

Led by JSI, Gavi's [Zero-Dose Learning Hub](#) (ZDLH) is a global learning initiative to generate evidence and engage stakeholders to identify and reach zero-dose (ZD) and under-immunized (UI) children. As the global learning partner, JSI supports Country Learning Hubs in Bangladesh, Mali, Nigeria, and Uganda to advance evidence-based strategies aligned with Gavi's Identify-Reach-Monitor and Measure-Advocacy (IRMMA) framework. Key ZDLH achievements include demand-driven technical assistance and the development of tools and resources, all aimed at reaching ZD children and integrating evidence into policy and practice.



Want to learn more about knowledge translation in global health? Download the ZDLH toolkit [Knowledge Translation for Zero-Dose Immunization Research](#), developed by JSI through the Gavi-funded ZDLH, to explore practical strategies for translating research into action.

Advancing Evidence-Based Immunization Strategies in Uganda

Knowledge translation (KT)—the systematic process of moving research into policy and practice—is central to the Uganda Learning Hub's approach. Since 2023, the Learning Hub—led by the [Infectious Disease Research Collaboration](#) (IDRC), with partners [PATH](#) and [Makerere University School of Public Health](#)—has worked to ensure that research on ZD and UI children translates into actionable change. The Learning Hub has engaged national and sub-national stakeholders—including the Uganda National Expanded Program on Immunization (UNEPI), the Ministry of Health, the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), district health teams (DHTs), village health teams (VHTs), community leaders, and civil society organizations (CSOs)—through dissemination activities, policy dialogues, and technical consultations. These efforts have supported the use of evidence in immunization planning, programmatic adjustments, and advocacy initiatives. Each stage of the KT process—dissemination, transmission, acquisition, application, and impact—has shaped immunization strategies and services, helping Uganda identify and reach more ZD and UI children.



Dissemination: Sharing Evidence with Key Stakeholders

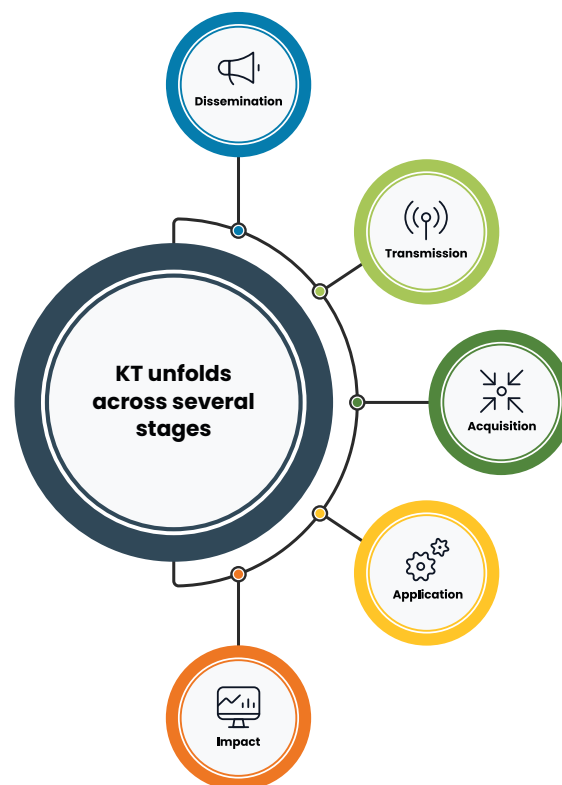
Findings from the Uganda Learning Hub were shared through national- and district-level meetings, technical reports, policy dialogues, and engagement with UNEPI and implementing partners. At the national level, the Learning Hub disseminated evidence from the targeted community survey and evaluations to key stakeholders, including UNEPI, WHO, UNICEF, CSOs, pediatricians, and members of parliament. The Learning Hub also participated in the Big Catch-Up orientation sessions in the 59 districts targeted

by Gavi's Equity Accelerator Fund (EAF). More targeted dissemination took place in Mubende and Wakiso districts. In Mubende, the Learning Hub shared findings from the baseline survey, house-to-house (HTH) registration evaluation, and rapid assessment with VHTs, health workers, and health information assistants during planning and training sessions. In Wakiso district, findings were shared during district-level planning meetings and training sessions with DHTs and frontline health workers. This ensured that decision-makers were informed of the latest evidence on ZD immunization.



