

Prevention of Child Injuries through Social intervention & Education (PRECISE)

Document 9.1: Mid Year Progress Report
Project Year 2
15 March 2006– 31 July 2006



PRECISE Year 2 –Mid Year Report

The Bangladesh Health and Injury Survey , (BHIS) , showed that injury is the biggest killer of Bangladeshi children between 1-17 years of age.

PRECISE is an operations research, community based intervention programme which involves active surveillance and constant monitoring and evaluation of interventions. Reduction of the magnitude of child injuries is the simple goal.

The life of the project is projected to be for 3 years, Sept. 2005 to Dec.2008.

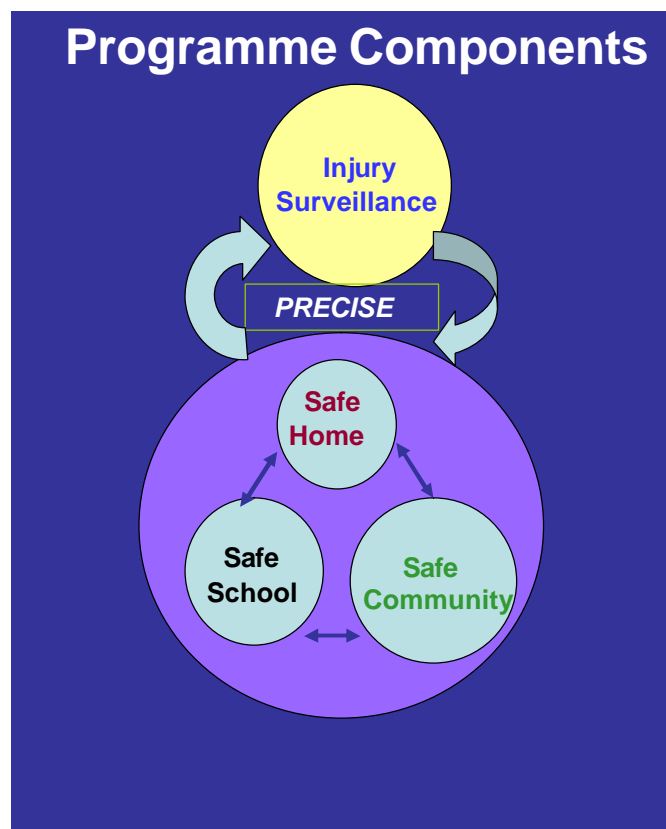
Project Year 2 began in March of 2006. This Mid-Year report summarizes activities and accomplishments from March-July, 2006 and complements the surveillance report for that period. This report, **Document 9.1**, continues the **PRECISE Documents** series initiated in Year 1.

The principal components are :

Safe Homes,
Safe Schools, and
Safe Communities.

The components include: water safety, day care, disaster preparedness to prevent injury, extensive advocacy, and education & communications

The **Injury Surveillance System (ISS)** collects data for comparative & descriptive uses. It is at the heart of project monitoring



PRECISE Objectives for Year 2 :

To develop and implement injury prevention programmes applicable to homes, schools, and communities ;

To evaluate the effectiveness of the interventions for cost & large scale application.



Government Health Worker on home visit
Sherpur Sadar

Activities:

Expand interventions;
Increase advocacy;
Design a communications plan;
Initiate integration (with other UNICEF programmes);
Complete & implement the surveillance programme;
Assure quality control.

The four project areas are described in terms of their intervention levels as “high”, “medium”, and “low” with the 4th area having no interventions and serving as the control.(control not shown)

Level of intensity	District	Upazila
High	Sirajganj	Raiganj
Medium	Sherpur	Sherpur Sadar
Low	Narsingdi	Manohardi
Control	Narsingdi	Raipura



Year 2-Expansion in all project areas :

Additional training for local government staff not directly employed by the project ;

More advocacy efforts in medium and low intensity areas at all levels ;

Increased attention to quality control as Programme expands.

The programme continues to receive an enthusiastic response at the village level..

Advocacy

Increasing advocacy for the programme and community participation at all levels continue to be important goals.

An integrated communications strategy is critical to this effort.

Advocacy creates understanding and support for injury prevention from the highest national level down to the villages.

An integrated communications strategy that utilizes UNICEF's approaches for message delivery within all UNICEF programmes is a critical part of this effort.

The communications strategy now under development considers target groups, analyzes desired behaviors, identifies appropriate messages, and identifies tools and materials for those messages.

