Introduction

Vaccines are among the most impactful and cost-effective public health interventions available today. Diseases prevented by vaccines, such as pneumonia, diarrhea, meningitis, and measles constitute about a quarter of the 800,000 child deaths in Nigeria. In addition to protecting health and saving lives, vaccines also provide economic benefit. In Nigeria, scaling up coverage of five vaccines (Hib, pneumococcal, measles, pertussis, rotavirus) to 90% is projected to avert economic loss of $17 billion dollars over the next ten years.

Nigeria has made considerable progress on its routine immunizations programs, however, there are still some critical gaps. Recent advances include more than doubling DTP3 coverage (29% to 69%) between 2000 and 2010, and the introduction of two new vaccines (MenAfriVac and Pentavalent). However, one million children still failed to receive all their required vaccines in 2011. Polio, which had been on the decline, has also begun to make a comeback. Going forward, Nigeria has a major opportunity to reduce child mortality, towards achieving Millennium Development Goal (MDG) 4, by accelerating access to immunization services.

As part of an ongoing effort to boost immunization, Nigeria hosted its 1st National Vaccine Summit in Abuja in April, 2012. The meeting hosted a broad range of local and international partners to galvanize both high-level and grassroots support for immunization in Nigeria. In preparation for the event, members of the Summit’s National Planning Committee held a series of Town Hall meetings in order to provide a forum for Nigerians to highlight the vaccine-related issues relevant to their communities.

This report focuses on the series of eight Town Hall meetings that were held across the six geopolitical zones. Six of the Town Hall events convened a general audience, while the remaining two targeted Nigeria’s youth and public-private sector partnerships. Discussions at the Town Halls included the public's perception of disease and immunization, current challenges with immunization, and recommendations for improving access and uptake of immunization services. A summary of points from each event was presented as part of the keynote address at the National Vaccine Summit, giving a voice to Nigerians from diverse occupations and circumstances who otherwise would not have been heard.
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*Dance performance at the Taraba Town Hall hosted by Silver Lining for the Needy Initiative.*
Immunization in Nigeria

According to recent WHO estimates, 868,000 children under the age of five years die in Nigeria every year. As a result of both a high child mortality rate and a large population, Nigeria is second only to India in the total number of childhood deaths. A significant proportion of these deaths are caused by vaccine-preventable diseases like pneumonia, diarrhea, meningitis, and measles.

Despite systemic weaknesses, Nigeria has made extraordinary progress in improving access to vaccination in recent years. Coverage for all vaccines rose substantially over the 2000-2010 decade. According to WHO/UNICEF estimates, three-dose diphtheria, tetanus, and pertussis vaccine (DTP3) coverage more than doubled, increasing from 29% to 69% during this period.

Nigeria conducted an important mass campaign in late 2011 to deliver a new meningitis vaccine. In 2012, Nigeria began a three-year, phased rollout of the pentavalent vaccine, which protects against diphtheria, tetanus, pertussis, hepatitis B, and Haemophilus influenza b. Introduction of the pneumococcal and rotavirus vaccines are expected to begin in 2013 and 2017 respectively. Efforts to eradicate polio are at an all-time high as the country fights to escape being one of the three polio endemic countries in the world.

Beyond reducing child mortality, research shows that increasing vaccine access will have a positive impact on Nigeria’s economy. Researchers at the Johns Hopkins Bloomberg School of Public Health International Vaccine Access Center estimate that achieving 90% coverage with vaccines against five diseases (Hib, pneumococcal, measles, pertussis, rotavirus) would save more than 600,000 lives and avert U.S. $17 billion in economic losses for Nigeria over the next ten years, lifting millions out of the vicious cycle of illness and poverty.

Child Mortality 2010

Vaccine Coverage 2011


A coalition of international and domestic partners has come together for the first time in history to support the Nigerian government on routine immunization to reduce child mortality. It’s clear that reaching this goal will require significant improvements to vaccine access. Nigeria’s Vaccine Summit and Town Hall Meetings marked the beginning of a great effort to make this a reality.

Life and death depend on whether a child is born in a country where vaccines are available.

—Mohammad Pate, Minister of State for Health, Nigeria (quoting Nelson Mandela)

Nigeria’s 1st National Vaccine Summit

On April 16-17, 2012, Nigeria held its first-ever National Vaccine Summit, a high-level advocacy meeting to promote routine immunization (RI) in Nigeria. The Summit brought together over 1,000 stakeholders from multiple sectors including health, education, finance, transportation, and power.

