

**The Level and Determinants of Male Partner Involvement in
Routine Child Immunization Care in Hoima District Uganda: A
cross-Sectional study**

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ABSTRACT

Background: Male partner involvement in routine child immunization (RCI) services influences women's immunization behavior and increases utilisation and timely completion of an infant's routine immunisation schedule. Hoima district has low routine vaccination coverage and a high vaccination dropout rate. We therefore conducted this study to determine the current level of male involvement and its determinants in routine child immunisation services in Hoima district.

Methodology: This cross-sectional survey used multistage cluster sampling in 46 villages of five sub-counties in Hoima district, Uganda from which 460 men with children aged 10-23 months prior to the survey were selected. A male involvement index was constructed based on 5 indicators. A structured questionnaire elicited responses on male partner involvement in RCI as the main outcome variable. A Generalized Linear Model (GLM) was used for analysis in Stata version 10.0 to obtain Prevalence Risk Ratios (PRR) for association between the binary outcome and independent factors.

Results: Few men (29%) were highly involved in RCI. High male partner involvement in RCI was associated with men being older/aged 45 years and above (adj.PRR 1.91, 95% CI 1.05 - 3.78), having positive attitudes towards male partner involvement in RCI (adj.PRR 2.26, 95% CI 1.14-4.51), others community members ascribing to men a responsibility of taking their children for routine immunization (adj.PRR 1.75, 95% CI 1.32-2.33), and others members in the community considering male involvement in RCI as an expression of love for wife and child (adj.PRR 1.50 , 95% CI 1.02-2.20), while low male partner involvement in RCI was associated with men being engaged in sales and services as their main occupation (adj.PRR 0.63, 95% CI: 0.42-0.93), and men being discouraged by their parents from participating in RCI (adj.PRR 0.20, 95% CI 0.015-0.29). Male partner education level in this study was not significantly associated with their involvement in RCI (adj. PRR 1.07, 95% CI 0.81-1.41).

Conclusions and Recommendations: Male partner involvement in RCI based on a composite scale of five involvement indicators is low in Hoima district. Strategies to improve positive attitudes towards, and social support for, male partner involvement in RCI are necessary to increase male partner involvement in RCI.