



Assessment of Reasons for Missed Children Special Investigation Tool

ADAPTED FOR ADDITION TO THE RHIZOME POLIOK.IT PLATFORM 16 JAN 2017



INFORMATION FOR
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POLIO GLOBAL
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INITIATIVE

Assessment of Reasons for Missed Children

Special Investigation Tool

Date: ___/___/___

Name of State/Province: _____

Name of District/LGA: _____

Name of sub-district: _____

Investigation team (if one or more partners did not participate, explain why):

MOH: _____

UNICEF: _____

WHO: _____

Reason for investigation (tick all that apply):

Zero-dose AFP case/cluster

WPV/cVDPV

>x% missed children

Cluster of refusals

Other (low campaign awareness, etc) _____

PART A: PLANNING ASSESSMENT (DISTRICT LEVEL)

Method: Primarily a desk review of microplans, training plans, supply distribution plans, etc. Rapid interviews with select district staff.

Completed

Not completed

If not completed, state reason: _____

PART B: PROGRAMME ASSESSMENT (SUB-DISTRICT LEVEL)

Method: Primarily rapid interviews of selected programme staff/supervisors and a review of key programme plans and documents in the field

Completed

Not completed

If not completed, state reason: _____

PART C: COMMUNITY SURVEY

Method: Rapid interview with the traditional or religious leader in the community.

Cluster survey of 20 HHs in 1 community. This tool will replace the household coverage survey conducted upon confirmation of WPV case.

Completed

Not completed

If not completed, state reason: _____

PART A: PLANNING ASSESSMENT (DISTRICT)

In the district where the community will be surveyed, identify the following key informants:

- District Administrative Officer (accountable for polio)
- District Polio focal point (MOH and partners)
- District focal point for Polio communications (MOH and partners)

Use the following documents to complete the assessment:

- District micro plans
- Soc mob plans
- Training plans
- Training material
- Minutes of TF meetings
- OPV distribution plan

Key informant A1: District Administrative Officer (accountable for polio)

Reviewer should meet with the District Administrative Officer, and have a brief conversation about the following areas, and make your own assessment of the Officer's knowledge and involvement in the polio campaign:

- Release of funds
- Knowledge of the situation
- Leadership of Polio Taskforce or Involvement of campaign (chairing a meeting, inaugurating a campaign, etc.)
- Problem-solving approach (does he/she demonstrate clear and urgent action for polio if there is a problem; are his/her staff held accountable for results?)

A1.1 Has the District Officer released funds in time for the last campaign?

- Yes No

If no, why: _____

A1.2 Has the District Officer demonstrated up to date knowledge of the polio situation? Has he/she been briefed by his own staff?

- Yes No _____

What are the 3 main problems he/she identified:

1. _____

2. _____

3. _____

A1.3 Does the District Officer demonstrate sufficient leadership, involvement and oversight in polio activities?

Comments: _____

A1.4 Does the District Officer solve problems quickly and hold staff accountable for results? Please give an example:

Key informant A2: District Polio focal point (MOH and partners)

A2.1 Is there an operational plan for the district to focus on high risk areas and groups?

Yes No

A2.2 The following elements are included in the operational plan of the last campaign (tick all that apply):

a. Identification of high risk groups/settlements

Yes No N/A

Comments: _____

b. Clear map of the high risk areas of the district, updated as per the last round

Yes No N/A

Comments: _____

c. Social map of the district, updated as per the last round

Yes No N/A

Comments: _____

d. Key challenges of the district, as demonstrated by last month's SIA data (LQAS/IM)

Yes No N/A

Comments: _____

e. Identification of events/festivals in the area to be covered before/after the campaign

Yes No N/A

Comments: _____

A2.3 Based on the district plan, does the area have a sufficient number of vaccination teams to cover the area within the campaign days (observation)?

Yes No

If no, which sub-districts demonstrate an unreasonable workload for vaccination teams?

A2.4 Are there minutes of the last task-force meeting held in advance of the last SIA?

Yes

No

A.2.5 If yes, who participated in the meeting?

A2.6: Are vaccinator training materials available, and are they in accordance with national guidelines?

