

Annex: Karnataka August 2017 NDD PMCV Report
Detailed findings from process monitoring

Table PM1: Training and source of information about NDD among teachers/headmasters and *anganwadi* workers, August 2017

Indicators	School			<i>Anganwadi</i>		
	Denominator	Numerator	%	Denominator	Numerator	%
Attended training for current round of NDD	249	141	57	250	181	72
Ever attended training for NDD ¹	249	144	58	250	188	75
Never attended training for NDD	249	105	42	250	62	25
Reasons for not attending NDD training (Multiple Response)						
Location was too far away	108	11	10	69	6	9
Did not know the date/timings/venue	108	66	61	69	32	46
Busy in other official/personal work	108	12	11	69	6	9
Attended deworming training in the past	108	3	3	69	7	10
Not necessary	108	12	12	69	8	12
No incentives/no financial support	108	13	12	69	13	19
Trained teacher that provided training to other teachers in their schools						
All other teachers	141	70	50	NA	NA	NA
Few teachers	141	26	19	NA	NA	NA
No (himself/herself only teacher)	141	33	23	NA	NA	NA
No, did not train other teachers	141	11	8	NA	NA	NA
Source of information about current NDD round (Multiple Response)						
Television	249	51	20	250	42	17
Radio	249	37	15	250	29	12
Newspaper	249	54	22	250	41	16
Banner	249	31	13	250	32	13
SMS	249	47	19	250	40	16
Other school/teacher/ <i>anganwadi</i> worker	249	68	27	250	69	28
WhatsApp message	249	21	9	250	10	4
Training	249	71	28	250	100	40
Others	249	37	15	250	30	12
Received SMS for current NDD round	249	79	32	250	81	32

¹ Includes those school teachers and *anganwadi* workers who attended training either for NDD August 2017 or attended training in past.

Table PM2: Awareness about NDD among teachers/headmasters and *anganwadi* workers, August 2017

Indicators	School			<i>Anganwadi</i>		
	Denominator	Numerator	%	Denominator	Numerator	%
Awareness about the ways a child can get worm infection	249	199	80	250	210	84
Different ways a child can get worm infection (Multiple Response)						
Not using sanitary latrine	249	143	57	250	151	60
Having unclean surroundings	249	152	61	250	165	66
Consume vegetables and fruits without washing	249	128	52	250	141	56
Having uncovered food and drinking dirty water	249	126	51	250	125	50
Having long and dirty nails	249	126	51	250	124	50
Moving in bare feet	249	123	49	250	134	54
Having food without washing hands	249	129	52	250	124	50
Not washing hands after using toilets	249	89	36	250	107	43
Awareness about all the possible ways a child can get a worm infection²	199	48	24	210	51	24
Perceives that health education should be provided to children	249	200	80	250	208	83
Awareness about correct dose and right way of administration of albendazole tablet						
1-2 years of children(Crush the half tablet between two spoons and administer with water)	NA	NA	NA	250	139	56
2-3 years of children(Crush one full tablet between two spoons, and administer with water)	NA	NA	NA	250	42	17
3-5 years of children(one full tablet and child chewed the tablet properly)	NA	NA	NA	250	218	87
6-19 years of children (one full tablet and child chewed the tablet properly)	249	239	96	250	237	95
Awareness about non-administration of albendazole tablet to sick child						
Will administer albendazole tablet to sick child	249	37	15	250	37	15
Will not administer albendazole tablet to sick child	249	212	85	250	213	85

²Includes those who were aware that a child can get worm infection if she/he does not use sanitary latrine, have unclean surroundings, consume vegetable and fruits without washing, have uncovered food and drinking dirty water, have long and dirty nails, moves in bare fee, have food without washing hands and not washing hands after using toilets.

Awareness about consuming albendazole tablet						
Chew the tablet	249	233	94	250	232	93
Swallow the tablet directly	249	16	6	250	18	7
Awareness about consuming albendazole in school/ <i>anganwadi</i>	249	244	98	250	240	96
Awareness about the last date (August 22, 2017) for submitting the reporting form	249	94	38	250	100	40
Awareness about submission of reporting forms to ANM by August 22, 2017	249	146	59	250	145	58
Awareness to retain a copy of the reporting form	249	160	64	250	157	63

Table PM3: Deworming activity, drug availability, and list of unregistered and out-of-school children, August 2017

