



GLOBAL TASK FORCE ON
CHOLERA CONTROL

COLLECTING WASH DATA IN OCV COVERAGE SURVEYS

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Background: Coverage surveys

- **Coverage surveys permit evaluation of vaccination services and provide more accurate estimate of vaccination coverage**
 - Administrative coverage can be unreliable
 - Helps to identify ways to improve future campaigns and coverage
- **Typically conducted 4-6 weeks after second round of an OCV campaign**
 - Sometimes conducted after first round, particularly in settings where a delayed 2nd dose is expected (e.g. Yemen, Zimbabwe)
- **Funding for coverage surveys usually included in campaign budget for monitoring and evaluation: GAVI funds of operational cost**

Background: Coverage surveys

- **Use 2018 cluster survey methodology**
- **Usually includes a household questionnaire and an individual questionnaire**
 - One household questionnaire/selected household
 - Multiple individual questionnaires/selected household
- **Coverage estimates calculated by age group**
 - 1-4 years, 5-14 years, ≥ 15 years
 - Requires large sample size because of 1-4 year age group
 - Typically at least ~ 1000 households enrolled, often more



Why include WASH questions? (1)

- Estimate access to safe water, sanitation and hygiene among households in targeted areas including testing of household water for chlorine residuals
- Evaluate knowledge, attitudes and practices regarding water, sanitation and hygiene
- Better understand WASH conditions and source water quality among households in targeted areas
- Evaluate WASH messaging during campaign
- Estimate coverage of WASH interventions if integrated with campaign e.g. distribution of water treatment products

Why include WASH questions? (2)

- Can help inform future WASH messaging in OCV campaigns and can help target WASH interventions
- Cost for coverage survey included in campaign M&E budget so no additional costs
- Does not add much extra time to the survey
 - WASH questions only asked at household-level
- Coverage surveys typically provide an aggregate coverage estimate for the targeted area
 - WASH indicators can be descriptively analyzed by lower levels
- Can be adapted to suit individual countries/settings

Example of questions

- **Water practices**
 - What is the main source of drinking water in your household?
 - Does your household routinely practice any type of treatment of your drinking water?
- **Sanitation practices**
 - Where do you and members of your household most commonly go to defecate?
- **Hygiene practices**
 - Is soap available at the handwashing station at time of the visit?
- **Messaging**
 - Did your household receive any health/hygiene messages for cholera prevention as part of the OCV campaign?

Country examples: Somalia

- 16,000 hygiene kits and 3.2 million aquatabs were distributed to 650,000 households during the campaign
- 1895 households enrolled
- Collected detailed information on messages received during the campaign regarding measures for improved sanitation at household level
- Results:
 - Drink or use water treated with chlorine products 5.4% [4.4; 6.7]
 - Handwashing with soap and water 78.8 % [76.6 - 80.9]
 - Cook food thoroughly 12.4 [10.8 - 14.2]
 - Boil water 29.9 [27.6 - 32.4]

Country examples: DRC (Grand Kasai)

- **1465 households enrolled**
- **Collected information on**
 - Drinking water sources
 - Methods of water treatment
 - Types of sanitation facilities
 - WASH messages received during the campaign
- **Results**
 - 27 % reported using an unprotected water (river, lake, unprotected well)
 - 9% reported treated their household drinking water
 - 50% of households reported sharing latrines with other households

Country examples: Zimbabwe

- **Collected information on**
 - Drinking water sources
 - Methods of water treatment
 - Types of sanitation facilities and # of households with which facilities are shared
 - WASH messages received during the campaign
- **Conducted in Harare where municipal piped water is available in some areas**
 - # of days/week with running water
 - # of hours/day with running water
- **If available, tested piped water and stored drinking water for free residual chlorine (FRC)**



Country examples: Zimbabwe

- For the purposes of the coverage survey, WASH results were presented as aggregate data
- Worked with WASH team to analyze data by suburb and combined the results with community WASH assessment
 - Focus group discussions to assess perceptions of water quality and safety
 - Mapping of water sources and microbiological water quality testing for *E.coli*
- **1443 households enrolled**



Country examples: Zimbabwe

- **84% reported being connected to municipal piped water**
 - 60% reported receiving municipal water 5-6 days/week
 - 13% reported receiving municipal water 7 days/week
 - 6% never received municipal water
 - 70% reported water availability all day
- **56% of households report boreholes as their primary source of drinking water, followed by 23% shallow wells and 20% piped water**
 - Water from boreholes and shallow wells was perceived as safe
 - Less people reported confidence in the safety of piped water
- **Of households that had water stored at the time of the visit and reported treating it, 19% had detectable FRC**

Country examples: Bangladesh

- Upcoming OCV coverage survey planned after second round in Cox Bazaar
- Include questions on water sources, water treatment
- If available, test household water for presence of FRCs
- Collect paired household and source drinking water samples from 4-6 households in each cluster to test for presence of E.coli
- Collaboration between WASH and vaccination teams to conduct survey

Limitations

- **Often conducted 4-6 weeks after second round**
 - Doesn't always provide information on WASH indicators early on/at the peak of the outbreak
- **Requires that data collectors are trained on WASH and know how to appropriately respond to questions from households**
 - Information on WASH can easily be incorporated into survey training
- **Doesn't allow for pre/post comparison so can't assess a change in knowledge, attitudes or practices**
- **Sample size calculated based on vaccination coverage estimates**

Next steps

- **Develop a set of standardized questions to incorporate into coverage surveys (completed)**
- **Systematically conduct OCV coverage surveys**
 - Increase the number of surveys being conducted
- **Consider ways to link data on vaccination status to WASH indicators**
 - Exploring data from Zimbabwe TCV survey
 - Are households with poor access to improved water sources more likely to have a vaccinated child

Thank you

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