Childhood diseases that include polio, measles, tuberculosis, diphtheria, tetanus and pertussis have remained a world wide public challenge for many years. This led WHO to establish the expanded programme on immunization (EPI) to vaccinate children against tuberculosis, poliomyelitis, diphtheria, pertussis, tetanus and measles worldwide. As a result, there has been a steady decline in prevalence for some of these childhood diseases such as polio, diphtheria, tetanus and pertussis has been registered globally. However, the prevalence of measles in developing countries has been escalating in the past ten years. In the year 2000 alone there were 23831 children who were affected by measles, while the prevalence of other diseases targeted by EPI cases were below 1500 worldwide. Hence there is need to examine the factors which drive measles escalations. Literature on this subject is scarce and seems to suggest that socio-cultural and demographic characteristics may be import factors in the escalation of measles cases in some developing countries. Hence there is need to examine the factors that drive measles escalation.

This cross section descriptive study was designed to assess socio-cultural and demographic factors that influence immunization uptake in a community. Factors such as knowledge of childhood immunizations, altitudes, practices and beliefs were explored. The study utilized questionnaires and focus group discussions to collect data. Respondents were mothers with children below 10 years of age and health workers in dispensaries in the study area. The study took place from November 2003 to March 2004 at Mbitini Location, Kyuluni Division; Kitui District, Kenya. Results obtained indicate that among the demographic factors that were tested, maternal education ($\chi^2=6.90$, $p=0.0086$), occupation ($\chi^2=26.122$, $p=0.013$), religion ($\chi^2=40.830$, $p=0.000$) and access to health centre ($\chi^2=21.690$, $p=0.000$), significantly influenced childhood immunization practices in the study area. A multiple regression analysis showed that maternal attitudes ($\chi^2=11.443$, $p$-values 0.000) was the most important factor in immunization programmes in the study area. In conclusion that study established that in planning for immunization mobilization campaigns it was important to involve people at the community level in order to address their beliefs, attitudes and practices. It is important to develop guidelines that address community beliefs and practices as they affect immunization activities.