the environment. Many noted that introducing vaccine into an already weakened organism can result in unnecessary complications.

Providers also tend to fear authorities and prefer to "overinsure" themselves against any possible complications. For this reason, even children with a slight fever are generally not immunized.

Physicians express concern about immunizing children with immunodeficient disorders, noting that there are few trained immunologists in the country who can provide needed medical advisory services in such cases.

Providers feel that it would be difficult to implement the new regulations on contraindications because of the prevailing attitudes on the part of the mothers and physicians not to immunize any child except one that is completely healthy.

## (2) Lack of Vaccine, Alcohol, and Syringes

Shortages of vaccine were reported in 1993 and most physicians acknowledge that coverage that year was relatively low. Coverage improved in 1994 due to the greater availability of vaccine and the reduction of contraindications. Lack of vaccine, however, still appears to be a problem in peripheral areas. Due to the frequent unavailability of disposable syringes, mothers are often forced to buy their own, a cost that many cannot afford.

Most health providers express concern about sterilization, noting that infection by viral hepatitis cannot be ruled out. A nurse, for example, said, "I trust sterilization only if I do it myself." Providers also report shortages of cotton, solvents, and alcohol. In one case, iodine was used instead of alcohol.

Providers also report that imported vaccine carries instructions in foreign languages, making instructions difficult to understand without translation.

## (3) Migration of the Population

Political and socio-economic factors cause either permanent or short-term population migration. Tadjik refugees in Kyrgyzstan often do not have their children's vaccination records. Language barriers also pose a problem in working with Tadjik parents. One physician referred to Tadjik refugees when he noted, "It is from children like this that we get measles and diphtheria."

For economic reasons, Kyrgyz families are often temporarily displaced. They may leave one area for a few months to live with more economically advantaged relatives or to grow crops

for use in winter. Such economic migration interferes with meeting immunization schedules on time.

(4) Other Factors

Lack of transportation (vehicles and gasoline) has curtailed the ability of medical workers to bring children in for immunization and to conduct supervisory work. "Lack of transportation makes supervisory visits to rural areas impossible," said one physician. Many medical workers walk long distances - up to 10 kilometers a day - for on-site family visits. Lack of proper shoes and the difficulty of walking in winter pose particular hardships.

Some shepherds (called Chabani) spend part of the year in extremely remote areas. As a result, their children are often not immunized on time. In one case, the wife of a shepherd described what it takes to reach medical care. "We have to go two days by horse. It is dangerous. We live so far away that we don't even get first aid."

Physicians noted that mothers don't always bring children for immunization in bad weather because children lack proper clothes and the mothers "are embarrassed." The lack of heat makes it cold in the clinics. There are also periodic shortages of electricity which impact on the ability to store vaccine properly. One physician noted, "With electrical shortages, they shut off refrigeration."

Medical workers note that there are staff shortages in many areas. "There are not enough pediatricians. For eight districts, we have four pediatricians." It is generally felt that the medical staff receive low wages, and often these wages are not paid on time.

One area reported a scheduling problem that resulted in mothers leaving immunization clinics without having had their child vaccinated. A nurse explains, "All the doctors go to lunch at the same time. So the mothers go home. The doctors need to work on a sliding schedule."

Other constraints include long lines at clinics and lack of child caretakers in the home. One physician noted that individual families of alcoholics don't bring their children in to be immunized.

Medical workers expressed a general distrust of foreign vaccine (largely vaccine imported from Turkey), noting that foreign vaccine can produce adverse reactions. All expressed satisfaction with "domestically" produced vaccine (from the former Soviet Union). Concerns were expressed about proper vaccine transport and storage.

Medical workers noted that they prefer one - two dose vials of vaccine. The current use of multiple dose vials (containing 10-30 doses) has resulted in changes in immunization

schedules in most clinics and in delays in immunization. "We won't open another 20 dose vial if just two or three children come."