Existing tools such as the **Home Safety Checklist** have already been observed to be useful in promoting injury prevention at venues beyond the home.



Home Safety Checklist in a crèche is seen by mothers everyday.

District Upzila ,Union, & Village Meetings

Advocacy meetings continue to be held at the village, union, upzila, and district levels. (District level meeting in Raiganj)



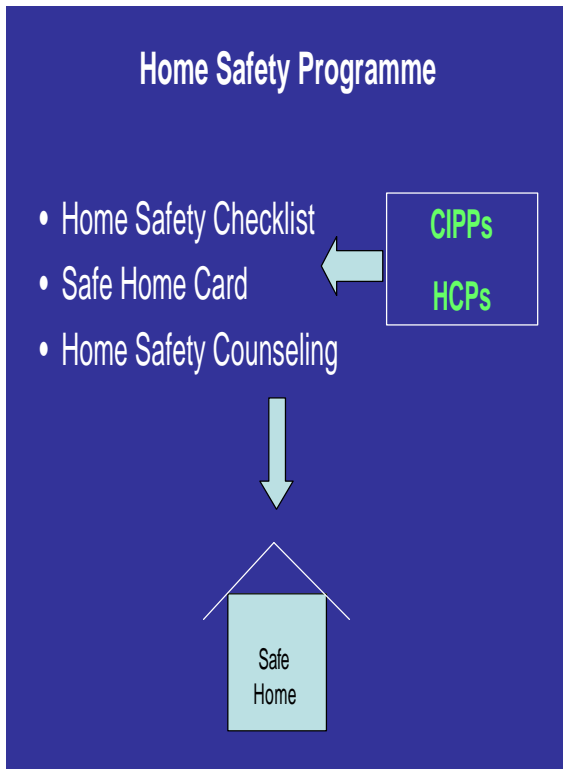
Meetings Held for Injury Prevention Committees , Union & Village levels

Upazila	# UIPC	# VIPC
Raiganj	10	400
Sherpur Sadar	14	40
Manohardi	13	55

The communications strategy considers these target groups and what tools to best use to reach them. These meetings are among the logical venues to be used for more effective communications in the future.

Home Safety Programme

Removes physical hazards and changes risk behaviors of household members to create a “safe home”.



Goal : 5,500 Safe Homes

Activities March—June/06

Household Visits-
488,000

Designated Safe Homes-700

All house holds in Raiganj **high intensity area** visited 4 times by CIPPs. (120,000 HHs)

Partial improvements made in many households.(using Safe Home checklist).



New barrier around cooking area in a Raiganj Area home.



Community Injury Prevention Promoter holding a safety meeting at a compound in Raiganj.

School Safety Programme

Provides a safe environment for children to learn in while teaching them ways to avoid risks of injury.

Activities undertaken during this period:

Make regional and local leaders aware of the programme;
Complete the teaching curriculum & content development;
Initiate training for teachers on safety curriculum; and
identify & acquire first aid training materials.
(Full implementation of this component has not yet begun.)



The School Safety Checklist provides the responsible official with an easy- to- use, risk assessment tool for the school environment. CIPRB has further refined the checklist and is pilot testing it.

The **Safety Curriculum** is being developed on a grade specific basis. It will provide teachers with practical teaching tools to help students learn how to avoid and minimize injury. Lesson plans for several grades have been developed in Bangla and translated into English. Other education materials are being developed.

The **School Safety Programme** follows the Guiding Principles of the **UNICEF Child Friendly School** which promises to ensure every child a learning environment that is physically safe, emotionally secure, and psychologically enabling. .

Community Safety Programme

The Crèche Programme – Another Safe Place for Children

A **Crèche** is a place where busy mothers or caregivers can place their young children for up to 4 hours per day.

The basic idea is to provide the child a safe environment while the usual caregiver attends to duties which might leave the child unsupervised and vulnerable.

Crèche

- Children 1-4 years
- 10-20 children
- 10 a.m. to 2 p.m.
- Crèche Mother
- Integrated with other programmes – ECD, NNP
- One Stop Service



Crèche mother teaching children Bangla letters

The acceptance of the **Crèche** has exceeded the programme's expectations. Most **crèches** immediately reached their intended enrollment of 20 with requests for additional placements exceeding local capacity.

The **Crèche Mothers Training Manual** incorporates key elements of UNICEF's early childhood education manual.