Transmission: Tailoring Findings for Programmatic Use

To facilitate uptake, research findings were translated into practical recommendations for UNEPI and the three district health teams. This process focused on tailoring insights from the baseline survey, HTH registration evaluation, and rapid assessment to guide planning, supervision, and implementation practices. In Mubende, the Learning Hub shared findings emphasizing strategies for engaging VHTs in follow-up with ZD children. Recommendations were developed to address implementation barriers such as short HTH registration timelines, insufficient training on register use, and logistical gaps in reaching home births. In Wakiso and Kamuli districts, findings from the HTH registration evaluation informed guidance on strengthening the VHT model. The Learning Hub highlighted the need to pair VHTs based on literacy levels. Additional recommendations focused on data flow improvements, including structured handovers of completed registers and more consistent tracking mechanisms. At the national level, the Learning Hub shared tailored findings with UNEPI and partners to inform strategies for improving social mobilization, clarifying VHT roles in HTH data collection, and addressing gaps in supervision and training. These tailored recommendations were developed and shared through policy dialogues, planning meetings, and targeted consultations to ensure they aligned with ongoing program priorities and operational realities.



Acquisition: Stakeholders Recognizing and Adopting Knowledge

During orientation workshops held for the 59 EAF districts, district-level participants reviewed evidence shared by the Learning Hub and identified additional high-risk communities that had not been included in earlier planning. These newly identified communities included populations in mining areas, tea estates, ungazetted forests, and resettlement areas, and groups such as sex workers, mobile casual laborers in industrial parks, migrant communities, and street children.

In Mubende district, stakeholders engaged with findings during district and sub-county planning meetings, using the evidence to prioritize follow-up with ZD children identified during HTH registration and to identify implementation barriers such as home births, inter-district service access challenges, and caregiver mobility limitations.

Across both national and sub-national levels, stakeholders expressed appreciation for the Learning Hub's contributions. UNEPI, WHO, and district teams acknowledged that the findings were timely and informative for shaping forthcoming EAF implementation frameworks and ongoing sub-national programming.



Application: Integrating Evidence into Policy and Practice

Learning Hub findings were used by stakeholders to inform planning and decision-making in the three districts. In Mubende district, Learning Hub research led district teams to task VHTs with following up on ZD children identified during HTH registration and prioritize households with home births, which are populations more likely to be missed. District teams worked to harmonize the catchment areas of health facilities located near district borders to improve service delivery. Based on the evaluation of HTH registration in Wakiso and Kamuli districts, UNEPI and PATH designed a data management system to facilitate real-time data use, where VHTs submit daily registration forms and sub-county data clerks analyze and aggregate the data to support microplanning at the parish level.



Impact: Measuring the Effect of Knowledge Translation

The application of Learning Hub research led to tangible changes in programming and stakeholder behavior:

- **Enhanced community outreach:** Incorporating one VHT per village as part of microplanning in Mubende district helped ensure localized, sustained community engagement and supported efforts to reach more ZD children.
- **Policy dialogue on VHT sustainability:** Insights prompted discussions among UNEPI and district health teams in Mubende and Wakiso districts on how to address key issues, including inadequate and delayed payments and gaps in training for VHTs conducting HTH registration.

Through each stage of the knowledge translation process—from sharing evidence to informing decisions—the Uganda Learning Hub has ensured that research findings are actively used to shape immunization strategies including outreach activities. Continued engagement with UNEPI, WHO, and district health teams has contributed to programmatic shifts, improved planning, and targeted outreach to better reach ZD and UI children. These efforts highlight the value of ongoing documentation, adaptation, and use of evidence to strengthen immunization programs in Uganda.

