

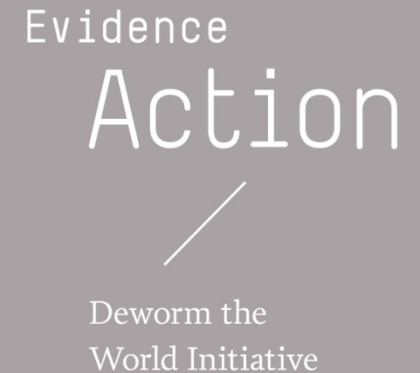
Year 1 Monitoring & Evaluation: Program Monitoring and Coverage Validation Review

CIFF/Dubai Cares Y1 Annual Program Review

Evidence Action – Deworm the World Initiative, India

July 16, 2015

Outline of the Presentation



- Key M&E Activities in India
- Assessing System Readiness: Preparatory Monitoring
- Monitoring Details- NDD 2015
- Coverage Reporting - NDD 2015
- Bihar Coverage Trends
- NDD Achievements Across All States
- Key Findings from Independent Monitoring
- Recommendations

Key M&E Activities in India

Monitoring Activities

- Process monitoring
 - Preparatory monitoring
 - Deworming day and mop-up day monitoring
- Coverage reporting
- Coverage validation

Prevalence Surveys

- Baseline survey and post-round 3 impact measurement

Assessing System Readiness: Preparatory Monitoring

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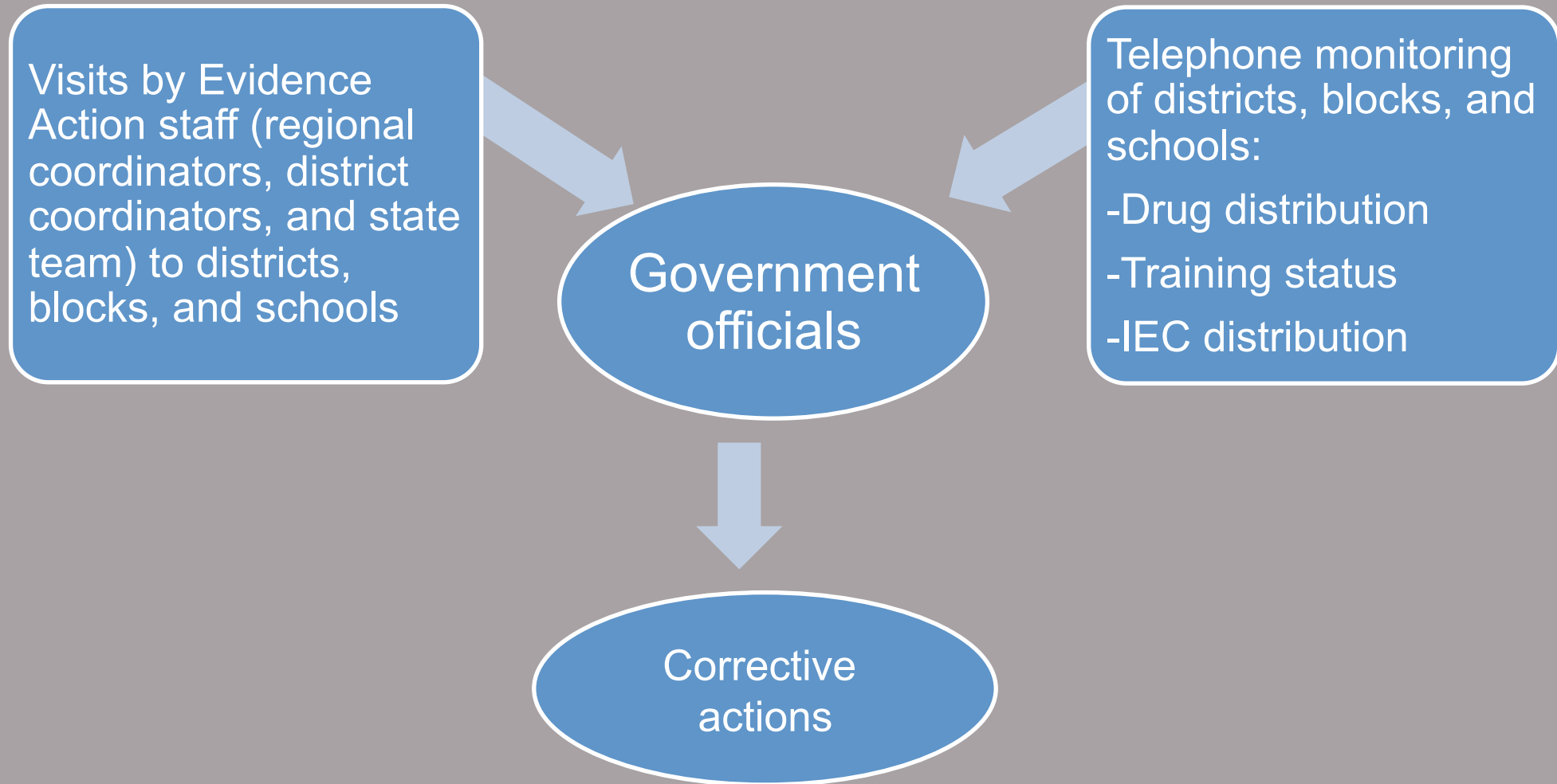
Visits by Evidence Action staff (regional coordinators, district coordinators, and state team) to districts, blocks, and schools