Every **crèche house compound** will be made to conform to Safe House standards during this year.



Crèche parents provide volunteer help and some food at most of the venues.

<u>Area</u>	<u># Crèches</u>	<u># pupils</u>
Raiganj	19	362
Sherpur	16	320
Manohardi	16	320

Community Safety Programme

Swim for Life / Swim Safe

A Community Approach to Water Safety

Swim for Life/ Safe Swim

- 4 – 10 yrs children
- Local Ponds
- Community Swimming Instructors (CSIs)
- Bangladesh Swimming Federation
- Life saving swimming skills and water safety
- 25 metres swim and 90 secs treading water



“Graduates” enjoying the water.

The Swim for Life Programme has been widely accepted in the communities and is oversubscribed.

PRECISE has built the total number of venues planned for each of the project areas and has a full compliment of trained Community Swimming Instructors. (CSIs)

<u>Area</u>	<u># venues</u>	<u># enrolled</u>	<u>graduated</u>
Raiganj	25	2848	285
Sherpur	25	3245	175
Manodhardi	<u>25</u>	<u>2656</u>	<u>182</u>
Totals	75	8749	642

(As of 30 / June /06)

Partners in Drowning Prevention

Bangladesh Swimming Federation
 D.G. Health Services / GOB
 UNICEF
 TASC
 Royal Life Saving Society of Australia



(Above ↑) “New swimmers” getting comfortable with the water in an early lesson.

(Right→) RLSSA consultants & BSF Coaches
 Training of Trainers Clinic July 06



Community Safety Programme

Social Autopsy & Courtyard Meetings

Social Autopsy is a process whereby a trained moderator leads a community group through a structured, standardized analysis of the root causes of a death or serious, non-fatal health event.

Social Autopsy

- Community meeting after an injury death
- Parents – describe the event
- Moderator – explore the errors
- Community – discuss probable measures
- Moderator – educate on other injuries



Social autopsy in Sherpur in July . Village leaders and VIPC members helped organize the event →

UNICEF guidelines for community meetings have been incorporated into the manual for training social autopsy moderators.

Courtyard Meetings provide forums for discussion of child injury prevention among neighbors within village communities. Common problems and common solutions come from the discussion among the participants.



CIPP Supervisor prepares for a courtyard meeting, Raiganj, March 06.



Villagers attending a courtyard meeting, Raiganj, May 06

Injury Surveillance System (ISS)

The ISS has been created to allow monitoring and evaluation of project activities and the outcomes associated with those activities.

The ISS allows programme staff to track the trends of various child injuries over time, to better determine the factors involved, and to evaluate the effectiveness of the PRECISE interventions



Surveillance Coverage by Upazila

Upazila	Households	Population
Raiganj	40,682	179,288
Sherpur Sadar	47,151	203,466
Manohardi	42,008	190,021
Total	129,841	572,775

CIPRB has initiated additional quality control practices for data collection to assure accurate recording of information in the field. Several Surveillance Data Collectors have been reassigned to different areas to help validate the accuracy of data collected over the first 5 months of the programme.

Surveillance Strategy

- ISS has been implemented in all three areas of PRECISE intervention
- Selected areas of each upazila has been divided into 30 blocks and all households have been given a new ISS number
- One Data Collector appointed in each block
- Data collection by monthly household visit
- Data managed in CIPRB central office
- Half yearly reporting of surveillance data

Surveillance Instruments

- Household information form
- ISS Screening form
- Birth registration form
- Death registration form
- Marriage registration form
- Out migration registration form
- In migration registration form
- Injury death registration form
- Injury morbidity registration form

- **The ISS is one of the largest community based injury surveillance systems ever implemented in a developing country.**
- **After a year of development, the CIPRB data entry software is complete.**
- **Data is being transferred from the temporary system to the new one which is highly secure.**
- **Full utilization of the new software should begin in August**

PRECISE Project Year 2

Five Project Months (March– July, 2006)

Observations & Accomplishments

Programme Management & Operations

1. There is a high level of outside interest in PRECISE by policy makers, public health officials, other organizations engaged in child health programmes, and the press, (including a BBC team) as indicated by the frequent site visits to implementation areas.

While professional curiosity may account for some of this, it appears that because PRECISE is a unique programme in terms of its content this exposure may serve to bring child injury prevention more into focus as a mainstream child survival issue.

