

BLOCK LEVEL PROVIDERS' SCHEDULE

I. Role and Conceptualisation of Program

1. I would like to know, for **how long** have you been working in this place (Block/PHC)?
2. Reproductive & Child Health program is being implemented in your Block/PHC? Could you please let us know the **components** of this program?
3. What are the major **nutritional problems** in your area?
4. National programs for control of nutritional blindness and anemia are being implemented. **What is being done** under these programs?

All questions are related to routine Vitamin-A / IFA
Supplementation Programs only

5. Who are the **clients for Vitamin-A** supplementation program?
6. What are the **benefits of Vitamin-A** supplementation?
7. Who are the **clients for IFA** supplementation program?
8. What are the **benefits of IFA** supplementation?
9. How were you **informed** about the **current guidelines** on Vitamin-A & IFA components under RCH program?
10. In general, what are **your roles** in Vitamin-A / IFA supplementation programs?

*All questions are related to routine Vitamin-A / IFA
Supplementation Programs only*

II. Program Planning

11. Is there any **plan of action** for RCH program?

0. Do not know/not sure 1. Yes 2. No.

a) If No, why?

(If No, go to Q13)

b) If Yes, whether Vitamin-A / IFA supplementation components are also included under this program?

0. Do not know/not sure 1. Yes 2. No.

12. What are the **steps** involved in **preparing the plan** & who all are involved?

	Steps involved	Who are involved
a) Vitamin-A		
b) IFA		

*All questions are related to routine Vitamin-A / IFA
Supplementation Programs only*

13. Since the inception of RCH program, was there any **training program** organised in your Block / PHC?

0. Do not know / not sure 1. Yes 2. No.

(If No, go to Q.17)

14. Did the training program include Vitamin-A and IFA **component**?

(a) For PHC / Block level staff:

0. Do not know / not sure 1. Yes 2. No.

(b) For field staff (HW/AWW):

0. Do not know / not sure 1. Yes 2. No.

15. **When** was the last such training organized? For whom and who conducted?

Functionaries	When?	For whom?	Who conducted?
a) MOs/CDPOs			
b) Health supervisors/ Block extension educators / ICDS supervisors			
c) Health workers/ AWWs			

**All questions are related to routine Vitamin-A / IFA
Supplementation Programs only**

16. What were the **contents** regarding Vitamin-A/IFA during the training program / refresher course?
(Probe: Any resource material developed / distributed?)

17. How are field (health / ICDS) staff **informed** about the **changes** in program **guidelines** from time to time?

III Program Logistics

Let us talk about the Process of procurement of Vitamin-A/IFA supplements at Block / PHC level

18. How is the **requirement** of Vitamin-A and IFA **supplements determined** for your area?

a) Urban area

b) Rural area

19. **From where & how** are these drugs procured?

**All questions are related to routine Vitamin-A / IFA
Supplementation Programs only**

20. **How** are Vitamin-A / IFA supplements being **supplied** to the sub-centre?
(probe: kit / separately)

21. In the last one year, was the supply of Vitamin-A / IFA **regular**?

0. Do not know / not sure 1. Yes 2. No

If No, what were the **reasons**? Could you do anything about it?

Supplies	Reason for irregular supply	Action taken
a) IFA for Women		
b) IFA for Children (Small tablets)		
c) Vitamin-A syrup		

All questions are related to routine Vitamin-A / IFA
Supplementation Programs only

22. During last one year, did the **supply exceed or fall short of** your demand?

0. Do not know /not sure

1. Yes

2. No

a) If yes, what were the **reasons**? What did you do about it?

Supply	Reasons	Actions taken
Surplus		
Shortage		

23. In the last one year, did you receive Vitamin-A / IFA **supplements with short expiry date** (<6 months)?

a) **Vitamin-A**

0. Do not know/not sure

1. Yes

2. No.

b) **IFA**

0. Do not know / not sure

1. Yes

2. No.

*All questions are related to routine Vitamin-A / IFA
Supplementation Programs only*

Let us talk about the Process of Distribution of Vitamin-A/IFA supplements to Health workers

24. Are Vitamin-A / IFA **delivered** to sub-centre (PHC/Block) on **demand**?

	Vitamin-A	IFA
a) Urban	0. Don't know 1. Almost always 2. Sometimes 3. Never	0. Don't know 1. Almost always 2. Sometimes 3. Never
b) Rural	0. Don't know 1. Almost always 2. Sometimes 3. Never	0. Don't know 1. Almost always 2. Sometimes 3. Never

25. Are Vitamin-A / IFA **delivered** (or handed over) to sub-centre as and **when supplies are available**?

	Vitamin-A	IFA
a) Urban	0. Don't know 1. Almost always 2. Sometimes 3. Never	0. Don't know 1. Almost always 2. Sometimes 3. Never
b) Rural	0. Don't know 1. Almost always 2. Sometimes 3. Never	0. Don't know 1. Almost always 2. Sometimes 3. Never

All questions are related to routine Vitamin-A / IFA Supplementation Programs only

26. If the **supply is less** / short, then on what basis it is distributed?

a) Vitamin-A

b) IFA

27. If the **supply is in excess**, then on what basis it is distributed?

a) Vitamin-A

b) IFA

28. **Who identifies** the **clients** for Vitamin-A and IFA Supplementation and how do they do it?

29. What are the **distribution outlets** for the clients for Vitamin-A / IFA supplements?

	Urban	Rural
a) Vitamin-A		
b) IFA for women		
c) IFA for children		

All questions are related to routine Vitamin-A / IFA Supplementation Programs only

30. What **problems** were being faced in the distribution of drugs during last year? Give details along with **measures taken to overcome** these problems.