### ***Conference Activities***

The conference was opened by Kyrgyzstan's Minister of Health and brought representatives from UNDP, DANIDA, TICA, WHO and Central Asian Partners together as speakers. USAID's regional mission was represented by BASICS consultant Raisa Scriabine who was authorized to read a statement on behalf of the mission at the conference. UNICEF and the U.S. Embassy also had representatives present. Participants included chief pediatricians and immunologists from the following oblasts: Talas, Jalal Abad, Osh, Narin, and Issyk Kul. A press release announcing the conference was prepared, and there was media coverage of the conference, both on television and in local newspapers.

Appendix II provides the conference agenda, and Appendix III contains the list of conference participants.

In the morning session, international representatives voiced their support for immunization programs for child survival in Kyrgyzstan, elaborating on their specific contributions to this effort. The HealthCom video was shown (with simultaneous translation into Russian).

In the afternoon, BASICS' trainees presented their findings. Conference participants were then asked to break up into discussion groups by oblast, where possible, to discuss and address two questions: 1) the specific immunization-related problems encountered in their region; and 2) how these problems can be most effectively resolved.

The session concluded with presentations by conference participants. For most participants, the event introduced new concepts and approaches to health-related research and education. Participants were pleased to participate in future health education/communications efforts.

Conference preparation included development and coordination of the agenda with the Ministry of Health and the Center for Immunoprophylaxis; materials preparation including programs, press releases, and conference kits (in Russian and English); personal pre-conference briefing visits with UNDP, DANIDA, WHO, and the U.S. Embassy to enlist support and collaboration; and coordination of all logistics.

Lyndon Brown (BASICS) and Raisa Scriabine discussed follow-up activities in Kyrgyzstan with Deputy Minister of Health Glinenko. Brown and Scriabine also met with Gordon Weynand and Murat Kuzhukeev of USAID in Almaty to summarize trip achievements.

## **RESULTS AND CONCLUSIONS**

A report on the findings of the qualitative research will be prepared by the Kyrgyz trainees and by the Center for Immunoprophylaxis in February-March. A preliminary analysis of the research results was presented by Nancy Keith and Raisa Scriabine to BASICS/USAID on January 4, 1995.

The conference met its dual objectives -- to elevate the visibility of the recently formed Center for Immunoprophylaxis and to present research findings while enlisting the support of health providers from throughout Kyrgyzstan as participants in future social mobilization efforts. The conference succeeded in creating a positive and collaborative climate for future efforts in this area.

## **FOLLOW UP ACTION**

Raisa Scriabine will return to Kyrgyzstan in mid-February 1995 to conduct a follow-up meeting with the Center for Immunoprophylaxis to discuss efforts that need to be undertaken by Kyrgyz participants to complete the final research report and to review priorities for subsequent action.

## **APPENDICES**

**APPENDIX I**

**BASICS Kyrgyzstan Qualitative Research Training Participants  
November 1994, Bishkek**

## **APPENDIX I**

### **BASICS Kyrgyzstan Qualitative Research Training Participants November 1994, Bishkek**

1. Kubanichbek Marasulovich Monolbaev, Pediatrician Immunologist  
Republican Center for Immunoprophylaxis
2. Vladimir Ivanovich Chernov, Deputy Chief Physician  
Health Center "Zdorovie"
3. Kinishbek Usenovich Usenov  
State Health Center "Zdorovie"
4. Olga Victorievna Safonova, Research Officer  
Kyrgyz Scientific Research Institute of Medical Ecology and Prophylaxis
5. Valentina Ivanovna Gromskaya, Medical Statistician  
Polyclinic Number 5, Bishkek
6. Kanshaim Sultanovna Omurzakova, Senior Research Officer  
Kyrgyz Scientific Research Institute of Medical Ecology and Prophylaxis
7. Ludmilla Vailievna Rozhkova, Chief Epidemiologist  
Ministry of Health
8. Ish-Gul Kalievna Denislamova, Head of the Department of Sociological Research  
Kyrgyz Scientific Research Institute of Medical Ecology and Prophylaxis
9. Ludmilla Semenovna Sokurneko, Laboratory Assistant for Immunology
10. Svetlana Nikolaevna Firsova, Director  
Republican Center for Immunoprophylaxis
11. Turgunbai Kochkorbaev, Main Physician  
Zdorovie Health Center
12. Mamatkasim Arinalievich Dzheemuratov, Immunologist  
Oblast Sanitary Epidemiological Station (Osh)
13. Balkabek Israilov, Epidemiologist  
Republican Center for Immunoprophylaxis