Objectives of the Summit:
1. To sensitize high-level political and business leaders about how vaccines promote child survival and provide substantial economic benefits for Nigeria.
2. To declare a Call to Action to reach all Nigerian children with routine immunization by the year 2015, in order to reduce child mortality and achieve MDG4.
3. To raise pledges of support for RI from Nigerian leaders across the political, business, traditional, and religious spectrum.
4. To establish an action plan and accountability framework to follow-up on pledges made at the 1st National Vaccine Summit and execute the Call to Action.

“With over one million Nigerian children dying each year from conditions that can easily be prevented by vaccination, we all would be failing in our duties as mothers, parents, and leaders in the various segments of our society, if we don’t take this advantage to do something concrete.”

—Dame Patience Jonathan, First Lady of Nigeria
Outcomes of the Summit

At the Summit, the First Lady, Dame Patience Jonathan, urged the creation of a national fund under a future Nigerian Alliance for Vaccines and Immunization (NAVI), a public-private partnership, to provide vaccine financing from within the country. She also called for a biannual African Vaccine Summit to measure progress of vaccination initiatives on the continent.

Another high priority in the next few years for Nigeria is the Federal Ministry of Health's plan to rollout the pentavalent, pneumococcal conjugate, and rotavirus vaccines, which will substantially reduce deaths from pneumonia, diarrhea, and other diseases. Introduction of pentavalent vaccine began in 2012, with the others to follow in the coming years.

A Call to Action was made to Nigerian leaders from across political, traditional, and religious sectors to commit to ensuring excellence at primary health care facilities in their communities. A list of key points and recommendations was also written, covering governance, financing, service delivery, health management information systems, human resources, community participation, partnerships, and research. The principal goal of these efforts is to achieve universal coverage for all Nigerian children by year 2015.
Listening to Nigeria: The Summit Town Hall Series

In the months leading up to the National Vaccine Summit, a series of Town Hall meetings on immunization were held to give a voice to communities across Nigeria. The goal of these meetings was to learn community perceptions about vaccination and solicit input on Nigeria’s immunization program. Each meeting was hosted by a local association, company, or civil society organization active in promoting routine immunization in Nigeria.

In total, there were eight meetings, with at least one Town Hall held for each geopolitical zone and the federal capital territory. Six of the Town Halls were focused on RI in a specific zone and two had a special focus, one on Nigeria’s youth, and the other on public and private sector partnerships.

Participants at these meetings came from a variety of backgrounds, including youth, students, artisans, market sellers, religious leaders, health professionals, private companies, government officials, and wives of state governors. During the course of the meetings, many of these participants pledged to become ambassadors of immunization in their communities.

Recommendations from the Town Hall meetings included hiring more health workers, providing better training for health workers, and incentivizing health workers to have more positive attitudes. Participants suggested the need for increased public awareness about the benefits of routine immunization and the importance of earning the support of traditional and political leaders. Also highlighted were the lack of access to immunization services in rural areas and a desire for more health centers. Shortages of vaccines and breakdowns and inadequacies in the vaccine delivery system were another concern. All were in agreement about the need for a Call to Action for immunization.

The following pages summarize the Nigerian voices captured at each Town Hall event.

The Town Hall events across Nigeria

- **Ife-Ife, Osun State** – January 22, 2012 – Paediatric Association of Nigeria
- **Lafia, Nasarawa State** – March 15, 2012 – Vaccine Network for Disease Control / National Council for Women’s Societies
- **Owerri, Imo State** – March 22, 2012 – Health Reform Foundation of Nigeria
- **Kaduna, Kaduna State** – April 13, 2012 – Women of Purpose
- **Abuja, FCT** – March 28, 2012 – National Primary Healthcare Development Agency
- **Benin City, Edo State** – March 29, 2012 – Solina Health Limited
- **Jalingo, Taraba State** – April 4, 2012 – Silver Lining for the Needy Initiative
- **Maiduguri, Borno State** – April 7, 2012 – Evolve Worldwide

Attendees at the Nasarawa State Town Hall hosted by Vaccine Network for Disease Control / National Council for Women’s Societies.
A summary of recommendations from the Town Hall series was presented as part of the Keynote address at Nigeria’s 1st National Vaccine Summit.
South West Zone

Ile-Ife, Osun State
Hosted by the Paediatric Association of Nigeria
January 22, 2012

For the South West Zone, the Paediatric Association of Nigeria (PAN) hosted the Town Hall event in Ile-Ife, Osun State. Dr. Dorothy Esangdego, President of PAN, moderated focus group sessions with close to 100 participants to discuss local perspectives on the issues surrounding immunization. Participants had varying levels of education and were opinion leaders in various groups, such as the motorcyclists and drivers associations, religious and traditional leaders, traders, and students.