Program	Problems	Measures taken to overcome
a) Vitamin-A		
b) IFA		

31. What **extra efforts** are made to **reach clients** in difficult areas? (e.g. slums / villages / hamlets away from main road, marginated / minority communities).

All questions are related to routine Vitamin-A / IFA
Supplementation Programs only

32. What are the **guidelines** for the field (health/ICDS) staff to identify and manage **clients** who require **therapeutic doses** of Vitamin-A/IFA?

Clients requiring	Guidelines for identifying / managing clients
a) Vitamin-A	
b) IFA for women	
c) IFA for children	

33. What are the **guidelines** to your field (health / ICDS) staff for referral of patients with anemia / vitamin A deficiency?

Patients with	Guidelines for referral of patients
a) Vitamin-A deficiency	
b) Anemia in women	
c) Anemia in children	

All questions are related to routine Vitamin-A / IFA
Supplementation Programs only

IV. Inter-sectoral Coordination (ISC)

34. What is the **role of ICDS** functionaries in the **implementation** of Vitamin-A /IFA?

35. In your Block/PHC, **from where** do the **ICDS** functionaries **get** Vitamin-A/IFA supplies?

36. If the supplies are through health department, then how do you **coordinate sharing of supplies** with ICDS functionaries?

**All questions are related to routine Vitamin-A / IFA
Supplementation Programs only**

37. Are there any **difficulties in coordinating** IFA / Vitamin-A related activities of health department with ICDS staff?

0. Do not know / not sure

1. Yes

2. No.

If yes what are they? Could you take any action?

Difficulties	Action taken
a) <u>District level</u>	
b) <u>PHC/Block level</u>	
c) <u>Field level</u>	

**All questions are related to routine Vitamin-A / IFA
Supplementation Programs only**

38. Apart from ICDS which **other non-health departments** are **involved** in this program and what are their roles?

(Probe: NGOs / CBOs / private sector)

Non-health departments/ NGOs/ CBOs/ Private Sector	Role(s)

V Social mobilization

39. In last one year, what social mobilization **activities** were under taken to **promote utilization** of Vitamin-A / IFA in your area?

40. In your opinion, what **communication channels** were effective in motivating the clients for utilization of these services?

All questions are related to routine Vitamin-A / IFA Supplementation Programs only

41. What are the **messages used** for the program?

Program	Messages
a) Vitamin- A	
b) IFA (Mothers	
c) IFA (Children)	

42. Have you heard of any **Socio-cultural beliefs / rumors / customs / rituals** in the communities that influenced utilization of these program services by the community?

Program	Socio-Cultural Beliefs/ Rumors/Customs/Rituals/	How influenced? (+ve / -ve)
a) Vitamin-A		
b) IFA		

*All questions are related to routine Vitamin-A / IFA
Supplementation Programs only*

43. In your opinion, how much **importance** is given to Vitamin-A & IFA supplementation programs by **higher authorities**?

VI Finances

44. Are there **funds available** with you for effective implementation of RCH?
0. Do not know / not sure 1. Yes 2. No.

- a) If yes, for **what major activities** were these **funds used** during last one year?

(Probe: Social mobilization activities related to Vitamin-A / IFA)

VII Monitoring and supervision

45. How do you **monitor the performance** of Vitamin-A / IFA program?
46. Is there a **format** (checklist of tasks) **to monitor** / supervise these programs?
0. Do not know / not sure 1. Yes 2. No.
- a) If yes, **what activities** does it include?
47. During your field visits, what **activities** do you undertake to supervise the program?
48. How did you **use** the **information** obtained through monitoring and supervision during last one year?

*All questions are related to routine Vitamin-A / IFA
Supplementation Programs only*

49. What **shortcomings** have you identified in Vitamin A / IFA supplementation program? What actions were taken to rectify them?

Implementation Probe	Urban	
	Problems	Action taken
a)Supplies procurement		
b)Manpower		
c)Transport / Distance		
d)Finance		
e)Client acceptability		
f)Coordination		
g)Others		

All questions are related to routine Vitamin-A / IFA Supplementation Programs only

Implementation Probe	Rural	
	Problems	Action taken
h) Supplies procurement		
i) Manpower		
j) Transport / Distance		
k) Finance		
l) Client acceptability		
m) Coordination		
n) Others		

**All questions are related to routine Vitamin-A / IFA
Supplementation Programs only**

VIII Program Performance

50. In your area, roughly what **proportion** of eligible mothers and children **remain uncovered** by these two programs? What do you think were the **reasons**?

Clients	% Uncovered	Reasons
a) Children (Vitamin-A)		
b) Mothers (IFA)		
c) Children (IFA)		

51. What **steps** were taken to **improve coverage** in your area during last one year?

All questions are related to routine Vitamin-A / IFA
Supplementation Programs only

IX **Impact**

52. In your opinion, what has been **the effect of Vitamin-A** program **on children** in your area?
53. In your Opinion, what has been the **effect of IFA** program **on pregnant women / children** in your area?
- a) Pregnant Women:
- b) Children :

X **Suggestions**

54. What are the **roles** that can be played by the following for the Vitamin-A / IFA programs.
- a) NGOs / CBOs
- b) Panchayat / local leadership

**All questions are related to routine Vitamin-A / IFA
Supplementation Programs only**

c) Teachers]

d) Other non health departments

e) Private health sector

55. In your opinion, **how can** Vitamin-A and IFA supplementation **programs be improved** such that maximum number of clients gets benefited?

a) Vitamin-A:

b) IFA: