

Case study

IMPACT OF MICROPLANNING ON ROUTINE IMMUNIZATION IN ACEH

Microplanning significantly improved immunization coverage and service delivery in Aceh by developing locally adapted capacity building solutions and empowering health workers.

Overview

The World Health Organization (WHO) addressed critical challenges in Aceh's routine immunization programme by implementing a comprehensive microplanning approach. This initiative focused on addressing systemic barriers including under-prioritization within the health programme, limited health worker capacity and under- and inconsistent reporting, ultimately transforming immunization service delivery across the province.

Addressing the gap

10-15

years of essential skills and knowledge gap among health workers and midwives addressed

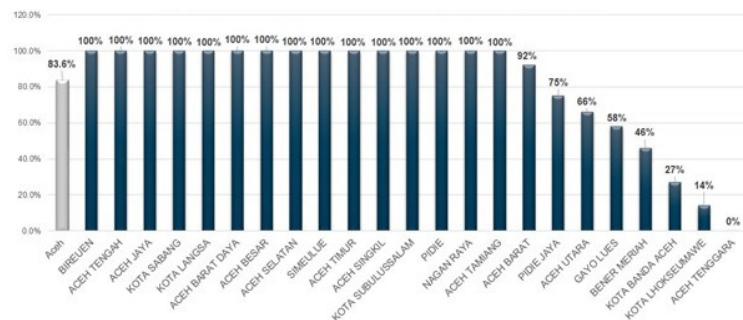
Localizing microplans

WHO guided the local health system to adapt the Ministry of Health's updated microplanning format, creating district-specific plans that precisely addressed local challenges. A comprehensive root cause analysis revealed a critical 10-15 year knowledge gap among health workers and midwives, prompting training and workshop sessions that equipped health workers with practical skills in microplanning, vaccine administration, reporting, and effective communication about vaccine-preventable diseases to parents.

WHO's routine monitoring ensured accountability and progress, with submissions tracked bi-weekly and reviewed by the Provincial Health Office.

Highlights

Puskesmas-level microplanning submission in Aceh 2024



Microplans

100%

of districts (23) in Aceh submitted microplans

83.6%

of health centers with complete microplans

WHO's field officer established feedback loops to empower health workers in refining their plans. Zero-dose children were mostly found in villages with rejections from parents due to concerns about side effects and halal-haram issues. The microplanning process also fostered collaboration between programmes, for instance, by integrating immunization messaging in maternal health counselling and health promotion campaigns.



WHO field officer trained midwives in Aceh. Credit: WHO/Muh Fathun

Capacity building with a local flavour: introducing the *MEUSEURAYA* Initiative

One innovative intervention developed and introduced by WHO's field officer was *the MEUSEURAYA Initiative (Mentoring Puskesmas Untuk Raih Imunisasi Yang ASIK)*, conducted from March to June 2024.

This local initiative specifically tailored to the Aceh province context focused on strengthening the capacity of immunization officers and midwives at the Puskesmas level. A collaboration between provincial and district health authorities, UNICEF, WHO and a local youth group, the initiative* included mentoring sessions for 36 health workers across two districts, six Puskesmas, and 30 villages, offering guidance and coaching on immunization policies, recording and reporting, VPD surveillance, adverse event management, and interpersonal communication. WHO and partners delivered these sessions in accessible, engaging environments, including Puskesmas meeting rooms, outdoor areas and local cafés, which helped create a positive and collaborative learning atmosphere.

To address the high rates of parental rejection due to concerns about side effects and halal-haram issues, WHO incorporated specific sessions and modules on effective communication strategies. Puskesmas health workers were trained to engage with parents, address their concerns, and provide clear, culturally sensitive information about the safety and benefits of immunization. This approach aimed to build trust and increase acceptance of vaccines among hesitant communities.



Meuseuraya raising awareness activities held by Aceh DHO and puskesmas.
Credit: WHO/Muh Fathun

Aceh is driving real change

Microplanning has proven to be a transformative tool in Aceh's routine immunization programme. By mid-2024, all 23 District Health Offices in Aceh and 83.6% of health centers had completed microplans, enabling health workers to identify and address local issues, track immunization targets, and develop targeted outreach strategies. The *MEUSEURAYA* initiative was highly successful – with WHO guidance, local health authorities are now planning to scale this innovative approach, focusing on seven districts that received training in June 2024, referring to this follow-up as the *MEUSEURAYA* Initiative 2.0. By addressing systemic challenges and equipping health workers with locally adapted tools and knowledge to create data-driven plans, WHO has contributed to significant improvements in immunization coverage and service delivery. This case study highlights the importance of targeted, context-specific interventions in achieving vaccination outcomes, offering a model for replication in other regions facing similar challenges.

*UNICEF funded the initiative while WHO supported with ideation, implementation and monitoring.