Yes

No

A2.7: Is there a record of the last vaccinator training?

Yes

No

What is the date: ____//____//____

A 2.8 Do the participants listed in attendance of the vaccinator training roughly match with the number of vaccinators identified in the district plan?

Yes

No

Comments: _____

A2.9 Have you seen stock-outs of vaccine in any areas of your district in the last campaign?

Yes

No

A2.10 Is there a logistics and transportation plan for all areas and teams?

Yes

No

A2. 11 What are the main operational or social challenges in your district (no more than 3)?

1. _____

2. _____

3. _____

Key informant A3: District Communication Supervisor

A3.1 Is there written evidence of a social mobilization plan for the district?

Yes

No

If no, why not:

A3.2: Based on the social mobilization plan for the last round:

a. Are activities included to increase awareness of caregivers?

Yes No

b. Are activities included to specifically target high risk groups?

Yes No

c. Are activities included to address children not vaccinated because they are absent when teams visit? (e.g. campaign awareness through schools, mobilization activities in transit, cross-border, etc)

Yes No

B3.3 Are there lists of non-compliant/refusal households for all areas during the last campaign?

Yes No

If no, why not:

B3.4 Is there written analysis of main reasons for refusal in the district?

Yes No

If yes, what are the main 3 (tick only 3 or less that apply):

OPV is not safe Religious reasons Too many rounds

Developmental concerns No felt need Other _____

B3.5 What activities have taken place in the last round to specifically target the non-compliant families?

B3.6 Are all/most social mobilizers from the local community?

Yes No

If no, why: _____

B3.7 Do the influencers identified in the microplan participate in house to house activities to convert non-compliant households?

Yes No

If no, why not:

B3.8 What are the top 3 social/communication challenges in the district?

1. _____

2. _____

3. _____

B3.9 Comments on the SM plan (highlight gaps/areas that need improvement, good practices): _____

PART B: PROGRAMME ASSESSMENT (SUB-DISTRICT)

In the sub-district where the community will be surveyed, identify the following key informants:

- *Polio focal point*
- *Team Supervisor for most recent campaign*
- *Sub-district or District supervisor for communications staff (if different from team supervisor or Polio focal point)*
- *Traditional/religious leader from the area (identified in the microplan)*

Use the following documents to complete the assessment:

- *Sub-district micro plans*
- *Sub-district Soc mob plans*
- *Minutes of TF meetings*

Key Informant B1: Polio focal point at Sub-District Level

Select the focal point responsible for overseeing the quality of polio campaigns in the community surveyed

B1.1 Are there minutes of the last task-force meeting held in advance of the last SIA?

Yes

No

B.1.2 If yes, who participated in the meeting?

B1.3 Are microplans from your team supervisor submitted to you at least xx days before the campaign? (country to adapt as per guidelines)

Yes

No

B1.4 Have all microplans for the area been reviewed and validated by the polio focal point? (observation)

Yes No

Based on the sub-district micro plan, does the area have a sufficient number of vaccination teams to cover all children within the campaign days (observation)?

Yes No

If no, which areas demonstrate an unreasonable workload for vaccination teams?

B1.4 The following elements are included in the sub-district microplan of the last campaign (tick all that apply):

a. Identification of high risk groups/settlements

Yes No N/A

Comments: _____

b. Special team to cover high risk groups/settlements

Yes No N/A

Comments: _____

c. Clear map of the team's area, updated as per the last round

Yes No N/A

Comments: _____

d. Social map of the team area, updated as per the last round

Yes No N/A

Comments: _____

e. Key challenges of the area, as demonstrated by last month's SIA data (LQAS/IM)

Yes No N/A

Comments: _____

f. Name of social mobilizer

Yes No N/A

Comments: _____

g. Identification of at least one influencer

Yes No N/A

Comments: _____

h. Identification of events/festivals in the area to be covered before/after the campaign

Yes No N/A

Comments: _____

Key Informant B2: Team Supervisor for most recent campaign

Select the team supervisor responsible for overseeing the vaccination team in the community that will be surveyed in Part C

B2.1 Are there minutes of the last micro-planning meeting held in advance of the last SIA?

