Annex: Uttar Pradesh August 2017 NDD PMCV Report

Table PM 1: Training and source of information about NDD among teachers/headmasters and anganwadi workers, August 2017

Indicators	S	chool		An	ganwadi	
	Denominator	Numerato	%	Denominator	Numerator	%
		r				
Attended training for current round of NDD	300	138	46	288	220	76
Ever attended training for NDD¹	300	152	51	288	241	84
Never attended training for NDD	300	148	49	288	47	16
Reasons for not attending NDD training (Multiple Resp	onse)				
Location was too far away	162	8	5	68	7	10
Did not know the date/timings/venue	162	141	87	68	44	65
Busy in other official/personal work	162	14	9	68	10	15
Attended deworming training in the past	162	14	9	68	21	31
Not necessary	162	7	4	68	4	6
No incentives/no financial support	162	2	2	68	О	О
Trained teacher that provided training to	other teacher	s in their s	chools	}		
All other teachers	138	80	58	NA	NA	NA
Few teachers	138	30	22	NA	NA	NA
No (himself/herself only teacher)	138	9	7	NA	NA	NA
No, did not train other teachers	138	19	14	NA	NA	NA
Source of information about current NDD	round (Mult	iple Respon	ıse)			
Television	300	59	20	288	46	16
Radio	300	30	10	288	22	8
Newspaper	300	52	17	288	45	16
Banner	300	46	15	288	49	17
SMS	300	71	24	288	62	22
Other school/teacher/ <i>anganwadi</i> worker	300	47	16	288	73	25
WhatsApp message	300	43	15	288	8	3
Training	300	81	27	288	149	52
Received SMS for current NDD round	300	99	33	288	109	38

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

Indicators	School			An	Anganwadi			
	Denominato	Numerator	%	Denominato	Numerator	%		
	r			r				
Awareness about the ways a child	300	221	74	288	252	88		
can get worm infection	300	221 /-	74	74 200	232	00		
Different ways a child can get worm infection (Multiple Response)								
Not using sanitary latrine	221	122	55	252	118	47		
Having unclean surroundings	221	157	71	252	181	72		
Consume vegetables and fruits	221	121	50	252	122	40		
without washing		131	59	252	123	49		

 $^{^{\}scriptscriptstyle 1}$ Includes those school teachers and anganwadi workers who attended training either for NDD August 2017 or attended tanning in past.

