

IEC Activity Monitoring Checklist (direct beneficiary women)

Identification:

District: _____ PHCUs: _____ Kebele: _____

Date of Visit: _____

Age of the mother _____

Pregnancy status ____ (pregnant: _____ not pregnant _____)

Visiting Team Members (Name and signature):

1. _____; signature _____

2. _____; signature _____

Target	Questions	Response
<i>Mothers with reproductive age) including pregnant women</i>	1. Did you hear any messages regarding maternal and child health in the last one month? ((<i>show cue for key message ...image and trainers</i>)	1. Yes 2. No (if no skip to Q 12 about MWAs)
	2. From whom did you hear the messages?	_____
	3. What were the specific topics of the messages?	_____
	4. On what occasion or when you got the message? (Probe: 1-5 meeting, PW or Women conference, etc)	_____
	5. Totally, how many times (session) you got the information during the last month?	_____
	6. Did they (<i>source of the message</i>) tell you key messages by showing figures on the paper?	1. Yes 2. No (if No skip to Q8)
	7. What picture did you see on the picture (Show different key message pictures)	_____
	8. What key messages did you get during the communication specific to ANC?	_____
	9. What key messages did you get regarding to birth preparedness?	_____
	10. What key messages did you get regarding to SBA?	_____
	11. What key messages did you get regarding to PNC?	_____
	12. How you evaluate the level of understanding/knowledge of the messangers on the topic of interest (good fair bad)?	_____
	13. Have you heard about MWA?	1. Yes 2. No
	14. If yes, where did you get?	_____
	15. Do you have weekly meeting with your 1-5 networks?	1. Yes 2. No
	16. If yes, how many times you met in the last month?	_____
	17. During your meeting what was the main topic you discussed on?	_____

*Now we are on the way to complete our interview, do you have anything to say:

IEC Activity Monitoring Checklist

Identification:

District: _____ PHCUs: _____ Kebele/HPs _____

Date of Visit: _____

Age of HDAs _____

Work experience on HDAs activities _____

Visiting Team Members (Name and signature):

1. _____ ; signature _____

2. _____ ; signature _____

HDA	1. Have you been trained on MCH (removing barriers towards safe motherhood)	1. Yes, 2. No
	2. Have you communicated the key messages on ANC, SBA, PNC and MWA to your network women?	1. Yes 2. No (go to Question 14)
	3. If “yes” how many times you communicate in the last one month?	_____
	4. On what occasion you transmit the message mostly in the last month? (Probe. 1-5 meeting; local ceremony, village mourning, etc)	_____
	5. Do you have a key messages paper (see the availability)?	1. Yes (go to Q7) 2. No (go to Q 6)
	6. If “No”, why	_____
	7. If yes, do you use it regularly to communicate women?	1. Yes 2. No
	8. Do you have a weekly meeting program with your 1-5 networks?	1. Yes 2. No
	9. How many times you met in the last one month?	_____
	10. During your meeting what was the main health topic you discuss on?	_____
	11. How often do you have a regular meeting schedule with pregnant women per month as a plan (E.g. Pregnant women conference)?	_____
	12. How many times you met with pregnant women in the past one month?	_____
	13. During your meeting what was/were the main health topic you discussed on among pregnant women/or reproductive age group women?	_____
	14. Have you ever identified pregnant mothers for MWA?	1. Yes 2. No
	15. How many pregnant women you identify for MWA in the last one month?	_____
	16. How many mothers delivered their baby at health facility in you “shaanne” in the last one month?	_____
	17. How many new pregnant women were found in your shane in the last one month?	_____
	18. Totally, for how many women you transmit key messages at least once in the last one month?	_____

Now we are on the way to complete our interview, but before winding up do you have anything or message to specific office or recommendation regarding the implementation and adaptation of the safe motherhood package you well-come:

IEC Activity Monitoring Checklist

Identification:

District: _____ PHCUs: _____ Kebele: _____

Date of Visit: _____

Age of the Religious father _____ years

Serving as a religious father/leader _____ Years

Trained on Safe motherhood activities Yes or No (circle it

Visiting Team Members (Name and signature):

1. _____; signature _____

2. _____; signature _____

Religious Leaders	1. Did you invited by HDA and /or HEW to teach mother/s on different meetings about safe pregnancy, delivery, PNC and MWA in the last one month?	1. Yes (if yes, mention HEW or HDA or other _____) 2. No
	2. If yes how many times?	_____
	3. Did you invited by HDA and /or HEW to participate on family conversation on pregnancy related issue in the last one month?	1. Yes 2. No
	4. If yes how many times?	_____
	5. Did you transmit key messages regarding MCH in churches/Mosque to your followers in the last one month?	1. Yes 2. No
	6. If yes what are the main topics of maternal and child health you addressed?	_____
	7. Roughly how many women were involved while you transmit key messages in the last one month?	_____
	8. Do you have a key messages manual on your hand? (see the availability)	1. Yes 2. No
	9. If No, why?	_____
	10. If yes, do you use it always to communicate women?	1. Yes 2. No

Now we are on the way to complete our interview, but before winding up do you have anything or message to specific office or recommendation regarding the implementation and adaptation of the safe motherhood package you well-come:-

IEC Activity Monitoring Checklist

Identification:

District: _____ PHCUs: _____ Kebele: _____

Date of Visit: _____

Age of the Health Extension Worker _____ years

Serving as a health extension worker _____ Years

Trained on Safe motherhood project Packages (1. Yes; 2. No) _____

Visiting Team Members (Name and signature):

1. _____; signature _____

2. _____; signature _____

HEWs	1. Did you provide health information to mothers during last one month?	1. Yes; 2. No (if no go to Q4) _____)
	2. If yes what are the main topics covered during health information dissemination sessions to mother/s/?	_____
	3. If yes how many mothers were participated in all sessions totally? (can you check report format for HE)	_____
	4. Did you provide supportive supervision and/or refreshment training to HDAs in the last one month?	1. Yes; 2. No (if No go to Q7)
	5. If Yes, which topics of Maternal and child health you give on refreshment training	_____
	6. If yes for how many HDAs?	_____
	7. Did you receive weekly report from HDAs on IEC training in the last one month? (see the report from HDA report folder)	1. Yes 2. No
	8. From your last month HDAs report how many women were trained/got information on ANC, Delivery, PNC and MWA?	_____
	9. From your last month HDAs' report how many pregnant women were identified for MWA by HDAs?	_____
	10. How many mothers were referred for MWA by HEWs in the last one month?	_____
	11. How many mothers deliver their child at health facility in your kebele in the last one month?	_____
	12. How many mothers deliver their child at home in your kebele in the last one month?	_____
	13. How many new pregnant women were identified and registered in your kebele in the last one month?	_____
	14. How many pregnant mothers used ANC service in the last one month?	_____
	15. How many pregnant mothers used PNC service in the last one month?	_____
	16. How many pregnant mothers used MWA in the last one month?	_____

Now we are on the way to complete our interview, but before winding up do you have anything or message to specific office or recommendation regarding the implementation and adaptation of the safe motherhood package you well-come:

What about for PHCU midwife, PHCU heads checking point plus district office heads and Zone level reviewing questions? Can you complete as you started and I will review it and will use even next time