**APPENDIX II:**

**AGENDA: CONFERENCE ON SOCIAL MOBILIZATION  
NOVEMBER 30, 1994, BISHKEK, KYRGYZSTAN**

**Program**  
**Seminar - Conference**  
**Social Mobilization and Immunization**  
**November 30, 1994**

**10:00 - 11:00 Welcome**

*Introduction:* Ministry of Health,  
Republic of Kyrgyzstan

Presentations by international organizations on cooperation in the field of immunization.

Presentation of film: Health Communication Partnership for Child Survival.

**11:00 - 11:30 Coffee break.**

**11:30 - 13:00 Presentation of preliminary research findings on knowledge and attitudes toward immunization.**

**13:00 - 14:00 Lunch.**

**14:00 - 15:30 Continuation of research presentations; Breakout into working groups.**

**15:30 - 16:00 Coffee break.**

**16:00 - 17:00 Working groups.**

**17:00 Closing of conference.**

**APPENDIX III:**

**PARTICIPANTS: CONFERENCE ON SOCIAL MOBILIZATION  
NOVEMBER 30, 1994, BISHKEK, KYRGYZSTAN**

SEMINAR/CONFERENCE  
ON SOCIAL MOBILIZATION FOR IMMUNIZATION

IN THE REPUBLIC OF KYRGYZSTAN

November 30, 1994

List of Participants

Dr. Sabirjan Abdykarimov  
Head of the Main Sanitary Epidemiological Department  
Ministry of Health

Mrs. Mairam Akayeva  
Chairman of the Meerim International Charitable Foundation to  
Support Mothers and Children of Kyrgyzstan

Dr. Dinara Akhmatova  
Epidemiologist, Republican Center for Immunoprophylaxis

Ms. Yelena Beschetnova  
Representative,  
U.S. Agency for International Development

Mr. Ekrem Birindic  
Representative of UNICEF in Central Asia and  
Kazakhstan

Mr. Lyndon Brown  
BASICS Project

Dr. Vladimir Chernov  
Deputy Chief Physician  
Health Center "Zdorovie"

Dr. Ish Gul Denislamova  
Head of the Department of Sociological Research  
Kyrgyz Scientific Research Institute of Medical Ecology and  
Prophylaxis

Ms. Shawn Dorman  
Counselor  
Embassy of the United States

Dr. Dzumabubu Doskeeva  
Head of the Department of Maternal and Child  
Ministry of Health

Dr. Mamatkasim Dzheemuratov  
Immunologist, Olbast Sanitary Epidemiological Station

Mr. Irisbai Dzholdubayev  
Deputy Minister  
Ministry of Health

Dr. Svetlana Firsova  
Director, Republican Center for Immunoprophylaxis

Mrs. Valentina Gaidamako  
Director, Department of Information and Monitoring  
Republican Center for Immunoprophylaxis

Mrs. Guln Gedik  
Regional Advisor  
Manas Project

Dr. Victor M. Glinenko  
Deputy Minister  
Ministry of Health of Kyrgyzstan

Dr. Valentina Gromskaya  
Medical Statistician, Polyclinic No. 5 Bishkek

Dr. Turgunbai Kochkorbaev  
Main Physician  
Zdorovie Health Center  
Osh, Kyrgyzstan

Mr. Finn Krog  
Regional Representative  
DANIDA

Dr. Duishen Kudayarov  
Director  
Scientific Research Institute of Obstetrics and Pediatrics