2. Partnerships are critical to this effort, and there has been an exceptional degree of collaboration between UNICEF, CIPRB, and TASC to date on the activities in the field. Suggestions provided by UNICEF and TASC on operational issues, integration, and approaches to selected problems have been quickly acted upon, and this flexibility has helped CIPRB rapidly move the project forward.

3. Positive relationships noted in Project Year 1 such as the field staff's rapport and acceptance by local communities have been maintained even as the programme's scope expanded dramatically. Advocacy for the project is based on these relationships at the village level as these workers provide the target population with the interface in most interventions.

4. There is reportedly some competition evolving between villages to become the first "safe communities" within the high intensity area. This may be a sign that intervention activities are taking hold as no formal "competition" has been programmed into the system , and all interventions are not yet in place.

5. Rapid growth in terms of staff and selected activities, especially for the crèche and Swim for Life components created additional challenges for CIPRB's management staff in terms of training and supervision of new staff. These challenges seem to be met as field visits confirm new staff are functioning up to the prescribed programme standards. CIPRB management knows they must put time into the field to maintain these standards

(continued).

PRECISE Project Year 2 :

Observations continued

6. Acceptance of the Crèche Programme has been remarkable. Integration of UNICEF education materials into the programme and the performance of staff are making this more than simple “day care”. The crèche mothers are becoming recognized as another element in the “advocacy” of this programme because they have daily contact within the village.

This element of the programme is already fully subscribed and there is no capacity for near term expansion. This will need to be considered in future project years.

7. Swim for Life is also fully subscribed, and environmental concerns not fully appreciated in project design greatly influence the number of training months available. There is a large backlog of untrained swimmers who need to complete the programme, and it is unlikely this can be cleared within this project year due to the size of the cohort. Quality control issues related to maintenance of training venues and competency of the CSIs need regular attention.

Two separate consultancies have been provided by the Royal Life Saving Society of Australia during this period (at RLSSA expense) which addressed operational issues within the programme and training capacity of the Bangladesh Swimming Federation. (BSF). Recommendations have been incorporated into the current programme.

8. The integrated communications plan is in active development by CIPRB in full consultation with partners. Information and education materials are already in need as new opportunities to motivate target groups present themselves virtually every day.

9. Use of local government staff in the medium and low intensity areas is occurring, but the staff have competing priorities (i.e. NIDS and others) which must be considered. Never the less, this process is bring the project into the target areas. Support from their supervisors and above is critical.

TASC, DGHS, and CIPRB, UNICEF are committed to reducing child injury in Bangladesh. We anticipate seeing measurable results coming from the many interventions and innovations **PRECISE** is bringing to the field.

Child injury in Bangladesh will change for the better because of **PRECISE**.

PRECISE PROJECT : DELIVERABLES

The PRECISE Documents Set should be viewed as a whole as tools for the prevention of child injury in developing country environments.

The PRECISE Documents (As of July, 2006)

1. Document 1: Overview and Introduction to PRECISE (Feb.06)
2. Document 2: Strategies, Guidelines, & Instruments for Injury Surveillance Systems in Bangladesh (Feb.06)
3. Document 3: Strategies, Guidelines, & Instruments for Social Autopsy Program (Feb.06)
4. Document 4: School Safety Programme: A Report on Existing Texts and Curriculum (Feb.06)
5. Document 5: Strategies & Guidelines for School Safety Program (Feb.06)
6. Document 6: Strategies, Guidelines, & Instruments for Creche Programme (Feb.06)
7. Document 7: Strategies, Guidelines, & Instruments for Home Safety Programme (Feb.06)
8. Document (s) 8: PRECISE Surveillance Reports-due twice per year
(First Report delivered Feb. 06)
8.1 Mid Year Surveillance Report (Jan-May 06) (due August 06)
9. Document (s) 9: PRECISE Annual Progress Reports,
9.0 Project Year 1 (delivered Feb.06)
9.1 Project Year 2- Mid Year Report (March-July 06) (due July 06)
9.2 Project Year 2 - Complete Year (due Feb.07)
10. Document 10: PRECISE Baseline Report- 2006 (Feb.06)
11. Document 11: PRECISE Final Report- (due 2008)
12. Document 12 : Swim for Life: Strategies, Guidelines,& Training Manual
(Revised May 06)
13. Document 13: PRECISE Integrated Communications Plan (in Draft July/06)

Information: info@ciprb.org