

# THE REACHING EVERY DISTRICT STRATEGY

"Reaching every district" (RED) is a strategy to achieve the goal of 80% immunization coverage in all districts and 90% nationally in the WHO member states. RED aims to fully immunize every infant with all vaccines included in the national immunization schedule of countries. In order to achieve this goal, the strategy focuses on building national capacity from district level upward to maximize access to all vaccines, old and new.

RED addresses common obstacles to increasing immunization coverage such as poor quality district planning, low quality and unreliable service, inadequate monitoring and supervision of health workers.

## **RED and the Millennium Development Goals**

The RED strategy provides practical activities that can be conducted to achieve the Millennium Development Goals and well as the GIVS goals<sup>1</sup>.

These are to ensure the full immunization of children under one year of age at 90% nationally, with at least 80% coverage in every district or equivalent administrative unit by 2010; reduce deaths due to measles by 90% by 2010 compared to 2000 levels; eliminate maternal and neonatal tetanus by 2005 and extend the benefits of new and improved vaccines and other preventive health measures to children in all countries.

## **The five RED operational components**

### **1. Re-establishing outreach vaccination services**

In many countries, a large proportion of the population only have access to immunization through outreach services. Outreach sessions, especially mobile immunization teams also present opportunities to provide other interventions such administering vitamin A and deworming tablets with immunization.

### **2. Supportive supervision**

Supportive supervision includes providing regular on-site training and assistance by supervisors to health workers in the district. It should be held during supervisory visits or at regular district meetings. It also offers the opportunity to integrate supervision of other health interventions, for example Integrated Management of Childhood Illness (IMCI).

### **3. Linking services with communities**

Immunization services need to be integrated better into community structures. This can be achieved by involving the community in the planning and delivery of health services, including immunization, such as identifying community volunteers and designating responsibilities such as identifying newborns in the district and performing regular follow-up on mothers whose children are

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<sup>1</sup> GIVS: Global immunization vision and strategies document was endorsed by World health assembly in 2005.

not fully immunized as well as organizing regular meetings with the community.

#### **4. Monitoring and use of data for action**

Monitoring of immunization activities and using the data for action is critical in strengthening the immunization system. Some simple monitoring tools such as wall charts of vaccination coverage can be used to track monthly progress. In addition, information on logistics, vaccine supply and surveillance which is collected every month should be analysed together with the coverage data to improve the immunization system.

#### **5. Planning and management of resources**

A district micro plan is the key to the RED strategy. At each level, micro plans should contain details of the financial and human resources required to reach every district in a sustainable manner.

#### **Partners**

Many immunization partners such as the United Nations Children's Fund (UNICEF), the Centers for Disease Control and Prevention of the United States Department of Health and Human Services (CDC), Program for Appropriate Technology in Health (PATH), Immunization Basics and the United States Agency for International Development (USAID) have been involved in the development and implementation of the RED strategy.

#### **Countries implementing the RED strategy**

Most countries in the WHO regions of Africa, Eastern Mediterranean, Europe, South-East Asia and the Western Pacific have adopted and have been implementing the RED strategy since 2002. RED priority countries are those with large population and a high number of unimmunized infants such as India, Indonesia, Nigeria, Ethiopia, Pakistan and China.

#### **RED evaluation**

The evaluation of the RED strategy in five countries<sup>2</sup> in Africa in 2005 showed that the RED approach contributed significantly to strengthening immunization systems and improving the delivery of vaccines. In the five countries evaluated between 2002-2004, the total number of districts with DTP3 coverage over 80% increased from 70 to 197, while the number of districts with less than 50% coverage declined from 377 in 2002 to 222 in 2004. While it was not possible to conclude which RED components or which factors contributed most to increasing coverage, the common factor in all these countries was a focus in micro planning at the district level. Another RED evaluation in several countries in Africa is planned for 2007.

#### **Resources**

The RED evaluation showed that the extra resources needed to implement the RED strategy are relatively modest. These extra resources are mainly used in micro planning activities, workshops, training and to cover other

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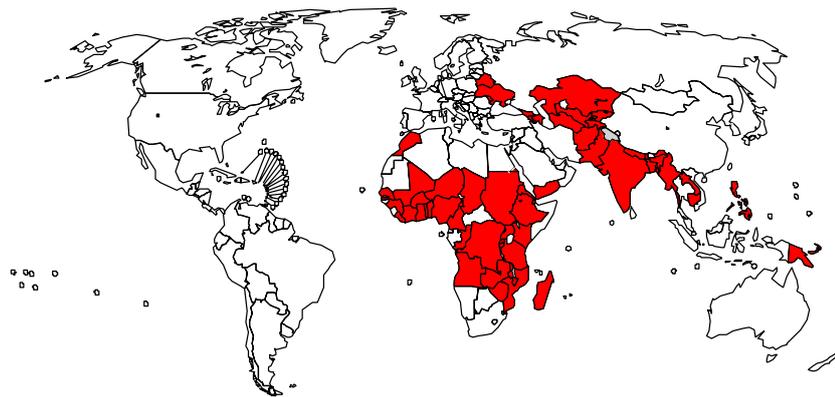
<sup>2</sup> RED evaluation was conducted in Democratic Republic of Congo, Ethiopia, Zimbabwe, Kenya and Madagascar.

supervisory and monitoring costs. The success of the RED strategy will depend on the sustainability of these resources as well as its availability at the district level.

### **WHO work on RED**

WHO regional offices have been involved in several RED planning activities and implementing RED meetings and workshops. Within countries WHO and UNICEF staff are able to provide technical support in the development of the national EPI programme RED planning and implementation.

#### **Progress in the implementation of RED activities (2002-2005)**



■ RED activities implemented in 53 WHO member states

*Source: WHO/IVB/EPI+, data as of 24 March 2006*

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### **Related WHO publications**

- Immunization in Practice  
([http://www.who.int/immunization\\_delivery/systems\\_policy/training/en/index1.html](http://www.who.int/immunization_delivery/systems_policy/training/en/index1.html))
- AFRO's field guide "Implementing the RED approach"  
([http://www.who.int/immunization\\_delivery/systems\\_policy/AFRO-RED-guide.pdf](http://www.who.int/immunization_delivery/systems_policy/AFRO-RED-guide.pdf))
- Evaluation of RED in 5 countries in the African region  
[http://www.who.int/immunization\\_delivery/systems\\_policy/AFRO-REDevaluationreport\\_2005.pdf](http://www.who.int/immunization_delivery/systems_policy/AFRO-REDevaluationreport_2005.pdf)
- RED tools into action poster  
[http://www.who.int/immunization\\_delivery/systems\\_policy/Final-RED%20poster.pdf](http://www.who.int/immunization_delivery/systems_policy/Final-RED%20poster.pdf)
- Immunization monitoring charts  
[http://www.who.int/immunization\\_delivery/systems\\_policy/charts/en/index.html](http://www.who.int/immunization_delivery/systems_policy/charts/en/index.html)