Dr. Apisa Kushbakeeva  
Head of Pediatrics  
Ministry of Health

Mrs. Raisa Ibraimova  
Chairman  
National Red Crescent Society

Mr. Almaz Imanbayev  
Director, Health Information Center for the Republics of Central  
Asia,  
The World Health Organization

Dr. Balkabek Israilov  
Epidemiologist, Republican Center for Immunoprophylaxis

Ms. Nancy Keith  
BASICS

Mr. Abdelamit Matisakov  
President  
State National Television and Radio Broadcasting Company  
Republic of Kyrgyzstan

The Honorable Eileen Malloy  
United States Ambassador to Kyrgyzstan

Mr. Tilek Meimanaliev  
Director, Manas Project

Dr. Kubanichbek Monolbaev  
Pediatrician Immunologist, Republican Center for Immunoprophylaxis

Mr. Ercan Murat  
Resident Representative  
United Nations Development Program

Mrs. Kanchaim Omurzakova  
Senior Research Officer  
Kyrgyzh Scientific Research Institute of Medical Ecology and  
Prophylaxis

Mrs. Rosa Otunbayeva  
Minister of Foreign Affairs  
Republic of Kyrgyzstan

Mr. Ken Patterson  
Resident Representative  
Central Asian Partners

Mr. Richard Reed  
Regional Advisor, UNICEF

Mr. Rudy Rodrigues  
Resident Representative of UNICEF  
Republic of Kyrgyzstan

Dr. Ludmilla Roshkova  
Chief Epidemiologist,  
Ministry of Health

Dr. Olga Safonova  
Research officer, Kyrgyz Scientific Research Institute of Medical  
Ecology and Prophylaxis

Mr. Sakae Saito  
Representative  
International Federation of Red Cross and Red Crescent Societies

Ms. Raisa Scriabine  
BASICS

Mr. Narinbek Kudaibergenov  
Chief Pediatrician, Narin Oblast

Mr. Alambek Ibraev  
Chief Epidemiologist, Narin Oblast, Sanitary Epidemiological  
Station

Mr. Apek Satarov  
Chief Physician, Oblast Health Center

Mr. Torokul Oskanaliev  
Chief, Epidemiologist, Talas Oblast Sanitary Epidemiological  
Station

Mrs. Fatima Shatmanlieva  
Chief Pediatrician, Narin Oblast

Mrs. Tamara Pegantinova  
Chief Physician Djalal-Abad Oblast Health Center

Mr. Kurmanbek Omuraliev  
Chief Physician, Republican Sanitary Epidemiological Station

Mr. Kurmanbek Zhinaliev  
Chief Pediatrician, Djalal-Abad Oblast Sanitary  
Epidemiological Station

Mr. Rispai Saliev  
Epidemiologist, Jalal-Abad Oblast Sanitary Epidemiological  
Station

Mr. Vladimir Kozhevnikov  
Chief Epidemiological Division, Osh Sanitary Epidemiological  
Station

Mrs. Nasipa Efmeikova  
Chief Pediatrician, Issyk-Kul Oblast

Mrs. Anara Orozakunova  
Chief Epidemiological Division, Issyk-Kul Oblast

Mrs. Anara Abdullaeva  
Chief Pediatrician, Osh Oblast

Mrs. Alexandra Guzhavina  
Chief, Epidemiological Division  
Sanitary Epidemiological Station  
City of Bishkek

Mrs. Ainara Keshinbaeva  
Chief Pediatrician  
City of Bishkek

Mrs. Natalia Shvets  
Chief of Epidemiological Division  
Chuiskaya Oblast Sanitary Epidemiological Station

Mrs. Temira Narinbaeva  
Chief Pediatrician of the Chuiskaya Oblast

Mrs. Ludmilla Sokurenko  
Laboratory Assistant for Immunology

Dr. Keneshbek Usenov  
State Health Center Zdorovie