

Effectiveness of short message services reminders on a childhood immunization programme in Kadoma, Zimbabwe

Submission date 16/07/2014	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 28/08/2014	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 22/10/2015	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Tetanus, Diphtheria and Pertussis (Whooping Cough) are life-threatening diseases for people of all age groups. Despite this, worldwide, healthcare providers are finding that many people fail to keep their immunization appointments. In Kadoma City, Zimbabwe, a recent review found that only 74% of babies aged 6 weeks, 84% of babies aged 10 weeks and 74% of babies aged 14 weeks were being vaccinated against these diseases. Low vaccination rates can often result in outbreaks of the diseases that the vaccines are meant to prevent and could mean that the progress made towards achieving Millennium Development Goal 4 (MDG 4) (reducing the number of deaths among children under 5 years old by two-thirds) is reversed. It is, therefore, very important to try and encourage more people to vaccinate themselves and their families. This study will find out if using short message services (SMS), otherwise known as text messages, will encourage mothers to bring in their babies for immunization. We are also interested in knowing how much it costs and how many people are willing to be reminded in this way.

Who can participate?

Mothers or caregivers of babies that visit one of a number of Kadoma City Clinics on the third or seventh day after the birth of the child. They also have to have a cell phone.

What does the study involve?

Participants are randomly allocated into one of two groups. For those people in group 1 (intervention group), short message service reminders are sent to each person's cellphone to remind them to bring their children in for their vaccinations at 6, 10 and 14 weeks after birth. The first reminder is sent 7 days before the due immunization date. The second reminder is sent 3 days before and the third, final reminder, is sent a day before the immunization appointment. They are also given routine immunization health education materials. People in group 2 (control group) are only given the routine immunization health education materials. The vaccination rate is then analysed.

What are the possible benefits and risks of participating?

There are no any financial or other material benefits for participants in this study. However,

taking part may give them an opportunity to learn and understand more about childhood immunization. The study is not expected to cause any physical harm. Some questions are asked about the participants social life which they may not feel comfortable enough about to answer, but they are free to ignore these questions if they wish.

Where is the study run from?

Kadoma City Clinics namely Rimuka Family Child Health, Ngezi, Waverly, Chemukute and Kadoma General Hospital (Zimbabwe).

When is the study starting and how long is it expected to run for?

January 2013 to August 2013.

Who is funding the study?

MPH Programme, University of Zimbabwe (Zimbabwe).

Who is the main contact?

Bangure Donewell

bangured@yahoo.com

Contact information

Type(s)

Scientific

Contact name

Prof Mufuta Tshimanga

Contact details

University of Zimbabwe

P.O Box A167

Avondale

Harare

Zimbabwe

00263

+263 (0) 775762259

tshimangamufuta@gmail.com

Additional identifiers

Protocol serial number

MRCZ/B/492

Study information

Scientific Title

Effectiveness of short message services reminders on a childhood immunization programme in Kadoma, Zimbabwe - a randomized controlled trial, 2013

Study objectives

There is no difference on the immunization coverage among those receiving short message reminders and routine immunization health education material and those receiving routine immunization health education material only

Ethics approval required

Old ethics approval format

Ethics approval(s)

1. Joint Parirenyatwa Hospital and College of Health Sciences Research Ethics Committee, 23/04/2013, ref: JREC 31/13
2. The Medical Research Council of Zimbabwe, 06/05/2013, ref: MRCZ/B/492

Study design

Randomized controlled trial

Primary study design

Interventional

Study type(s)

Prevention

Health condition(s) or problem(s) studied

Immunization

Interventions

Participants were randomly allocated into two groups.

1. Intervention group: In the intervention group short message service reminders were sent to study participants cellphones reminding them to bring children for immunization. They also received routine immunization health education materials
2. Control group: Received only the routine immunization health education materials

Intervention Type

Other

Phase

Not Applicable

Primary outcome(s)

The primary outcome measure was receipt of scheduled vaccines at 6, 10 and 14 weeks. This was measured by the attendance for each antigen during the three visits at 6, 10 and 14 weeks.

Key secondary outcome(s)

N/A

Completion date

31/08/2013

Eligibility

Key inclusion criteria

1. Women or caregiver with a cell phone
2. A resident of Kadoma city
3. Consented in writing

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Sex

Female

Key exclusion criteria

1. Mothers or caregivers that did not own a cell phone
2. Not a resident of Kadoma city

Date of first enrolment

01/01/2013

Date of final enrolment

31/08/2013

Locations**Countries of recruitment**

Zimbabwe

Study participating centre

University of Zimbabwe

Harare

Zimbabwe

00263

Sponsor information**Organisation**

University of Zimbabwe (Zimbabwe)

ROR

<https://ror.org/04ze6rb18>

Funder(s)

Funder type

University/education

Funder Name

University of Zimbabwe, Department of Community Medicine (Zimbabwe)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	12/02/2015		Yes	No