Title: Utilization of antenatal tetanus toxoid immunization services among women in Bahati division, Nakuru district, Kenya

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Abstract: Neonatal tetanus is still a major cause of morbidity and mortality in the developing countries where it accounts for over 7.5 million deaths annually. The world health organization adopted the goal of eliminating neonatal tetanus worldwide, and a major strategy for its prevention is the administration of at least two properly spaced doses of Tetanus toxoid, to pregnant women to protect newborns passively at birth. National tetanus toxoid vaccination rate in pregnant women is below the universal target of 80%. Kenya Expanded Programme of Immunization routine reports indicate a dropout rate of 21 between tetanus toxoid vaccine one and two. This warrants a study to establish factors that influence the utilization of antenatal tetanus toxoid immunization services among women of child bearing age. A cross-sectional descriptive survey was therefore carried out among the rural community of Bahati division Nakuru District to; (1) Establish the level of knowledge on antenatal immunization services with tetanus toxoid vaccine. (2) Identify barriers towards utilization of TT1 and TT2 immunization services among child bearing age women. (3) Determine the factors contributing to dropout rate between TT1 and TT2 among child bearing age women in Bahati. The study population was composed of child bearing age women who had delivered a baby within the last 2 years to facilitate recall, and the health facilities managers providing maternal child health services. Purposive sampling, simple random sampling and cluster sampling were used to identify the locations sub locations and villages respectively. Data was obtained by the researcher using pretested interview schedule from 400 respondents. The Statistical Package for Social Sciences software was used for data analysis. Derived data was subjected to statistical tests such as Chi-square to test associations between variables under study and ANOVA was used to compare sample mean in different sub-locations, t-test was used to compare means derived from health facility data. The results indicate that provision of health education to clients played a significant role in influencing TT coverage. (c2=118.863; P=0.000; df=4). Antenatal services perception towards antenatal services by CBAW influenced significantly TT uptake (c2=125.528; P=0.000; df=8). Waiting time at ANC clinic had significant influence on TT coverage (c2 =110.758; P=0.000; df=8). The number of personnel in MCHIFP clinic with TT2 coverage (t=5.669; P=0.001; df=7). However TT coverage was independent of knowledge, majority had access to antenatal services; despite a TT coverage of 62.5% and a dropout rate of 29.25%. Clients education on importance of antenatal immunization using various methods would offer short term solution to improving tetanus toxoid coverage, while service providers, regular update and adequate staffing in rural health facilities coupled with adequate vaccine and other logistics constitute long term solutions. The study recommends research on the implementation of 5TT schedule. The information derived from the study could be incorporated in drawing policies that may be generalized to other parts of the country.