Diverse tools and methods enable us to collect relevant information about coverage and analyse and validate findings

Triangulation ensures that the investigation is an intelligent and purposeful process

How and which tools are used depend on the particular context and the skills of the investigating team

Tools can and should be used to strengthen routine programme monitoring activities

SQUEAC Stages

STAGE 2

Stage 2:

Confirm the location of areas of high and low coverage and the reasons for coverage failure identified in stage one using small studies, small surveys or small-area surveys.

Quantitative and qualitative data from the Stage 1 investigation provide information as to:

- **Where coverage is likely to be satisfactory / unsatisfactory**
- **Likely barriers**

Information can be stated as a hypothesis to test (confirm / disprove)

How do we chose the right sampling approach?

Small Studies

Semi-quantitative pieces of work that focus on testing a single hypothesis, generally relating to processes that affect coverage rather than to coverage directly.

Example:

OTP-SFP Interface could be tested through an observational study.

Small Surveys

Small sample surveys undertaken in population groups.

Example:

Differences in coverage between religious groups (e.g. Christian vs. Muslim communities) or livelihood groups (e.g. agriculturalists vs. Pastoralist) can be tested using small surveys.

Small-area Surveys

Small sample size surveys used to test hypotheses regarding the spatial distribution of coverage.

Example:

Differences in coverage between different parts of a district (e.g. highland vs. lowland) can be tested this way.

If Small-Area Surveys are chosen, how do we sample?

We purposively select villages/communities based on our hypothesis

Coverage is <u>High</u>	Coverage is <u>Low</u>
• **High admissions** • **Proximity to health centre** • **Active case finding by volunteers**	• **No/few admissions** • **Patchy provision of OTP sites** • **Distance / villages fall between health centres**
Village/Community A	Village/Community X
Village/Community B	Village/Community Z

If the hypothesis is correct (and you select an appropriate threshold)

Coverage is <u>High</u> (as per hypothesis)	Coverage is <u>Low</u> (as per hypothesis)
Coverage >Threshold	Coverage <Threshold

Small area surveys in SQUEAC rely on an active & adaptive methodology.

Active: because it looks for SAM cases rather than expecting to find them in the sample

Adaptive: because it uses information collected during the survey to improve the search for cases

You should look for ALL SAM children, (those already in the programme and those not in the programme).
To actively ignore one group or the other is to introduce an unnecessary bias.

Case-finding needs to be EXHAUSTIVE

How does active/adaptive case-finding work in practice?

First Step

Develop a Case Finding Question

A description of the children we need to include in the sample – a representation reflecting perceivable characteristics, local understandings of the condition, local terminology and aided by visual representations.

