**Immunization Management**

**Strategy for child immunization in Malaysian plantations**

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An outline is given of a simple cost-effective strategy aimed at the immunization of all children and pregnant women residing in the plantation sector of Malaysia. It is based on a partnership between government, nongovernmental organizations and the private sector, and is supported by UNICEF.

Some 7% of the Malaysian population, comprising over a million people, reside on plantation estates with inadequate health facilities: only 17% of the estates have their own hospitals; immunization services exist on only 1.5% of the estates; 40% of the estates are at least five kilometres from the nearest government health facility and 64% lack transport that would enable workers and their dependants to seek care away from the plantations (1). Few data are available on the immunization coverage of children and pregnant women in the plantation sector but the situation is thought to be unsatisfactory.

**Pilot study on coverage**

After being invited by the Ministry of Health to become involved, two nongovernmental organizations, the Malaysian Paediatric Association and the Malaysian Society of Health, initiated discussions with the United Planting Association of Malaysia. This body was aggrieved that the estate sector, which was considered private, had been made responsible for its own health and immunization services. The sector possessed neither the facilities nor the medical manpower that would allow it to deliver immunization services, and consequently the children did not receive the best possible protection against the six target diseases (tuberculosis, pertussis, tetanus, poliomyelitis, diphtheria and measles) of the Expanded Programme on Immunization.

With the help of the planting association a pilot study was undertaken by the nongovernmental bodies on six estates in Selangor State, which included all the children at their first birthday. When it emerged that the immunization coverages for tuberculosis, diphtheria/pertussis/tetanus, poliomyelitis and measles were 88%, 44%, 59% and 66% respectively, the planting association agreed to collaborate with the Ministry of Health on the implementation of a total immunization plan on the estates.

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Total immunization plan

The nongovernmental organizations proposed that the planting association should do the following on all of its estates:

- promote child immunization;
- register all births;
- organize transport once a month for the immunization of all eligible children and pregnant women at the nearest government health clinic;
- maintain a monthly register of the immunization status of all infants and pregnant women;
- inform local medical officers of health about problems in the maintenance of the programme;
- submit monthly returns on the immunization status of eligible vaccinees;
- ensure that immunization schedules are adhered to.

The assumption was made that transport would be provided free of charge by the estates in order to convey the women and children to the clinics, which were often less than five kilometres away. Clearly, the success of the plan depended on the goodwill of estate managers. It was estimated that the actual cost to the estates, using their own vehicles, would not exceed US$ 22 per year, and it was considered that, where greater distances were involved and private transport had to be used, the immunization of all children would be feasible with only six trips annually to health centres instead of twelve.

The planting association accepted the proposals and the Ministry of Health agreed to:

- provide free immunization of children and pregnant women at government clinics;
- send mobile teams, where possible, to estates that could assemble 20 or more eligible people at a given time for immunization;
- provide the estates with informational, educational and other materials dealing with immunization;
- arrange that the maintenance of the cold chain would be supervised by local medical officers of health if this was considered feasible or desirable;

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- consider the training of estate hospital assistants with the help of the nongovernmental organizations.

The total immunization plan was launched in September 1990. A manual (2), sponsored by UNICEF, has been produced and distributed for the guidance of estate managers, hospital assistants on the estates, and the medical officers who are expected to implement and monitor the programme.

It is to be expected that the goal of total child immunization will be achieved in the foreseeable future in Malaysia’s estate sector. The progress already made demonstrates that a great deal can be achieved for the benefit of the community through partnership between government, nongovernmental organizations and the private sector, with the support of UNICEF.

References