

NATIONAL ASSEMBLY

FOR WRITTEN REPLY

QUESTION NO. 2157

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(INTERNAL QUESTION PAPER NO. 22)

Ms H Ismail (DA) to ask the Minister of Health:

- (1) What total number of measles vaccinations have been administered in (a) 2019, (b) 2020 and (c) 2021;
- (2) what is the breakdown of the specified measles vaccinations in each (a) province and (b) specified academic year;
- (3) what plans are being put in place by his department to increase inoculations for the measles vaccine;
- (4) what was the vaccination rate for the measles vaccine in (a) 2019, (b) 2020 and (c) 2021 in each province?

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REPLY:

- (1) The following table reflects the details in this regard:

Year		Measles 1 st dose		Measles 2 nd dose	
(a)	2019	966,002	84,1%	920,084	80,2%
(b)	2020	974,179	84,8%	888,383	77,2%
(c)	2021	1,000,082	87,5%	939,138	82,2%

- (2) The following table reflects the details in this regard:

PROVINCE	MEASLES	2019	2020	2021
Eastern Cape	1 st dose	115,357	111,609	114,320
	2 nd dose	118,254	108,060	110,055
Free State	1 st dose	41,999	43,710	44,670
	2 nd dose	38,634	38,721	39,406
Gauteng	1 st dose	228,967	224,802	234,553
	2 nd dose	203,020	197,829	218,545
KwaZulu-Natal	1 st dose	208,524	208,825	213,695
	2 nd dose	216,419	213,090	223,628
Limpopo	1 st dose	113,671	121,443	114,731
	2 nd dose	102,155	103,199	101,441
Mpumalanga	1 st dose	78,956	81,911	94,505
	2 nd dose	82,248	73,931	83,496
Northern Cape	1 st dose	21,038	19,875	20,802
	2 nd dose	18,404	17,596	18,007
North West	1 st dose	57,099	57,225	57,624
	2 nd dose	54,368	49,922	55,187
Western Cape	1 st dose	100,391	104,779	105,182
	2 nd dose	86,582	86,035	89,373

(3) The Department is implementing four streams of the primary health care (PHC) re-engineering which contribute to the increase in uptake of measles vaccination, namely, PHC Ward-Based Outreach Teams (WBOTS), Integrated School Health Programme (ISHP), the District Clinical Specialist Teams (DCST) and contracting of private healthcare providers. Each of the streams significantly contribute to the immunisation program in the following ways: the WBOTS have a potential role in defaulter tracing. ISHP provide immunisation catch-up at schools to increase coverage. The DCSTs have a role to play in clinical governance (ensuring implementation of all policies and guidelines). The private healthcare providers help in identifying and referring children who have missed immunisation doses.

In order to address long-standing inequities in immunisation access thereby reducing the number of zero-dose children, the Department of Health is implementing the followings:

- Reach Every District (RED) Strategy to reduce missed opportunities in childhood vaccination uptake. The RED Strategy emphasizes important areas for vaccination uptake in the country: (1) reducing inequity in immunisation coverage, integration of health services, delivering vaccines beyond infancy using a life course approach, focusing on urban, poor and marginalized populations, and paying special attention to poor performing districts.
- Under-5 Side-by-Side campaign by the Department that ensures all children survive and thrive, by improving coverage of key promotive, preventive and curative interventions with inclusive of measles vaccination and childhood vaccination in general. Five key themes of under-five are: (1) good nutrition to grow and be healthy; (2) love, play and talk for healthy development; (3) protection from preventable childhood illnesses and injuries; (4) health care for sick children and (5) special care for children who need a little more help. This campaign also focuses on the supportive relationship between child and caregiver, as well as the relationship with practitioners, including health-care workers, who help and advise the caregiver
- In November 2020, the country intensified immunisation catch-up drive in all districts. The catch-up drive reduced number of zero-dose children from 125,923 in 2020 to 104,153 in 2021. The delivery of both routine and catch-up immunisation doses forms part of a coordinated effort to improve access to high-quality, affordable primary health to achieve universal health coverage and accelerate progress towards the 2030 Sustainable Development Goals (SDGs)
- The country as a member state of the global community has endorsed the global Measles and Rubella Strategic Plan (MRSP) 2021 - 2030 which outlines guiding principles that provide a foundation for all measles and rubella control efforts. The Department is using this strategic plan as a guiding principle to secure the commitment and action required for a country free of measles transmission. In line with global measles strategy, the Department has endorsed international measles coverage target of reaching 90% of children with both 1st and 2nd dose in all districts to reach desirable population immunity levels. As part of implementing Global Measles and Rubella Strategic Plan, the Department together with NICD implement Integrated Disease Surveillance and Response (IDSR) system. The system makes case-based surveillance and laboratory data more usable and strengthen outbreak response measures at all levels of healthcare. Through implementation of IDSR, the country is utilising Notifiable Medical Conditions Surveillance (NMC) Application (NMC APP) for mobile devices. The NMC App enable healthcare practitioners to promptly report NMCs for appropriate and timely public health response. The IDSR uses outbreaks as an entry point to identifying unvaccinated communities and strengthening immunisation system.

- The Department is also using Stock Visibility System (SVS) that enables the electronic communication of medicine availability data from PHC level into upstream electronic stock management systems. The SVS helps to monitor availability of vaccines in facilities and expedites vaccine deliveries to prevent stock outs.

(4) The following table reflects the details in this regard:

PROVINCE	MEASLES	2019	2020	2021
Eastern Cape	1 st dose	80.3%	80.1%	85.2%
	2 nd dose	82.3%	77.2%	80.9%
Free State	1 st dose	78.6%	83.3%	87.3%
	2 nd dose	72.3%	73.5%	76.4%
Gauteng	1 st dose	89.4%	86.5%	89.5%
	2 nd dose	79.1%	75.9%	83.4%
KwaZulu-Natal	1 st dose	83.3%	82.5%	83.9%
	2 nd dose	87.1%	84.9%	89.0%
Limpopo	1 st dose	85.7%	93.4%	90.4%
	2 nd dose	76.7%	78.5%	78.6%
Mpumalanga	1 st dose	83.7%	85.6%	97.9%
	2 nd dose	87.6%	77.8%	87.7%
Northern Cape	1 st dose	82.8%	77.5%	80.8%
	2 nd dose	73.0%	69.2%	70.8%
North West	1 st dose	70.9%	70.6%	71.1%
	2 nd dose	67.7%	61.9%	68.7%
Western Cape	1 st dose	89.5%	94.0%	95.5%
	2 nd dose	76.8%	76.6%	80.3%

END.