This information is collected in Stage 1

Second Step

Identify Key Informants

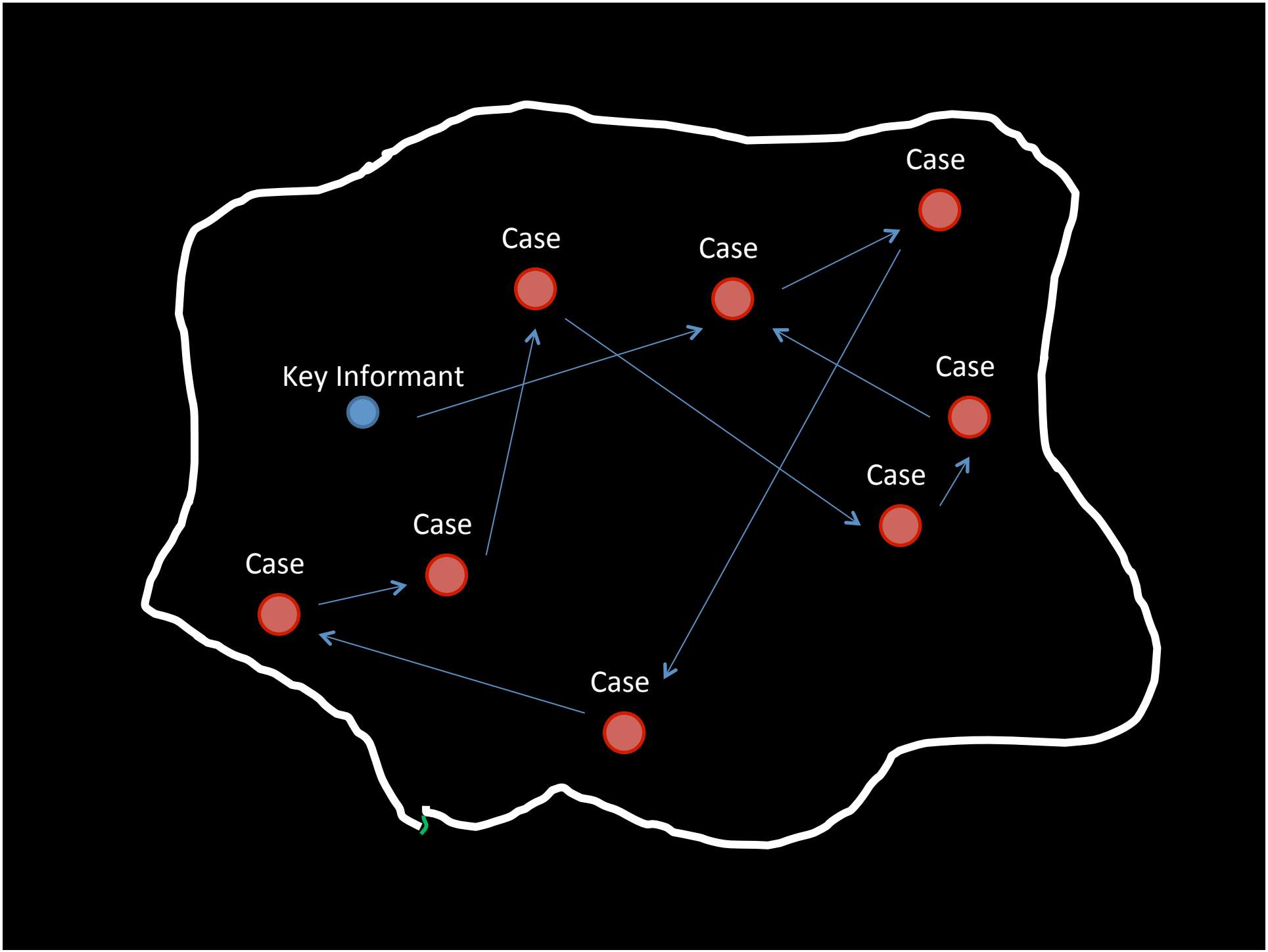
Community members who, because of their role, are more likely to know the location of cases. These should include a combination of community volunteers (excluding programme case finders), local leaders, traditional health practitioners (TBAs, etc), mothers of current/ recovering cases, children, etc.

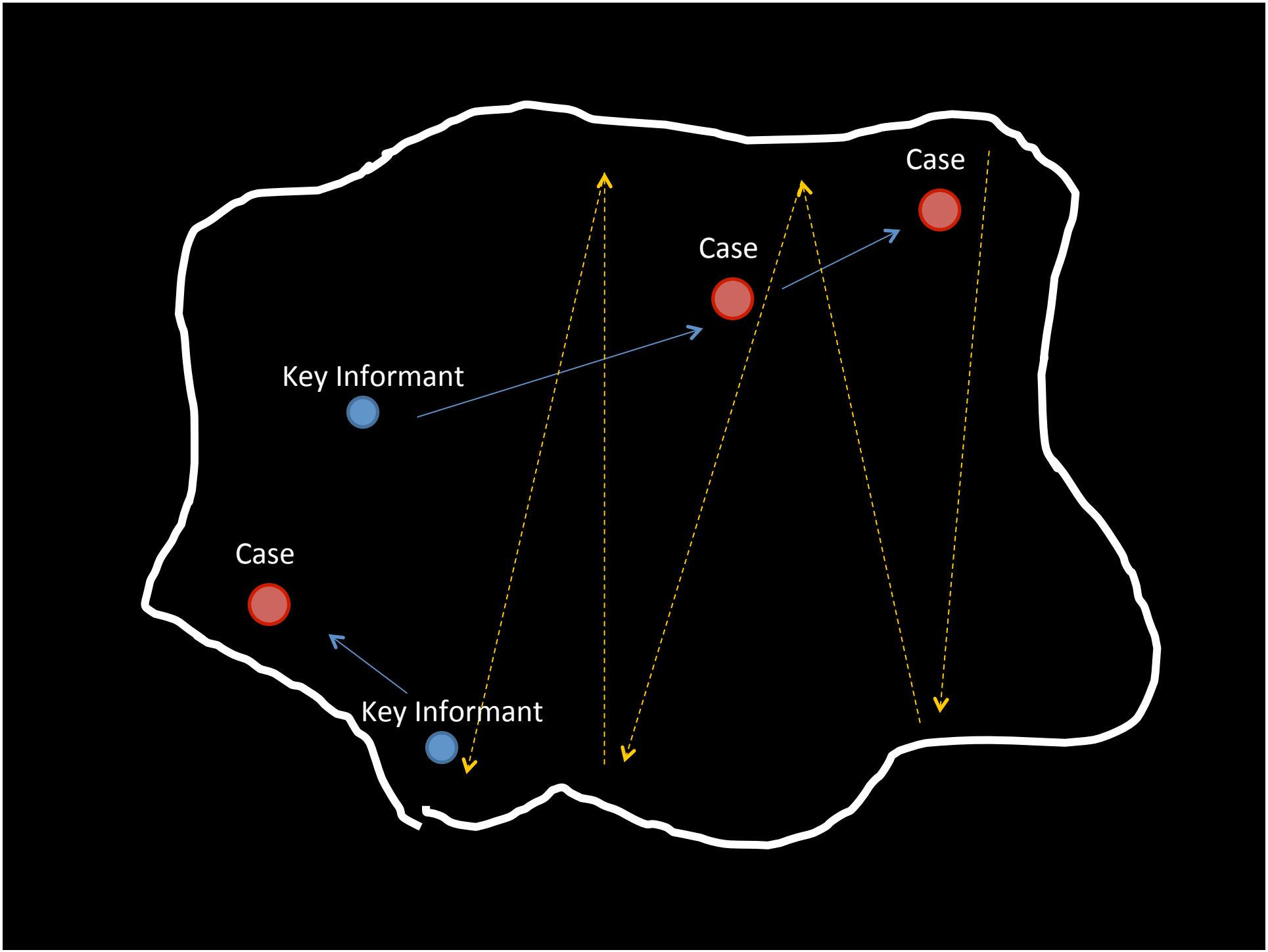
Some key informants can be determined during Stage 1