Telephone monitoring of districts, blocks, and schools:

- Drug distribution
- Training status
- IEC distribution

Government officials

Corrective actions



Monitoring Details- NDD 2015

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State	Monitoring team	Total monitoring calls made by TCs	Independent monitoring locations
Bihar	38 DCs, 4 RCs, 6 TCs & 125 IMs	19,567	995 Schools
Delhi	12 DCs, 4 TCs & 80 IMs	8,504	400 Schools and 400 <i>anganwadis</i>
Rajasthan	33 DCs, 3 RCs, 3 TCs & 125 IMs	14,485	625 Schools and 375 <i>anganwadis</i>
Madhya Pradesh	50 DCs, 5 RCs, 6 TCs & 125 IMs	4,840	1,000 Schools
Chhattisgarh	55 IMs	NA	490 Schools and 73 <i>anganwadis</i> *

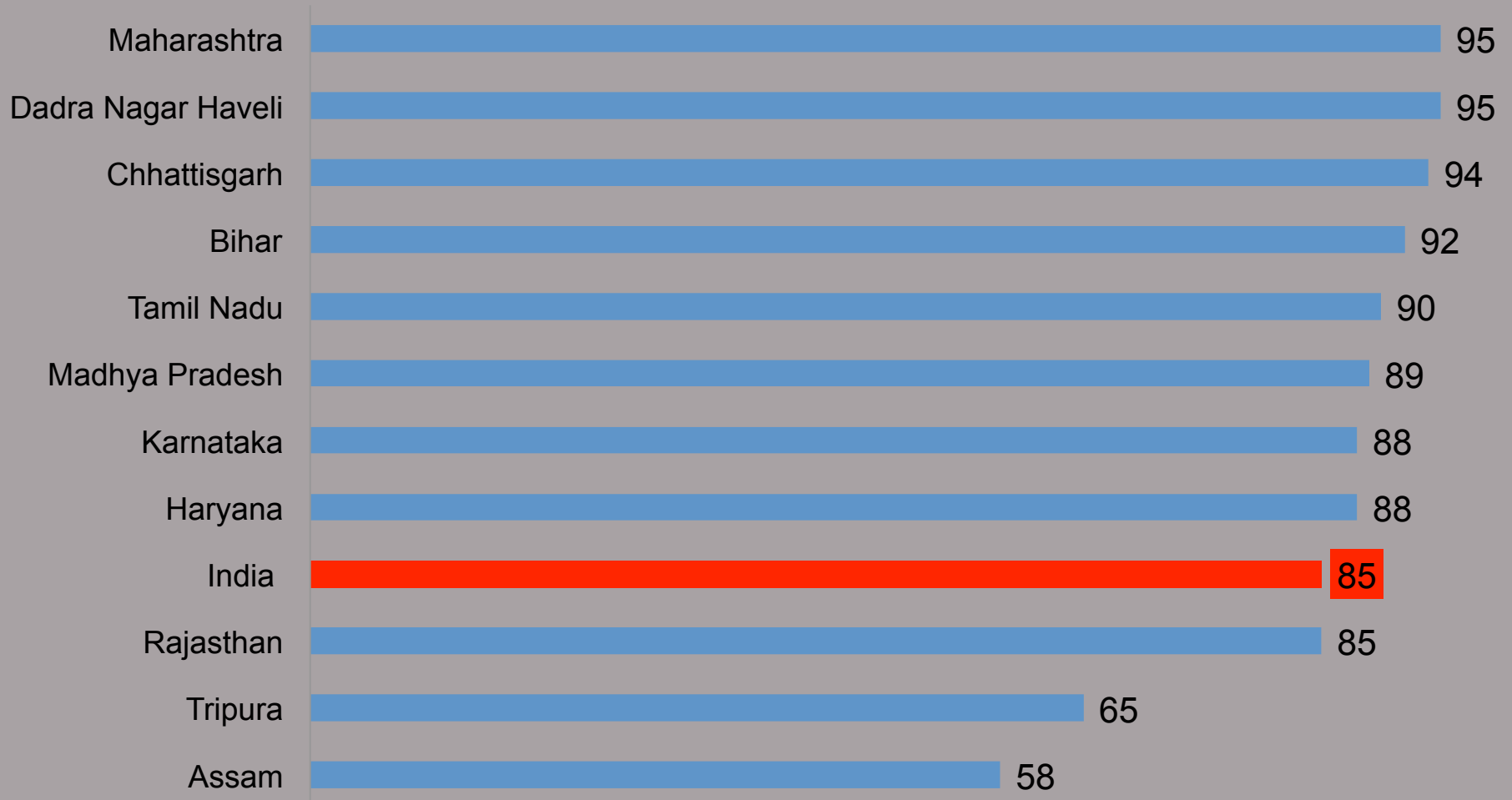
DCs – district coordinators, RCs - regional coordinators, TCs - tele-callers, and IMs – independent monitors; *In *anganwadis*, we collected information on a subset of indicators.