Yes

No

B.2.2 If yes, who participated in the meeting?

B2.3 The following elements are included in the microplan of the last campaign (tick all that apply):

a. Identification of high risk groups/settlements

Yes No N/A

Comments: _____

b. Special team to cover high risk groups/settlements

Yes No N/A

Comments: _____

c. Clear map of the team's area, updated as per the last round

Yes No N/A

Comments: _____

d. Social map of the team area, updated as per the last round

Yes No N/A

Comments: _____

e. Key challenges of the area, as demonstrated by last month's SIA data (LQAS/IM)

Yes No N/A

Comments: _____

f. Names of social mobilizer listed for each area

Yes No N/A

Comments: _____

g. Identification of at least one influencer

Yes No N/A

Comments: _____

h. Identification of events/festivals in the area to be covered before/after the campaign

Yes No N/A

Comments: _____

B2.4 What is the composition of the team, as identified in the microplan (tick all that apply)?

Government healthworker

Vaccinator

Recorder

Social mobilizer

Total number of people per team: _____

How many team members are women: _____

How many team members come from the local community: _____

Does the social mobilizer come from the local community? Yes No

How many team members are <18: _____

B2.5 Does your area have a sufficient number of vaccination teams to cover the area within the campaign days? If no, give reasons why additional teams are required:

B2.6 Did all your teams have enough OPV in the last campaign?

Yes No

B2.7 Did all your teams have enough finger markers in the last campaign?

Yes No

B2.8 Is there evidence of accurate tracking of missed children through tally sheets?

Yes No

B2.9 What is the protocol for visiting houses that have been missed?

B2.10 What are the main challenges that you face managing your team (no more than 3)?

1. _____
2. _____
3. _____

Key Informant B3: Sub-district Social Mobilization focal point

Select either the Government officer responsible for Polio in the area, or a specific focal point managing social mobilization and communication. If this area is covered by the Government officer, please address the questions below to him. If the area is covered by an NGO, please address the questions to the most relevant NGO focal point.

Review the social mobilization plan first, and follow-up with questions to the focal point.

B3.1 Is there written evidence of a detailed social mobilization plan for the area?

- Yes No

If no, why not:

B3.2: Based on the detailed social mobilization plan for the last round:

f. Are activities included to increase awareness of caregivers?

- Yes No

g. Are activities included to specifically target high risk groups?

- Yes No

h. Are activities included to address children not vaccinated because they are absent when teams visit? (e.g. campaign awareness through schools, mobilization activities in transit, cross-border, etc)

- Yes No

B3.3 Is there a list of non-compliant/refusal households for all areas during the last campaign?

- Yes No

If no, why not:

B3.4 Is there written analysis of main reasons for refusal in the district?

- Yes No

B3.5 If yes, what are the main 3 (tick only 3 or less that apply):

- OPV is not safe Religious reasons Too many rounds
 Developmental concerns No felt need Other _____

B3.6 What activities have taken place in the last round to specifically target the non-compliant families?

B3.7 Does a social mobilizer accompany each team during the round?

Yes No N/A

If no, why:

B3.8 Is there a list of social mobilizers for the area?

Yes No N/A

If yes, how many social mobilizers are in the area?

Male (#): _____

Female (#): _____

B3.9 Are they all from the local community?

Yes No

If no, why: _____

B3.10 Where are social mobilizers from (tick all that apply):

NGOs SM Network Government health system Community volunteers

Specify: _____

B3.11 Do the influencers identified in the microplan participate in house to house activities to convert non-compliant households?