Third Step

Share Case Finding Question with Key Informants

Explain what kind of cases are being sought, and ask whether he/she is able to identify such cases.


Case
Case
Case
Key Informant
Case
Case
Case
Case
Case

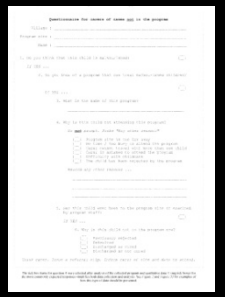

Case
Case
Key Informant
Case
Key Informant

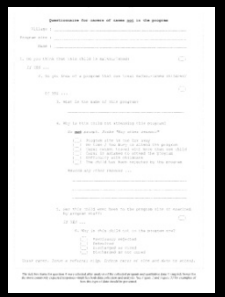
Fourth Step

Record Data

Recovering Child IN the programme	Malnourished Child IN the programme	Malnourished Child NOT IN the programme
////	////	//

Apply Questionnaire





Results can be classified using simplified LQAS (Lot Quality Assurance Sampling)

If we use a standard of 50% (SPHERE standard for rural programmes) then the following formula can be used:

$$d = \left\lfloor \frac{n}{2} \right\rfloor$$

If we use a standard other than 50%
then the following formula should be used:

$$d = \left\lfloor n \times \frac{p}{100} \right\rfloor$$

An example…

If we use a standard of 50%

And we find 7 children that meet our case definition (e.g. SAM)

And of those 2 are enrolled in the programme

$$d = \left\lfloor \frac{n}{2} \right\rfloor = \left\lfloor \frac{7}{2} \right\rfloor = \left\lfloor 3.5 \right\rfloor = 3$$

If we use a standard of 50%

And we find 7 children that meet our case definition (e.g. SAM)

And of those 2 are enrolled in the programme

Because 2 is not higher than our threshold value (d = 3), coverage is classified as being <50%

If your hypothesis of e.g. low coverage is proven, then you have confirmation that the barriers identified are having an impact (and must be addressed)

If your hypothesis is not proven, then you must try to understand whether it was due to a sampling error, or whether your hypothesis was wrong and what you got wrong

Either way, you must then decide whether to move forward or to re-formulate the hypothesis and repeat the test

What do we need practically for Stage 2?

SQUEAC Practical Needs

Stage	Pre-Existing Information	Staff Profile	Staff Number	Additional Resources	Estimated Number of Working Days
1	Programme data (e.g. admissions and exits by month, seasonal calendar, full list of community volunteers and villages covered, programme reports, etc) Up to date list of all villages/ settlements by catchment area Accurate geographical map of size A1/A0 with scale close to 1:50,000	Local language speakers • Lead (e.g. Programme Coordinator, Programme Manager, M&E/Surveillance Officer) • Programme staff (e.g. OTP support staff, Community Mobilisation Officers, etc.) • Partners (e.g. Nutrition Focal Point from district MoH)	2-4	Vehicle (ad hoc to collect information) Drivers with local knowledge	7-10
2	None	• Core team • (Additional Enumerators)	4-8	Vehicle (full time)	2-3

Question & Answer

(5 minutes)