Indicators	School			<i>Anganwadi</i>		
	Denominator	Numerator	%	Denominator	Numerator	%
Albendazole tablet administered on the day of visit						
Yes, ongoing	249	68	28	250	74	30
Yes, already done	249	93	37	250	101	40
Yes, after sometime	249	19	7	250	13	5
No, will not administer today	249	69	28	250	62	25
Schools/<i>anganwadis</i> conducted deworming on either of the day³	249	183	74	250	194	78
Schools/<i>anganwadis</i> conducted deworming on NDD⁴	124	89	72	125	90	72
Schools/<i>anganwadis</i> conducted deworming on Mop-Up Day⁵	125	91	73	125	98	78
Reasons for not conducting deworming						
No information	66	39	59	56	19	34
Albendazole tablet not received	66	15	24	56	18	32
Apprehension of adverse events	66	0	0	56	2	4
Others ⁶	66	11	17	56	17	30
Attendance on NDD⁷	10556	10059	95	NA	NA	NA
Attendance on Mop-Up Day⁸	26154	23302	89	NA	NA	NA
<i>Anganwadi</i> having list of unregistered/out-of-school children	NA	NA	NA	250	133	53
Out of school children (Age 6-19 years) administered albendazole tablet	NA	NA	NA	250	127	51

³Schools/*anganwadis* administered albendazole tablet to children either on NDD or Mop-Up Day

⁴Based on the samples visited on NDD.

⁵Based on the samples visited on Mop-Up Day only.

⁶School administer the albendazole tablet to children a day before holiday, children/student absent, postponed due to festival.

⁷Based on those schools conducted deworming on NDD

⁸Based on those schools conducted deworming on Mop-Up-Day

Unregistered children (Age 1-5 years) administered albendazole tablet	NA	NA	NA	250	156	62
Sufficient quantity of albendazole tablets ⁹	178	153	86	199	167	84

Table PM4: Integrated distribution of albendazole tablets and IEC materials, August 2017

Indicators	Schools			Anganwadi		
	Denominator	Numerator	%	Denominator	Numerator	%
Items received by school teacher and anganwadi worker						
Albendazole tablet	249	178	72	250	199	80
Poster/banner	249	129	52	250	155	62
Handouts/ reporting form	249	125	50	250	126	50
Received all materials	249	114	46	250	117	47
Items verified during Independent Monitoring						
Albendazole tablet	178	175	98	199	191	96
Poster/banner	129	126	98	155	149	96
Handouts/ reporting form	125	116	93	126	120	95
Received all materials	114	107	94	117	108	92
No of school teachers/anganwadi worker attended training and received items during training						
Albendazole tablet	178	118	66	199	149	74
Poster/banner	129	99	77	155	124	80
Handouts/ reporting form	125	94	75	126	100	79
Received all materials	114	87	76	117	94	80
Integrated Distribution of albendazole tablet, IEC and training materials¹⁰	249	87	35	250	94	38

Table PM5: Implementation of deworming activity and observation of monitors, August 2017

Indicators	Schools			Anganwadi		
	Denominator	Numerator	%	Denominator	Numerator	%
Deworming activity was taking place	68	63	92	74	67	91
Albendazole tablets were administered by						
Teacher/headmaster	70	68	97	77	27	35
Anganwadi worker	70	1	2	77	38	49
ASHA /Sahiya	70	1	2	77	9	12
ANM	70	0	0	77	3	4
Student	70	0	0	77	0	0
Followed any recording protocol¹¹	160	131	82	173	141	82
Protocol followed						
Putting single/double tick	131	103	79	142	110	78

⁹ This indicator is based on the sample that received albendazole tablet.

¹⁰ Integrated distribution of NDD kits includes albendazole, banner/poster and handout/reporting forms and provided to schools and AWC during the trainings.

¹¹ Any recording protocol implies putting single tick (✓), double tick (✓✓), any other symbol or preparing separate list for all those children administered albendazole tablets on NDD or Mop-Up Day.

Put different symbols	131	16	13	142	16	11
Prepare the separate list for dewormed	131	11	9	142	16	11
Visibility of poster/banner during visits	129	109	85	155	115	74

Table PM6: Awareness about Adverse events and Its Management, August 2017

Indicators	Schools			Anganwadi		
	Denominator	Numerator	%	Denominator	Numerator	%
Opinion of occurrence of an adverse event after administering albendazole tablet	249	78	31	250	73	29
Awareness about possible adverse events (Multiple Response)						
Mild abdominal pain	78	58	75	73	57	78
Nausea	78	49	63	73	49	67
Vomiting	78	52	67	73	48	66
Diarrhea	78	29	38	73	22	30
Fatigue	78	34	43	73	32	44
All possible adverse event ¹²	78	14	18	73	11	15
Awareness about mild adverse event management						
Make the child lie down in open and shade/shaded place	249	176	71	250	183	73
Give ORS/water	249	97	39	250	102	41
Observe the child at least for 2 hours in the school	249	61	25	250	65	26
Don't know/don't remember	249	37	15	250	24	10
Awareness about severe adverse event management						
Call PHC or emergency number	249	187	75	250	196	78
Take the child to the hospital/call doctor to school	249	92	37	250	99	40
Don't know/don't remember	249	26	10	250	16	6
Available contact numbers of the nearest ANM or MO-PHC	249	219	88	250	219	88
Asha present in Anganwadi center	NA	NA	NA	250	123	49

Table PM7: Selected Indicators of Process Monitoring in Private Schools, August 2017

Indicators ¹³	Denominator	Numerator	%
Attended training for current round of NDD	32	14	43
Received albendazole tablets	32	17	52

¹²Includes those who are aware that a mild abdominal pain and nausea and vomiting and diarrhea and fatigue can be reported by a child after taking albendazole tablet.

