Assessing the Organizational Readiness of the Zambia Ministry of Health to Adopt a New Immunization Supply Chain Distribution System

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Abstract
In 1974 the World Health Organization launched the Expanded Program on Immunization (EPI) with the goal of vaccinating all children. To implement the EPI, a standardized in-country immunization supply chain (iSC) design was developed and implemented by most low-income countries in Asia and Africa. Today, the iSC design faces an influx of new and more expensive vaccines putting additional strain on an already antiquated system, and little attention is being paid to the ability of the traditional iSC to absorb this increase. To do so, global health and vaccine experts are calling for a change to the current iSC.

Implementation science proposes that organizational readiness for change (ORC)—such as that being proposed to the iSC—is a critical antecedent to the successful adoption of evidence-based programs and the uptake of new systems and innovations (Weiner 2009).

Scaccia and colleagues (2015) provide a useful approach to measuring ORC. Their formula consists of determining the relative strengths and weaknesses of three ORC components: (1) motivation for carrying out a program or innovation, (2) general organizational capacity for implementation, and (3) innovation-specific capacity, which is specific to the program or innovation being considered (Scaccia et al. 2015).

Using a modified version of Scaccia’s theoretical framework for ORC, an assessment was made of the readiness of key EPI staff at district and provincial levels in Zambia to adopt a new iSC distribution system. Using focus groups (n=17) and key informant interviews (n=6), the assessment revealed a high level of motivation, but relatively low levels of general capacity and innovation-specific capacity. Specifically, the lack of infrastructure, particularly transport, energy, and communications, as well as low-skill levels of facility staff, are a barrier to ORC in Zambia.

A plan for change is proposed to build greater ORC among EPI staff in Zambia by implementing a demonstration project that builds general capacity and innovation-specific capacity through three objectives: (1) consistent and regular training of facility-level staff, (2) placing professionally trained logisticians at the provincial level, and (3) demonstrating the effectiveness of unmanned aerial vehicles (UAVs; aka “drones”) to delivery vaccines to remote and isolated areas.

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