Graphical Representation of State/UT wise Coverage of NDD

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Coverage Reporting - NDD 2015

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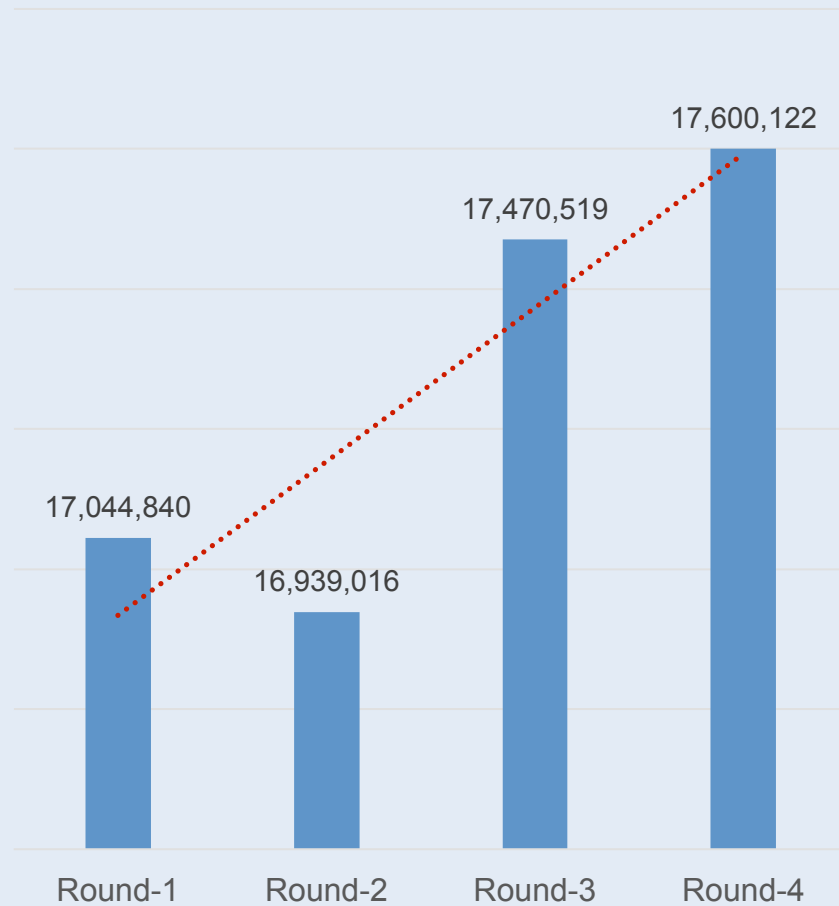
State	% of enrolled SAC (6-19 years) dewormed	No. of enrolled SAC (6-19 years) dewormed	No. of non-enrolled dewormed	% of PSAC (1-5 yrs) dewormed	No. of PSAC dewormed
Bihar	86%	17,600,122	1,118,062	NA	NA
Delhi	82%	1,828,562	NA*	81%	1,072,193
Rajasthan	84%	6,463,898	683,631	87%	4,711,239
Madhya Pradesh	91%	10,073,830	1,319,248	92%	7,097,422
Chhattisgarh (10-19 years only)	94%	916,596	131,587	NA	NA

*Non-enrolled children were covered in *anganwadis*; this figure is included in the PSAC total.