Having long and dirty nails 221 128 58 252 124 128 129	TT ' 16 1 11'1'		I	1		<u> </u>	
Having long and dirty nails	Having uncovered food and drinking	221	150	68	252	148	59
Moving in bare feet			0	-0			-
Having food without washing hands				- 1			49
Not washing hands after using tollets							52
Total Tota			111	50	252	120	51
Awareness about all the possible ways a child can get a worm 221 26 12 252 15 15 16 16 16 16 17 15 17 15 16 17 15 15 16 17 15 15 15 16 16 16 15 15		221	89	40	252	107	43
ways a child can get a worm 10							
infection² Perceives that health education should be provided to children 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) 2-3 years of children (Crush one full tablet between two spoons, and administer with water) 3-5 years of children (one full tablet and child chewed the NA		221	26	12	252	15	6
Perceives that health education should be provided to children Awareness about correct dose and right way of administration of albendazole tablet 1-2 years of children (Crush the half tablet between two spoons NA NA NA NA 288 242 8 and administer with water) 2-3 years of children (Crush one full tablet between two spoons, NA NA NA NA 288 137 4 and administer with water) 3-5 years of children (one full tablet and child chewed the NA NA NA NA 288 255 8 tablet properly) 6-19 years of children (one full tablet and child chewed the 300 280 93 288 278 tablet properly) Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Will not administer albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about tonsuming albendazole in school/angan wadi Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 48		221	20	12	252	15	0
Should be provided to children 300 292 97 288 282 59							
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 288 242 8 2-3 years of children (Crush one full tablet between two spoons, and administer with water) NA NA NA NA NA 288 137 4 3-5 years of children (one full tablet and child chewed the tablet and child chewed the tablet properly) NA NA NA NA 288 255 8 4 ablet properly) 6-19 years of children (one full tablet and child chewed the tablet properly) 300 280 93 288 278 9 Awareness about non-administration of albendazole tablet to sick child 300 280 93 288 21 9 Will administer albendazole tablet to sick child 300 280 93 288 21 9 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet 300 280 93 288 284 <td< td=""><td></td><td>300</td><td>292</td><td>97</td><td>288</td><td>282</td><td>98</td></td<>		300	292	97	288	282	98
1-2 years of children (Crush the half tablet between two spoons and administer with water)		d right war o	l f administr	ntion	of albordagolo	tablet	
half tablet between two spoons and administer with water) NA NA NA 288 242 88 2-3 years of children (Crush one full tablet between two spoons, and administer with water) NA		lu ligiit way c	i adiiiiiisti	ation (or arbeiluazore	labiei	1
and administer with water) 2-3 years of children (Crush one full tablet between two spoons, and administer with water) 3-5 years of children (one full tablet and child chewed the NA	•	NT A	NT A	2.7.4	- 00		0.
2-3 years of children (Crush one full tablet between two spoons, and administer with water)		NA	NA	NA	288	242	84
full tablet between two spoons, and administer with water) NA NA NA NA 288 137 4 3-5 years of children (one full tablet and child chewed the tablet properly) NA NA NA NA NA NA 288 255 8 6-19 years of children (one full tablet and child chewed the tablet properly) 300 280 93 288 278 9 Awareness about non-administration of albendazole tablet to sick child 300 20 7 288 21 Will administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet 300 280 93 288 284 9 Swallow the tablet directly 300 280 93 288 284 9 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128	· · · · · · · · · · · · · · · · · · ·						
and administer with water) 3-5 years of children (one full tablet and child chewed the tablet properly) 6-19 years of children (one full tablet and child chewed the tablet and child chewed the tablet properly) Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 367 9 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	- •						
3-5 years of children (one full tablet and child chewed the tablet properly) 6-19 years of children (one full tablet and child chewed the 300 280 93 288 278 9 Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child Will not administer albendazole will not administer albendazole tablet to sick child Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 281 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 94 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole tablet Chew the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4		NA	NA	NA	288	137	48
tablet and child chewed the tablet properly) 6-19 years of children (one full tablet and child chewed the tablet and child chewed the tablet properly) Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Awareness about consuming albendazole tablet Chew the tablet Swallow the tablet 300 280 93 288 284 94 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	and administer with water)						
tablet properly) 6-19 years of children (one full tablet and child chewed the tablet and child chewed the tablet properly) Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Awareness about consuming albendazole tablet Chew the tablet Swallow the tablet directly Awareness about consuming albendazole in school/anganwadi Awareness about the last date (August 22,29 & Sep 4 2017) for 300 93 280 93 288 278 93 288 21 288 21 288 294 288 284 94 288 283 94 288 283 94 288 283 94 288 283	3-5 years of children (one full						
6-19 years of children (one full tablet and child chewed the tablet and child chewed the tablet properly) Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Will not administer albendazole tablet to sick child Awareness about consuming albendazole tablet Chew the tablet Swallow the tablet directly 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole tablet 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	tablet and child chewed the	NA	NA	NA	288	255	89
tablet and child chewed the tablet properly) 300 280 93 288 278 93 Awareness about non-administration of albendazole tablet to sick child 300 20 7 288 21 Will administer albendazole tablet to sick child 300 20 7 288 21 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet 300 280 93 288 284 9 Swallow the tablet directly 300 280 93 288 284 9 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	tablet properly)						
tablet and child chewed the tablet properly) 300 280 93 288 278 93 Awareness about non-administration of albendazole tablet to sick child 300 20 7 288 21 Will administer albendazole tablet to sick child 300 20 7 288 21 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet 300 280 93 288 284 9 Swallow the tablet directly 300 280 93 288 284 9 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	6-19 years of children (one full						
tablet properly) Awareness about non-administration of albendazole tablet to sick child Will administer albendazole tablet to sick child 300 20 7 288 21 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	· ·	300	280	93	288	278	97
Awareness about non-administration of albendazole tablet to sick child 300 20 7 288 21 Will administer albendazole to sick child 300 20 7 288 21 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4		5		/5		_,-	''
Will administer albendazole to sick child 300 20 7 288 21 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4		on of albendazo	ole tablet to s	sick chi	ld		
to sick child 300 20 7 288 21 Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4				JION CIII			I
Will not administer albendazole tablet to sick child 300 280 93 288 367 9 Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4		300	20	7	288	21	7
Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 95			0			,	
Awareness about consuming albendazole tablet Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	tablet to sick child	300	280	93	288	367	93
Chew the tablet 300 280 93 288 284 9 Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4		azole tablet					•
Swallow the tablet directly 300 20 7 288 4 Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4			280	93	288	284	99
Awareness about consuming albendazole in school/anganwadi 300 282 94 288 283 94 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	Swallow the tablet directly		20		288		1
albendazole in school/anganwadi 300 282 94 288 283 9 Awareness about the last date (August 22,29 & Sep 4 2017) for 300 95 32 288 128 4	Awareness about consuming		202	6.4	200		6.0
Awareness about the last date 300 32 288 128 4		300	282	94	288	283	98
1 1 1,11 1,1 1,1 1,1 1,1 1,1 1,1 1,1 1,		300	95	32	288	128	44
	submitting the reporting form						
Awareness about submission date of reporting forms to ANM 300 143 48 288 198 6		300	1/12	18	288	108	69
of reporting forms to ANM		300	143	40	200	190	09
Awareness to retain a copy of 198 66 288 245 8		300	108	66	288	245	85
the reporting form	the reporting form	300	190			443	