The meeting had a lively discussion about the reasons why children are not receiving the proper immunizations. At the family level, a few suggestions were: families don’t know or forget that immunization is needed, there is a belief that immunization will be harmful to the child, other purchases and activities are prioritized over immunization, and more broadly, poverty.

Several logistical reasons for why children go unvaccinated were also cited, including poor roads, unavailability of vaccines, high cost of transportation, long wait times at health centers, and inadequate coverage of health services.

Perceived benefits/risks of routine immunization in the South West Zone

Benefits
- Reduction of childhood diseases
- Healthier children
- Saves money on hospital bills
- Makes children more helpful at home
- Peace of mind for parents

Risks
- Incorrect administration
- Fever
- Sickness or swelling off the body
- Paralysis
- Death

Participants listen to a presentation at the in Osun State Town Hall hosted by Paediatric Association of Nigeria.
List of recommendations made at the Town Hall:

- Hire more workers to administer vaccines
- Provide better training for health workers who administer the vaccines
- Encourage health workers to have a friendly attitude to mothers
- Ensure the vaccines are available all the time
- Ensure immunization gets to those in the villages
- Reduce waiting time for mothers
- Provide transportation for mothers to clinic on immunization days
- Give mothers incentives to get their children immunized (e.g. insecticide treated nets, diapers, etc.)
- Increase awareness campaigns on immunization focusing on issues of overdose and multiple uptakes at different venues e.g. school, church, mosque, or health center

Questions & Answers with the South West Zone

Q: What are the benefits of immunization?
A: It reduces sickness and death, makes parents have peace of mind. Parents will not need to spend money on hospital bills.

Q: What do you know about routine immunizations?
A: It prevents diseases like measles, yellow fever, polio, rashes, and cough.

Q: Do you have enough health facilities in your communities?
A: The facilities are not enough, especially in the villages. The workers are few and this makes our wives spend the whole day in the clinic.

Sometimes the vaccines are not available and this discourages the mothers.

The roads are bad and transportation [to the clinic] is expensive.
North Central Zone

Lafia, Nasarawa State
Hosted by the Vaccine Network for Disease Control & National Council of Women’s Societies
March 15, 2012

Nigeria’s North Central Zone held their Town Hall Meeting on immunization in Lafia, Nasarawa State, hosted by the Vaccine Network for Disease Control & National Council of Women’s Societies. The meeting had 250 participants representing all seven states of the zone (Kwara, Kogi, Plateau, Benue, Niger, Nasarawa, and the Federal Capital Territory).

Participants said that the biggest challenges to routine immunization in Nigeria are religious and cultural beliefs of the various communities in the country. Also of concern were lack of immunization awareness, a shortage of vaccines in many areas, lack of proper maintenance of the cold chain infrastructure, and the lack of skilled health workers.

“A participant told his story of how he took his sick child to the hospital and the child was not treated, so when the health workers came to his home to immunize his child, he refused to let them touch the child.”

“Attendees pledged to be ambassadors of immunization, promising to get involved in neighbor to neighbor awareness.”
Suggestions from the meeting included:

- Opening additional local health facilities
- Creating awareness of routine immunization
- Training health workers to better provide immunization services
- Further advocacy efforts directed at religious leaders, traditional rulers, district heads, mothers, youth, and school children

Town Hall organizers noted two successes: a large turnout with representatives from the community, traditional leaders, government officials, and strong female participation in the breakout sessions. Participants recognized the success of recent improvements to routine immunization efforts.

“The Town Hall meeting] brought together all the tribes of Nigeria in one pot. We had Gbago women’s associations, Igbo women’s association, pepper sellers association, Fulani women’s association, Nomadic women’s association, Yoruba women’s association, Muslim women’s association among others we never imagined would show up.”

—Town Hall Meeting participant, Lafia, Nasarawa
South East Zone

Owerri, Imo State
Hosted by the Health Reform Foundation of Nigeria
March 22, 2012

The South East Zone Town Hall was hosted by the Health Reform Foundation of Nigeria (HERFON) in Owerri, Imo State. The aim of the Town Hall meeting was to identify barriers to immunization, articulate local opinion concerning vaccination in the South East Zone, and to declare a Call to Action to improve vaccine access and utilization.