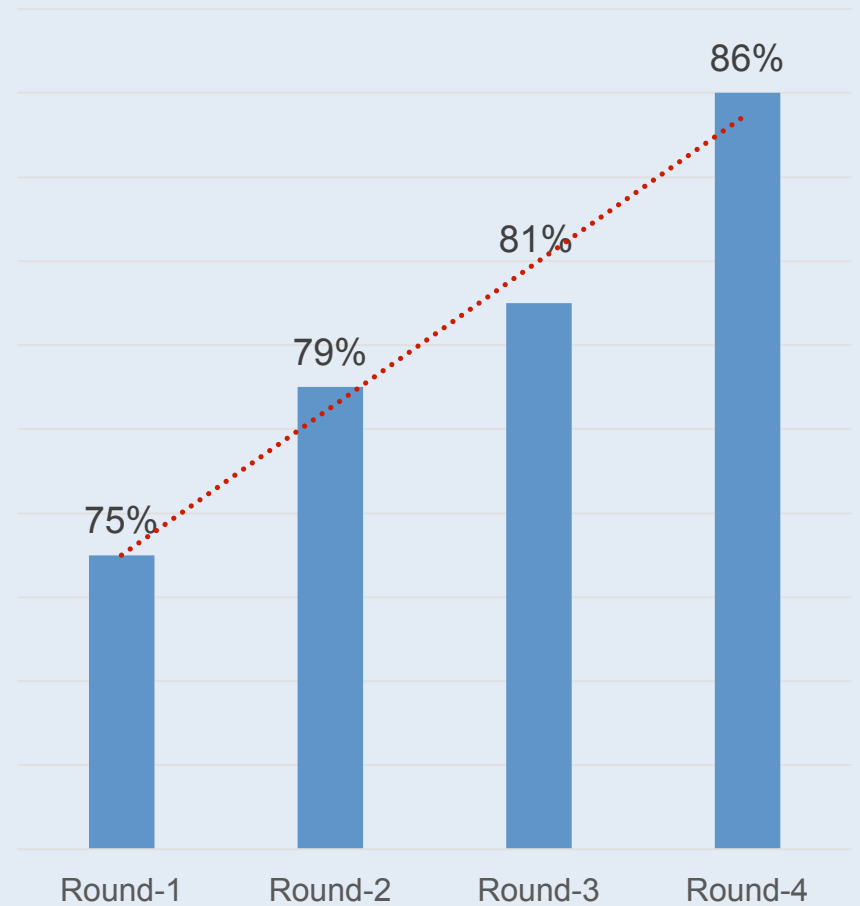
Bihar Coverage Trends

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Total Number Dewormed



% of Enrolled Children Dewormed



NDD Process Indicators

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State	% schools trained (teacher/headmaster)	% schools conducted deworming	% schools with sufficient drugs	% schools received poster/banner	% schools received handouts	% headmasters/teachers received SMS	% schools followed recording protocol
Bihar	86	92	76	52	67	67	69
Delhi	91	99	91	94	62	85	99
Rajasthan	64	94	94	36	30	70	85
Madhya Pradesh	40	86	75	65	56	40	84
Chhattisgarh (10-19 years)	41	99	96	26	43	34	48

Key Findings from Independent Monitoring



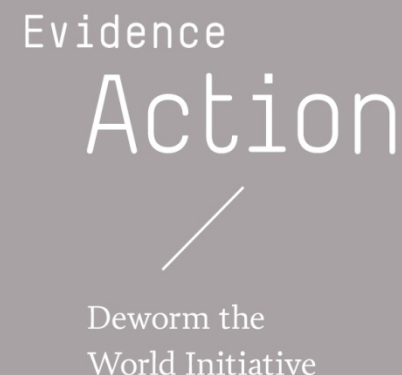
Training cascade

- Not all schools received training
- Lack of awareness regarding training schedules
- Attendance was better in states with prior school-based deworming experience

Drug distribution

- In Delhi, Rajasthan and Chhattisgarh, more than 90% of schools received sufficient drugs
- Bihar and Madhya Pradesh experienced drug shortages in 25% of schools
- In some states, schools remained with surplus drugs but lacked guidance from government on what to do with these

Key Findings from Independent Monitoring



IEC materials

- In all states except Delhi, schools had shortage of IEC materials
- In the states of Bihar, Delhi and Rajasthan, over two-thirds of headmasters received SMSs
- Low proportion of *anganwadi* workers received SMSs (18% in Rajasthan and 56% in Chhattisgarh)

Coverage reporting

- Recording protocols were followed in the majority of schools except in the state of Chhattisgarh
- Coverage reporting seems to be highly inflated in the state of Chhattisgarh

Recommendations

- To increase effectiveness of distribution channels for drugs and IEC materials:
 - integrate distribution with training
 - drug distribution based on updated enrollment data
 - issue reminders for timely printing of the materials
 - ensure better attendance at training
- Disseminate training schedules through multiple communication channels (departmental letters and SMS reminders) to improve attendance
- Improve contact databases so that deworming related messages can effectively reach all concerned functionaries
- Emphasize reporting protocols in trainings and reminder messages to ensure accurate reporting



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