¹³These indicators are based on small samples; therefore, precautions should be taken while interpreting the results as these are not representative of all private schools in the state

Sufficient quantity of albendazole tablets	17	15	91
Received poster/banner	32	10	30
Received handouts/ reporting form	32	13	40
Received SMS for current NDD round	32	27	83
Albendazole administered to children	32	17	53
Reasons for not conducting deworming			
No information	15	10	69
Albendazole tablets not received	15	4	27
Already dewormed all children on deworming day ¹⁴	15	0	0
Others ¹⁵	15	1	4
Albendazole tablet administered to children by teacher/headmaster ¹⁶	6	6	100
Perceive that health education should be provided to children	32	14	43
Awareness about correct dose and right way of albendazole administration	32	31	97
Awareness about non-administration of albendazole tablet to sick child	32	31	95
Opinion of occurrence of an adverse event after taking albendazole tablet	32	14	44
Awareness about occurrence of possible adverse events			
Mild abdominal pain	14	12	81
Nausea	14	8	60
Vomiting	14	11	76
Diarrhea	14	6	45
Fatigue	14	11	79
Awareness about mild adverse event management			
Let the child rest in an open and shaded place	32	21	65
Provide clean water to drink/ORS	32	4	14
Contact the ANM/nearby PHC	32	3	10
Available contact numbers of the nearest ANM or MO-PHC	32	25	79
Followed correct ¹⁷ recording protocol	12	12	100

Detailed findings from Coverage Validation

Table CV1: Findings from School and *Anganwadi* Coverage Validation Data

Sr.No.	Indicators	Schools			<i>Anganwadis</i>		
		Denominator	Numerator	%	Denominator	Numerator	%
1	Percentage of schools/ <i>anganwadis</i> Conducted deworming ¹⁸	625	498	80	625	571	91
	Percentage of government schools conducted deworming	498	479	96	NA		

¹⁴Based on the samples that did not conduct deworming on Mop-Up Day.

¹⁵School administer the albendazole tablet to children a day before holiday, children/student absent, postponed due to festival

¹⁶This indicator is based on samples where deworming was ongoing.

¹⁷Correct recording protocol implies putting single tick (✓) on NDD and double tick (✓✓) for all those children administered albendazole tablets.

¹⁸Schools and *anganwadis* that conducted deworming on NDD or Mop-Up Day.

	Percentage of private schools conducted deworming	498	19	4	NA		
1a	Percentage of School and <i>anganwadis</i> administered albendazole on day of - (Multiple Response)						
	a. National Deworming Day	498	454	91	571	536	94
	b. Mop-Up Day	498	196	39	571	257	45
	c. Between NDD and Mop-Up Day	498	66	13	571	59	10
	d. Both days (NDD and Mop-Up day)	498	178	36	571	253	44
1b	Reasons for not conducting deworming						
	a. No information	127	79	63	54	36	65
	b. Drugs not received	127	31	24	54	17	32
	c. Apprehension of adverse events	127	11	9	54	0	0
	d. Others ¹⁹	127	6	4	54	1	3
2	Percentage of schools and <i>anganwadis</i> left over with Albendazole tablet after deworming	498	232	47	571	235	41
2a	Number of albendazole tablets left after deworming						
	a. Less than 50 tablets	232	204	88	235	214	91
	b. 50-100 tablets	232	20	9	235	16	7
	c. More than 100 tablets	232	8	3	235	5	2
3	Copy of reporting form was available for verification	498	269	54	571	312	55
3a	Reasons for non-availability of copy of reporting form						
	a. Did not received	230	67	29	259	81	31
	b. Submitted to ANM	230	138	60	259	156	60
	c. Unable to locate	230	24	10	259	22	8
	d. Other	230	0	0	259	0	0
4	<i>Anganwadish</i> having list of unregistered children (Aged 1-5 years)	NA			571	246	43
5	<i>Anganwadish</i> having list of out-of-school children (Aged 6-19 years)	NA			571	183	32

Table CV2: Selected indicators based on ASHA's interview at *Anganwadi* Centre, Coverage Validation Data

Sr. No	Indicators	<i>Anganwadis</i>		
		Denominator	Numerator	%
1	ASHA present at <i>Anganwadi</i> Centre during visit of Independent monitoring ²⁰	571	545	95

NA is Not Applicable

¹⁹ Other includes mainly strike of *anganwadi* worker and no incentives for deworming.