-

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.

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

Indicators		School		Ai	nganwadi	
	Denominat	Numerator	%	Denominat	Numerator	%
	or			or		
Albendazole tablet administered on the	day of visit					
Yes, ongoing	300	148	49	288	208	72
Yes, already done	300	21	7	288	31	11
Yes, after sometime	300	10	3	288	11	4
No, will not administer today	300	121	40	288	38	13
Schools/ <i>anganwadis</i> conducted	300	189	63	288	258	90
deworming on either of the day ³	300	109	03	200	250	90
Schools/ <i>anganwadis</i> conducted	155	100	65	147	131	89
deworming on NDD ⁴	133	100	03	147	131	09
Schools/ <i>anganwadis</i> conducted	145	79	54	141	119	84
deworming on Mop-Up Day ⁵		79	54	141	119	04
Reasons for not conducting deworming	3					
No information	111	90	81	30	13	44
Albendazole tablet not received	111	10	9	30	9	30
Apprehension of adverse events	111	2	2	30	1	3
Others ⁶	111	9	8	30	7	23
Attendance on NDD ⁷	12707	7749	61	NA	NA	NA
Attendance on Mop-Up Day ⁸	14522	10198	71	NA	NA	NA
Anganwadis having list of	NA	NA	NA	288	0.2	22
unregistered/out-of-school children	NA	NA	NA	288	93	32
Out-of-school children (Age 6-19)	NA	NA	NA	288	102	67
administered albendazole tablet	INA	INA	INA	200	193	07
Unregistered children (Age 1-5)	NA	NA	NA	288	188	85
administered albendazole tablet	1 1/1 7	1 1/1 7	1 1/2 1	200	100	03
Sufficient quantity of albendazole	201	181	90	269	236	88
tablets ⁹	201	101	90	209	250	00

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

Indicators	Schools			An	nganwadi			
	Denominator	Numerator	%	Denominator	Numerator	%		
Items received by school teacher and anganwadi worker								
Albendazole tablet	300	201	67	288	269	93		
Poster/banner	300	151	50	288	213	74		

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.