Over 300 people attended the Town Hall, which was chaired by The First Lady of Imo State, Her Excellency Mrs. Nkechi Rochas Okorocha. Participants included political leaders, immunization activists, commissioners of health, women from trade associations, traditional and religious leaders, youth organizations, and the media.

Chairman of Imo State Council of Traditional Rulers, HRH Eze Samuel Agunwa Ohiri, pledged the support of the traditional institution for full immunization of mothers and children in South East Zone. Dr. Okeagu, director PHC Imo State, presented a new Imo State health initiative called “Health at Your Door Step,” which aims to improve vaccine access and utilization in communities.

Participants were excited to participate in discussions about challenges and opportunities in routine immunizations. The opinion on routine immunization services across the states in the South East Zone is generally a positive one. Town Hall participants observed that routine immunization in South East Zone is currently hampered by factors such as inadequate transportation of vaccine supplies, poor community participation, and low capacity of health care workers especially in rural areas.

Community voices:
“We strongly believe in immunization. It has helped to reduce childhood diseases.”
North West Zone

Kaduna, Kaduna State
Hosted by Women of Purpose
April 13, 2012

Women of Purpose organized the Town Hall event for the North West Zone in the city of Kaduna, Kaduna State. Over 300 people attended the town hall, including local government health officials, traditional and religious leaders, physicians, midwives, teachers, and students.

An opening address, given by Dr. Nonnie Roberson, head of Women of Purpose, highlighted the benefits of childhood immunizations and urged mothers, community members, and religious leaders to join hands with health institutions and the government to deliver this message.

During the breakout and feedback sessions, participants cited lack of publicity around routine immunization programs as the biggest challenge to immunization in the North West Zone. They considered the public education and awareness efforts through radio, television, and print media to be largely aimed at the educated urban areas, bypassing the rural communities.

At the end of the town hall, participants developed recommendations for how government and donors can ensure rural communities are effectively reached by public awareness campaigns.

Barriers to Vaccine Access:
“Some people believe vaccines prevent children [from being able] to reproduce later.”

“Vaccines are more [often] available in private clinics.”
The Nigerian Private Sector Consultative Forum and Town Hall Meeting on Vaccines, Immunization, and Primary Health Care took place in Abuja. The aim of this forum was to galvanize the support of the Nigerian private sector in strengthening immunization and primary health care.

Top executives from Nigeria’s private sector and civil society organizations in Nigeria attended, including members of the pharmaceutical, hospital, and media sectors as well as civil society organizations and senior government officials.

The Executive Director of the National Primary Health Care Development Agency (NPHCDA), Dr. Ado J.G. Muhammad, opened the forum with a keynote address. Goodwill messages were delivered by the Managing Director GlaxoSmithKline, Lekan Asuni and representatives from the Pediatrics Association of Nigeria, National Orientation Agency, and other civil society organizations.

Presentations focused on the following topics: the role of Nigeria Private Sector in immunization and primary health care delivery; suggested packages for support by the Nigeria private sector; and immunization delivery as a collective responsibility, its overall health benefits and national economic development.

An interactive feedback session focused on four key thematic areas: 1) access to vaccines and immunization, 2) supply, 3) demand for vaccines and immunization, and 4) governance/accountability.

The participants observed that improved routine immunization in Nigeria is currently hampered by factors such as: inadequate funding, inadequate cold chain capacity, poor performance management, transportation challenges at all points, inconsistent health policies by governments, and lack of community engagement, among several other challenges.

At the end of the Town Hall, participants identified action steps to leverage private sector strengths for vaccines and immunization and primary health care delivery in Nigeria. The forum was successful in inspiring new commitment for supporting vaccines and immunization programs in Nigeria by the Nigerian Private Sector.
Recommendations made by the participants of the Public & Private Sector Town Hall:

- The Nigerian government must increase engagement of the Private Sector through the Public Private Partnership (PPP) Policy for Health, especially concerning immunization and primary health care delivery.
- Create a road map for the implementation of PPP health projects with clearly defined outcomes.
- Build capacity for health personnel and volunteers on vaccines and immunization programmes.
- To ensure adequate cold chain for vaccines to maintain their potency, government should leverage the private sector, especially pharmaceutical companies that have structures in the communities nationwide.
- Personnel of pharmaceutical companies, other private sector officials/ firms, and health representatives should be engaged in vaccine distribution and management of cold chain systems in the various communities.
- Pharmaceutical companies and the private sector should sponsor health programs on the media to sensitize the public about the benefits of routine immunization.
- A Vaccine Adverse Events Monitoring Committee should be put in place to monitor their use and archive reports concerning AEFI for further/future handling.
- Government should identify the strengths of key stakeholders in the private sector to address gaps in the routine immunization landscape.
- National Orientation Agency should work with media in rural communities and to educate people to dispel myths associated with vaccines and immunization.
- Messages involving immunization and other clinical/health technical matters should be finalized before disseminating to the target audience to avoid misconceptions.
- Government should work with the private sector to improve the current immunization coverage by providing the following: financial guarantees, transport/logistics and distribution, provision of solar power/alternative energy sources, satellite cold storage centers, data checks, and improved collaboration with traditional rulers, religious, and community leaders.
- The Private sector pledges to partner in training and re-training of health personnel in both government and private sector to build their capacities on vaccines and immunization.
- Government should create an enabling environment for private sector participation in vaccines, immunization, and primary health care delivery in Nigeria.
South South Zone

Benin City, Edo State
Hosted by Solina Health Ltd.
March 29, 2012

As part of activities leading to Nigeria’s National Vaccine Summit, Solina Health Limited, a health systems consulting firm, partnered with University of Benin to host a youth focused Town Hall meeting on routine immunizations in Nigeria at the University of Benin. About 120 people attended the event, which was facilitated by Dr. Muyi Aina of Solina Health. Participants included students, staff, and faculty from the University of Benin’s Teaching community health and public health departments.

The objectives of this Town Hall were to increase the level of interest, excitement, and understanding about routine immunization among youth. It also served to generate a consensus statement from the youth, highlighting problems behind the zone’s low immunization coverage.

Youth leaders participated as panelists, sharing their observations on the problems of routine immunization in Nigeria, followed by fielding questions from the audience. Ineffective and poorly implemented government policies were suggested to be the biggest challenge for routine immunization. Participants stated that even when policies are appropriate and well defined, there is inadequate follow-through at the community level service delivery points. And among the public, routine immunization is not perceived to be one of the top priorities of the government.

The Town Hall was successful in engaging youth in vaccine advocacy. Youth committed themselves to become immunization ambassadors for their various communities, through advocacy and “spreading the word.” They also agreed to volunteer their time to directly participate in immunization activities and support health facilities in their communities.
Youth opinions on the challenges for routine immunization in Nigeria:

- Government policies are not being implemented
- Shortage, insufficient training, and lack of accountability among health workers
- No consequences for parents who do not get their children vaccinated
- Low demand for vaccines due to poor understanding about the benefits of vaccination at the community level

“Contrary to common belief, immunization has become very important to youth because of its potential to impact not just domestic health of the population but diplomatic relations…. A paramount example was the recent row between Nigeria and South Africa due to immunization records of travelers.”

“Youth need to ask more questions – of their parents, professors who inform policy, local politicians, and even healthcare facility staff regarding performance of RI in their localities.”

“Youth can be a lot more engaged by volunteering themselves for service at local health centers, both for health-related tasks and non health-related tasks, e.g., providing engineering-related volunteer services to support health facilities.”
North East Zone

Jalingo, Taraba State
Hosted by Silver Lining for the Needy Initiative
April 4, 2012

The Silver Lining for the Needy Initiatives (SLNI) hosted the North East Zone Town Hall meeting on routine immunization in Jalingo, Taraba State. Opening statements were given by the First Lady of Taraba State, Dr. Hauwa Danbaba Suntai, Hon. Prince Mustapha Gabdo, Commissioner of Health in Taraba, and Miss Hauwa Abbas, founder of the host organization SLNI.

The aim of this Town Hall was to engage the Taraba grassroots community and provide them an opportunity to voice their concerns about routine immunizations, their challenges and successes, and ways to move forward. The meeting was well attended, drawing program and policy makers, service providers, private sector, traditional leaders, women’s groups, students from Taraba University, and representatives from the Children’s Parliament.

During the Town Hall breakout sessions, participants discussed the benefits of routine immunization for themselves, their families, and their community. Women most especially wanted support from their husbands and employers to allow the time to ensure that their children are vaccinated. They discussed the roles that community leaders should play and committed themselves to making good health decisions for their families. Participants cited the need for more community health workers and regular retraining to ensure their work is effective and efficient.

From the mothers of Taraba State:
“Our husbands and employers should support us by giving us permission and time to get our children vaccinated.”