Yes No

If no, why not:

Comments on the SM plan (highlight gaps/areas that need improvement, good practices): _____

PART C: COMMUNITY SURVEY

Key informant 1: Traditional or religious leader of the area that will be surveyed

Community Household Survey

C1: Demographic information

1.1 Geographic setting (tick all that apply):

- Urban Slum Permanent camp/shelter
- Rural Temporary camp/setting High Rise
- Multi-family dwelling

1.2 Number of children under 5 in the household: _____

1.3 Caregiver interviewed:

- Mother _____
- Father _____
- Other _____

1.4 Religion: _____ 1.4 Ethnicity: _____

1.5 Language: _____

1.5 Literacy status (observed):

- Literate
- Partially literate
- Illiterate

1.6 Occupation:

- Father: _____
- Mother: _____
- Other adults in household: _____

1.7 Does your occupation involve contact with people from neighboring or other countries?

- Yes
- No

1.8 High Risk Group (countries to adapt as per context)

- Nomad
- Ethnic/religious minority
- Migrant worker (specify type)
- Inaccessible population

1.8 Travel History: Did you travel over the past 3 months? If yes, please provide details.

Travel by	Reason for travel	Dates/Time periods (and frequency)	Mode of transport
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Child			
Family			
Relative			

1.9 Environmental conditions:

Drinking water

Type of toilet

Drainage

Bathing (Children playing in stagnant/semi-stagnant pools)

C2: Knowledge of Polio and Campaigns

2.1 Where do you go for trusted information about your child's health? (Tick all that apply)

- Medical doctor or health service provider
- Community health worker
- Informal/spiritual healer
- Community mobilizer
- Imam or religious leader
- Community elder
- Mother in law
- Friends/neighbors
- TV/Radio

2.2 Have you heard of Polio?

- Yes
- No

2.3 If yes, what are the symptoms?

- Don't know
- Other

2.4 Did you know about the last polio campaign in your area before it started ?

- Yes
- No

2.5 If yes, where did you hear about it?

- Medical doctor or health service provider
- Community health worker
- Informal/spiritual healer
- Community mobilizer
- Imam or religious leader
- Community elder
- Mother in law
- Friends/neighbors
- TV/Radio
- Posters
- SMS

2.6 Have you had contact with a social mobilizer in your area?

Yes

No

2.7 If yes, is the social mobilizer from your community?

Yes

No

C3: Immunisation Status and Health Seeking Behavior

3.1 OPV coverage

Date of the last SIA in the area: _____

3.1 Do you vaccinate your child regularly against Polio?

Yes

No

House no.	Age of the <5 (in months)	OPV history			Has seen a case of AFP in past 3 months?
		No. of routine OPV doses	Verified by card (Y / N)	Received OPV during last round (Y/ N)	

3.2 Did you vaccinate your child in the last polio campaign?

Yes

No

3.2 If no, why?*

Team did not show up

I/children were not home

Vaccination team is not appropriate (too young, wrong gender, unacceptable appearance, unskilled)

OPV is not safe/acceptable

If missed child due to absence:

3.3 If you/children were not home, where were you?

- Market
- Church/mosque
- School (specify if religious or quranic school) _____
- Relative's house
- Working (specify where) _____
- Other (Specify) _____

3.4 What is the easiest place/way for you to give your child OPV? (tick all that apply)

- Nearest health facility
- Teams should return at another time
 - Early morning
 - Late in evening
 - Another day
- Teams should go to locations where children are (as above)
- Teams should vaccinate on roads/public transport

If missed child due to poor service delivery

3.4 Why is the polio team not appropriate? (tick all that apply)

- Do not have adequate knowledge/information about polio or other health issues
- Did not recognize or trust vaccinators
- Vaccinators are too young
- Vaccinators are not appropriate gender
- Vaccinators do not look clean

If missed child due to refusal

3.4. Why do you think OPV is not safe or acceptable?

- Expired/poor quality vaccine
- OPV causes side effects
- Too many doses
- Child had fever/diarrhoea
- Religious reasons
- Western propaganda
- Have been told not give it to my child(ren)

3.5 Have you heard similar opinions from others in this community?

- Yes
- No

3.6 Do you think influential people in this community support OPV?

- Yes

No

Don't know

3.7 Where do you generally take your child if he is sick or needs vaccination?

Community health centre

Ward/district health facility

Private

Government

Provincial/state hospital

Private

Government

Informal health provider or spiritual healer

3.8 Is this the nearest health facility?

Yes

No

If answered no in 3.8, please answer the next 2 questions:

3.9 Why don't you go to the nearest health facility?

3.10 How far are you (on foot) from the nearest health facility?

5-10 minutes

10-30 minutes

>30 minutes