Based on those schools conducted deworming on NDD

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

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

Handouts/ reporting form	300	141	47	288	197	68
Received all materials	300	125	42	288	176	61
Items verified during Indep	endent Monit	oring	•			•
Albendazole tablet	201	192	96	269	265	99
Poster/banner	151	136	90	213	200	94
Handouts/ reporting	141	125	89	197	182	92
form						
Received all materials	125	104	84	176	158	90
No of school teachers/anga	anwadi worker	attended trai	ining and	l received items	during train:	ing
Albendazole tablet	201	112	56	269	186	69
Poster/banner	151	92	61	213	158	74
Handouts/ reporting form	141	91	65	197	150	76
Received all materials	125	78	62	176	129	73
Integrated Distribution of albendazole tablet, IEC and training materials ¹⁰	300	78	26	288	129	45

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

Indicators	Sc	Schools			ganwadi	
	Denominato	Numerato	%	Denominato	Numerato	%
	r	r		r	r	
Deworming activity was taking pl ace	148	134	91	208	181	87
Albendazole tablets were adminis	tered by					
Teacher/headmaster	148	147	99	208	О	О
<i>Anganwadi</i> worker	148	О	О	208	207	99
ASHA/Sahiya	148	О	О	208	1	1
ANM	148	О	О	208	О	О
Student	148	1	1	NA	NA	NA
Followed any recording protocol	169	127	75	239	187	78
Protocol followed						
Putting single/double tick	127	93	73	187	130	70
Put different symbols	127	14	11	187	11	6
Prepare the separate list for dewormed	127	20	16	187	46	25
Visibility of poster/banner during visits	151	104	69	213	173	81

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

4

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

¹¹Any 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.

Indicators	Sc	hools		Ang	anwadi	
	Denominato	Numerato	%	Denominator	Numerato	%
	r	r			r	
Opinion of occurrence of an						
adverse event after	300	69	23	288	54	19
administering albendazole	300	09	25	200	34	19
tablet						
Awareness about possible adverse events (Multiple Response)						
Mild abdominal pain	69	54	79	54	45	83
Nausea	69	52	77	54	39	72
Vomiting	69	55	80	54	45	83
Diarrhea	69	24	36	54	11	20
Fatigue	69	17	25	54	13	24
All possible adverse event ¹²	69	11	16	54	3	6
Awareness about mild adverse e	vent manageme	ent				
Make the child lie down in open			64	288	211	
and shade/shaded place	300	192	04	200	211	73
Give ORS/water	300	82	27	288	106	37
Observe the child at least for 2	300	25	12	288	42	15
hours in the school		35	12	200	43	15
Don't know/don't remember	300	88	29	288	45	16
Awareness about severe adverse	event manager	nent				
Call PHC or emergency number	300	192	64	288	202	70
Take the child to the hospital	200	112	38	288	146	
/call doctor to school	300	113	30	200	146	51
Don't know/don't remember	300	58	19	288	14	5
Available contact numbers of	300	177	50	288	246	85
the nearest ANM or MO-PHC	300	177	59	200	440	05
Asha present in Anganwadi	NA	NA	NA	288	145	50
center	1 1/1	1 1/2 1	1 1/1	200	± 7 7	50

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

Indicators ¹³	Denominator	Numerator	%					
Attended training for current round of NDD	93	19	20					
Received albendazole tablets	93	30	32					
Sufficient quantity of albendazole tablets	30	27	89					
Received poster/banner	93	22	24					
Received handouts/reporting form	93	22	24					
Received SMS for current NDD round	93	16	17					
Albendazole administered to children	93	27	29					
Reasons for not conducting deworming								
No information	66	56	84					
Albendazole tablets not received	66	4	6					
Already dewormed all children on deworming day ¹⁴	66	2	4					

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.