²⁰ Monitors were advised to call ASHA at *anganwadi* centers during coverage validation and collect relevant information.

2	ASHA conducted meetings with parents to inform about NDD	571	382	67
3	ASHA prepared list of unregistered and Out of school children	571	339	59
4	ASHA shared the list of unregistered and Out of school children with <i>Anganwadi</i> teacher	339	326	96
5	ASHA administered albendazole to children	571	456	80
6	ASHA received incentive for NDD Feb 2017 round	571	150	26

Table CV3: Recording protocol, verification, inflation and attendance in schools and *anganwadis*

Sr. No	Indicators	Schools/Children			<i>Anganwadis/Children</i>		
		Denominator	Numerator	%	Denominator	Numerator	%
1	Followed correct ²¹ recording protocol	498	298	60	571	425	74
2	Followed partial ²² recording protocol	498	128	26	571	61	11
3	Followed no ²³ recording protocol	498	72	14	571	85	15
4	State-level verification factor ²⁴ (Children enrolled)	23663	13144	56	12229	14061	115
	a. Children registered with <i>anganwadis</i>	NA			7140	7600	106
	b. Children unregistered with <i>anganwadis</i> (Aged 1-5)	NA			3306	3656	111
	c. Out-of-school children (Aged 6-19)	NA			1783	2805	157
5	Attendance on previous day of NDD (Children enrolled)	72873	65706	90	NA		
6	Attendance on NDD (Children enrolled)	72873	65782	90	NA		
7	Attendance on Mop-Up Day (Children enrolled)	72873	65667	90	NA		
8	Children who attended on both NDD and Mop-Up Day (Children enrolled)	72873	62803	86	NA		
9	Maximum attendance of children on Deworming Day and Mop-Up Day ²⁵ (Children enrolled)	72873	68647	94	NA		

NA is Not Applicable

²¹Correct recording protocol includes schools where all the classes put single tick (✓) on NDD and double tick (✓✓) on Mop-Up Day to record the information of dewormed children.

²²Partial recording protocol includes schools where all the classes did not follow correct protocol, put different symbols and prepared separate list to record the information of dewormed children.

²³No protocol includes all those schools where none of the classes followed any protocol to record the information of dewormed children.

²⁴Ratio of recounted value of the dewormed children to the reported value. This calculation is based on only those schools (n=269) and *anganwadis* (n=315) where deworming was conducted and copy of reporting form was available for verification.

NA is Not Applicable

²⁵ Maximum attendance refers to the total attendance of children who were exclusively present in school either on NDD or Mop-Up Day and children who attended school on both days.

10	Estimated NDD coverage ²⁶ 27	68	95
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Table CV4: Description on children (6-19 years) interviewed in the schools (540) during coverage validation

Sr.No	Indicators	Denominator	Numerator	%
1	Children received Albendazole tablets	1452	1424	98
2	Children aware about the Albendazole tablets	1424	1407	99
3	Source of information about deworming (Multiple response)			
15	a. Teacher/school	1407	1363	97
	b. Television	1407	367	26
	c. Radio	1407	205	14
	d. Newspaper	1407	215	15
	e. Poster/Banner	1407	422	30
	f. Parents/siblings	1407	211	15
	g. Friends/neighbors	1407	89	6
4	Children aware about the worm infection	1424	1313	92
5	Children awareness about different ways a child can get worm infection(Multiple response)			
	a. Not using sanitary latrine	1313	1114	85
	b. Having unclean surroundings	1313	811	62
	c. Consume vegetables and fruits without washing	1313	881	67
	d. Having uncovered food and drinking dirty water	1313	543	41
	e. Having long and dirty nails	1313	685	52
	f. Moving in bare feet	1313	425	32
	g. Having food without washing hands	1313	565	43
	h. Not washing hands after using toilets	1313	345	26
6	Children consumed Albendazole tablet	1424	1424	100
7	Way children consumed the tablet			
	a. Chew the tablet	1424	1362	96
	b. Swallow tablet directly	1424	62	4
8	Supervised administration of tablets	1424	1292	91
9	Reasons for not consuming Albendazole tablet			
	a. Feeling sick	0	0	0
	b. Afraid of taking the tablet	0	0	0
	c. Parents told me not to have it	0	0	0
	d. Do not have worms so don't need it	0	0	0
	e. Did not like the taste	0	0	0

²⁶ This was estimated on the basis of NDD implementation status, attendance on NDD and Mop-Up Day, whether child received albendazole and its supervised administration. Since no child interview is conducted at *anganwadis*; this has not been estimated for *anganwadis*.

²⁷This was estimated by implying state-level verification factor on government reported coverage for 1-5 years registered children in AWC.