“Health workers need training to give us the right message.”

Thoughts and suggestions from the North East Zone:
• Include traditional and religious leaders in the routine immunization system
• Vaccines should be available within communities, not just at hospitals (e.g. visits by health workers to administer vaccines)
• Participants said people are generally suspicious of the fact that government provides only free vaccines, while other drugs must be purchased, and other health services are not functioning at all
• Every participant personally knew someone who had lost a child to a vaccine-preventable disease
North East Zone

Maiduguri, Borno State
Hosted by Evolve Worldwide
April 7, 2012

The North East Zone Town Hall event with the theme “Vaccines: save life, save money, and build a nation” was hosted in Maiduguri, Borno State by Evolve Worldwide. One of the meeting’s objectives was to encourage local officials to begin forming an action plan to improve access to routine immunization. Village, ward, district, religious, political leaders, and health officials were represented.

Discussion centered on the health systems and socio-cultural challenges of vaccines in the zone. Participants cited misconceptions about vaccines as an impediment to their uptake. The event also included presentations and discussion on the health benefits and safety of vaccines.

Suggestions and questions raised by participants at the Town Hall:
• Free medical care should be provided for children under five years old, this would lead to uptake of vaccine services
• A religious leader suggested that preventative medicine is an ancient practice. He promised to encourage his peers to recommend vaccines using this reasoning
• A question was posed as to why vaccines are free but simple medicines are not
• One participant asked the appropriate ages for vaccination
• Another participant asked whether there were dangers associated with receiving multiple vaccinations
• Participants were also interested in knowing more about the Muslim perspective on immunization

Challenges with routine immunization in Borno State:
• Cultural attitudes and fear of vaccines and their side effects
• Lack of commitment from leadership at the grassroots level
• Lack of health care providers at the grassroots level
• Inadequate logistical (cold chain) capacity and stock outs
Looking Forward

Nigeria stands to make rapid improvements in child survival by promoting vaccination as part of a package of interventions to prevent and treat infectious disease. Introduction of new vaccines is a crucial part of this strategy, and for Nigeria this includes the ongoing rollout of pentavalent vaccine, and planned introduction of pneumococcal conjugate and rotavirus vaccines. But equally important are efforts to extend coverage of these and other routine immunizations to the children and families currently without access.

Understanding the strengths and weaknesses of Nigeria’s routine immunization system is crucial to improving vaccine delivery and uptake. The National Vaccine Summit and Town Hall Series helped to outline these challenges and opportunities by giving Nigerians a voice and bringing together stakeholders from various fields. Another step in this direction is a recent study, the Landscape Analysis of Routine Immunization, conducted by the International Vaccine Access Center at the Johns Hopkins Bloomberg School of Public Health.

This study has helped to identify the barriers to routine immunization and strategies likely to improve service delivery and vaccine uptake in Nigeria.

The commitments made by Nigeria’s leaders at the 1st National Vaccine Summit are impressive, and if implemented, will save lives, avert costs, and boost economic productivity. There is strong support for immunization among Nigeria’s traditional, religious, and political leaders and policy makers, particularly among the National Primary Health Care Development Agency and the Ministry of Health.

One of the major achievements of Town Hall series was the confirmation that the people of Nigeria are firmly behind the Call to Action for immunization. By participating in Town Hall meetings across Nigeria, they have contributed to the national movement to reduce child mortality. These Town Halls are only a beginning; the conversation with the Nigerian people will continue as the Government of Nigeria and its partners put plans from the 1st National Vaccine Summit into action.

The people of Nigeria are firmly behind the Call to Action for immunization.
1st National Vaccine Summit Partners

- Bill & Melinda Gates Foundation
- Centre for Health Sciences Training, Research and Development (CHESTRAD)
- European Union Delegation to Nigeria
- Evolve Worldwide
- GAVI Alliance
- Health Reform Foundation of Nigeria (HERFON)
- International Vaccine Access Center
- National Council of Women's Societies
- National Orientation Agency
- National Primary Health Care Development Agency
- Nigeria Federal Ministry of Health
- Nigeria Television Authority
- Paediatric Association of Nigeria
- Pharmaceutical Society of Nigeria
- Rotary International
- Silver Lining for the Needy Initiative
- Solina Health Limited
- United Nations Children's Fund (UNICEF)
- United States Agency for International Development (USAID)
- Vaccine Network for Disease Control
- Women of Purpose
- World Health Organization (WHO)