5

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

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

Others ¹⁵	66	4	6
Albendazole tablet administered to children by		22	100
teacher/headmaster ¹⁶	23	23	100
Perceive that health education should be provided to chi	93	88	95
ldren	93		93
Awareness about correct dose and right way of	93	85	91
albendazole administration	93	03	91
Awareness about non-administration of albendazole	93	88	94
tablet to sick child	93		94
Opinion of occurrence of an adverse event after taking	93	13	14
albendazole tablet	93	13	14
Awareness about occurrence of possible adverse events			
Mild abdominal pain	13	9	67
Nausea	13	7	50
Vomiting	13	11	82
Diarrhea	13	3	24
Fatigue	13	4	29
Awareness about mild adverse event management			
Let the child rest in an open and shaded place	93	43	47
Provide clean water to drink/ORS	93	27	29
Contact the ANM/nearby PHC	93	2	2
Available contact numbers of the nearest ANM or MO-	0.2	40	42
PHC	93	40	43
Followed correct ¹⁷ recording protocol	19	11	56

Table CV1: Findings from School and Anganwadi Coverage Validation Data

	Indicators	Sch	Schools			nwadis	
S.No		Denominator	Numerator	%	Denominator	Numerator	%
1	Percentage of schools/ anganwadis Conducted deworming ¹⁸	754	489	65	746	706	95
	Percentage of government Schools conducted deworming	488	412	85	NA		
	Percentage of private schools conducted deworming	266	77	29	NA		
1a	Percentage of School and <i>anganwadis</i> administered albendazole on day of - (Multiple Response)						
	a. National Deworming Day	489	457	93	706	681	96
	b. Mop-Up Day	489	392	80	706	560	79
	c. Between NDD and Mop- Up Day	489	48	10	706	66	9

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

6

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

 $^{^{17}}$ Correct recording protocol implies putting single tick (\checkmark) on NDD and double tick ($\checkmark\checkmark$) for all those children administered albendazole tablets.

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

	D. Both days (NDD and Mop-Up)	489	370	76	706	539	76		
1b	Reasons for not conducting	deworming	eworming						
	a. No information	265	216	82	40	21	54		
	b. Drugs not received	265	31	12	40	15	37		
	c. Apprehension of adverse events	265	12	4	40	1	2		
	d. Others ¹⁹	265	6	2	40	3	7		
2	Percentage of schools and anganwadis left over with Albendazole tablet after deworming	489	272	56	706	377	53		
2a	Number of albendazole tablets left after deworming								
	a. Less than 50 tablets	272	197	73	377	295	78		
	b. 50-100 tablets	272	42	15	377	66	17		
	c. More than 100 tablets	272	33	12	377	16	5		
3	Copy of reporting form was available for verification	489	489 229 47		706	365	52		
3a	Reasons for non-availability	of copy of repo	orting form	ı					
	a. Did not received	260	140	54	342	130	38		
	b. Submitted to ANM	260	54	21	342	102	30		
	c. Unable to locate	260	44	17	342	77	22		
	d. Other ²⁰	260	22	8	342	33	10		
4	Anganwadis having list of unregistered children (Aged 1-5 years)	NA			706	132	19		
5	Anganwadis having list of out-of-school children (Aged 6-19 years)	NA			706	175	25		

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

	Indicators	Schools		Anganwadis		
S.No		Denominator Numerator	%	Denominator	Numerator	%
1.	ASHA present at <i>Anganwadi</i>					
	Centre during visit of	NA		706	209	30
	Independent monitoring ²¹					
2.	ASHA conducted meetings					
	with parents to inform about	NA		209	173	83
	NDD					
3.	ASHA prepared list of					
	unregistered and Out of	NA		209	106	51
	school children					

Other includes mainly not aware about NDD program, inadequate staff in school and parents denied.
 Other includes received but did not fill, no clarity over reporting form.
 Monitors were advised to call ASHA at *anganwadi* centers during coverage validation and collect relevant information.

4.	ASHA shared the list of unregistered and Out of school children with <i>Anganwadi</i>	NA	106	96	90
5.	ASHA administered albendazole to children	NA	209	164	78
6.	ASHA received incentive for NDD Feb 2017 round	NA	209	42	20

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

S.		Schools/Children			Anganwadis/Children			
No	Indicators	Denominato r	Numerator	%	Denominator Numerator		%	
1	Followed correct ²² recording protocol	489	160	33	706	313	44	
2	Followed partial ²³ recording protocol	489	60	12	706	191	27	
3	Followed no ²⁴ recording protocol	489	270	55	706	202	29	
4	State-level verification factor ²⁵ (Children enrolled)	27678	19412	70	35165	38607	109	
	a. Children registered with anganwadis	NA NA NA			25686	25246	98	
	b. Children unregistered with anganwadis (Aged 1-5)				3398	6593	194	
	c. Out-of-school children (Aged 6-19)				6081	6768	111	
5	Attendance on previous day of NDD (Children enrolled)	129136	89487	69	NA			
6	Attendance on NDD (Children enrolled)	129136	91897	71	NA			
7	Attendance on Mop-Up Day (Children enrolled)	129136	92291	71	NA			
8	Children who attended on both NDD and Mop-Up Day (Children enrolled)	129136	75682	59	NA			
9	Maximum attendance of children on Deworming Day and Mop-Up Day ²⁶ (Children enrolled)	129136	108506	84	NA			
10	Estimated NDD coverage ²⁷²⁸	49 84						

.

²²Correct recording protocol includes schools where all the classes put single tick (\checkmark) on NDD and double tick (\checkmark \checkmark) on Mop-Up Day to record the information of dewormed children.

²³Partial 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.

²⁴No protocol includes all those schools where none of the classes followed any protocol to record the information of dewormed children.

²⁵Ratio of recounted value of the dewormed children to the reported value. This calculation is based on only those schools (n=267) and *anganwadis* (n=276) where deworming was conducted and copy of reporting form was available for verification.

²⁶ 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.

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

²⁸ 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*.

Table CV4: Description on children (6-19 years) interviewed in the schools (489) during coverage validation

S.No	Indicators	Denominator	Numerator	%		
1	Children received Albendazole tablets	1468	1436	98		
2	Children aware about the Albendazole tablets	1436	1107	77		
3	Source of information about deworming (Multiple response)					
	a. Teacher/school	1107	1064	96		
	b. Television	1107	94	8		
	c. Radio	1107	60	5		
	d. Newspaper	1107	63	6		
	e. Poster/Banner	1107	173	16		
	f. Parents/siblings	1107	111	10		
	g. Friends/neighbors	1107	49	4		
4	Children aware about the worm infection	1436	849	59		
5	Awareness about different ways a child can get worm infect	ion (Multiple res	sponse)			
	a. Not using sanitary latrine	849	381	45		
	b. Having unclean surroundings	849	481	57		
	c. Consume vegetables and fruits without washing	849	240	28		
	d. Having uncovered food and drinking dirty water	849	272	32		
	e. Having long and dirty nails	849	396	47		
	f. Moving in bare feet	849	286	34		
	g. Having food without washing hands	849	341	40		
	h. Not washing hands after using toilets	849	237	28		
6	Children consumed Albendazole tablet	1436	1424	99		
7	Way children consumed the tablet					
	a. Chew the tablet	1424	1305	92		
	b. Swallow tablet directly	1424	119	8		
8	Supervised administration of tablets	1424	1312	92		
9	Reasons for not consuming Albendazole tablet					
	a. Feeling sick	11	3	23		
	b. Afraid of taking the tablet	11	2	20		
	c. Parents told me not to have it	11	4	35		
	d. Do not have worms so don't need it	11	1	8		
	e. Did not like the taste	11	1	14		