Session 2

Cluster Assessment
Pre-visits
Community Involvement
&
Census

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WHO STB TME
Let's learn from Myanmar experiences

• Review DVD
Where we operated in Cambodia 2002:

Do Mapping selected clusters to realize the distribution
1st assessment (Preparation stage)

Contact local authority

Logistics to the cluster (Seasonal access …)

Survey site map, basic population data

Indentification of local Stakeholders etc

Either you need to visit the site or District TB focal point provides information is depending on country situations
Mobilization and involvement of local government and communities

• Inform local health and relevant authorities officially and ask for cooperation with the survey team by MOH

• Cooperation beyond health sector is often required
Providing information

- Target groups – To Who
- Message - What
- Means to convey message - How
- Timing - When

Identify and list local stakeholders
Always keep in your mind

• This is a scientific study to know country situations – national (regional) representative figures

• Community involvement – consent by community and participants are essential. However excess provision of information in advance may be questioned to doubt the representativeness of the community: They know TB more than others → potential bias
TB focal point in district

"It's a shame if my place has more TB than others."

or

"OK. Central Survey team will come. They must be happier if they can detect more TB."
Survey Operational Plan based on the pre-assessment
Cluster allocations

• Schedule all at one time

or

• Phase wise allocation – detail phase schedule step by step
Pre-Visit
(3-4w before field operation)
precise local plan
pre census population data
designating survey area
arrange staff/volunteer
logistics for the team
Pre-visits

• Survey Operation Area = Census Target (EAs) should be confirmed

• Exclusion from Census
  – Prison: biased if included by chance
  – Military facility

  – Diplomatic compounds - operation feasibility
  – Hotel, Hospital,
  – Discussion Points: Monastery, School compound, Dormitory will be included

• Local community often has updated population information

• Who will prepare basic population data in EA: Local health worker?
Pre-visit

Preparation of Study Census

• It varies depending on final sampling strategy

• The gap between information from the population statistics office and that from local community – should be identified in advance except for the incidental cases such as natural disaster, new construction of apartments
  – Size of EA must have been same. However in reality...
Recruitment of local staff/volunteer and the guidance

• Study Census preparation/ Population list
• Guide during the census
• Interpreter
• Guard
• Runners
• Other assistant

• Cook......
• Laundry/washing
Enables/ Compensation

- Small gift
- Transportation cost
Debriefing as well as briefing

• Feedback: How to report cases after the survey
Study (Survey) Census
To confirm eligibility of individuals and invite those eligible
Which is your plan?

If you have Pre-census document on individual list or not

• Study Census be carried out BASED ON
  – Nothing
  – Population census data (house hold list)
  – Existing list in local authority/community
  – Updated list by local (health) worker instructed by pre-visit team
How to select households/individuals within a selected sampling unit

- Random sampling of individuals or households is often not feasible
- Often unclear in most protocols
  - Starting from the centre may have a potential bias
- Need clear SOP and guidance
Census: To recruit sufficient number of study eligible samples and asking for participation

People aged 15y old or more on the census day who basically stay in a defined area for two weeks or more are eligible population regardless the possession of their house and their on availability on the survey day

Proper informed consent to avoid creating fears

Socio economic data collection may be done in this stage
Pasting Household number
Household registry = Census Form
Invitation card
Household number sign
Some key issues

• The survey team should decide the eligibility of individuals– Don't ask local worker to decide

• Almost impossible to have multiple visits to each house – No necessary to meet every one during the census

• The team should realize that the census is probably only a chance to get info on "absentees"

• Range of acceptable sample size in a cluster should be defined – often over-sampled
  – Team has a capacity to examine all
  – Fear from low participation rate
  – Difficult to stop the recruitment within same household group
  – Fewer children than expected
Will you assess SE condition?

Simple assessment along the DHS or other study criteria in Ghana: Don't do all – will be the burden on Census
ANNEX

INCLUSION & EXCLUSION CRITERIA
Inclusion & Exclusion

Need to define step by step otherwise decision responsibility is not clear

- Sampling Frame
- Cluster
- In cluster
- Individual
Sampling Frame

- Insecurity area (war zone)
- Logistically infeasible area

If you know from the beginning, exclude them from your sampling frame

Seasonal climate factor may be solved by careful scheduling
Inclusion and Exclusion Criteria

Sampling Frame: Excluded from the beginning
Found difficulty after cluster was chosen

• When cluster village was randomly selected from a last sampling unit such as district or township: replace by another village in the same sampling unit
In Cluster

Often excluded
• Military compound
• Diplomatic compound

Should be discussed (according to the definition)
• Hospitals and Sanatoriums
• Prison, Jails
• Hotel
• Temple, Monastery
• Offices
House or house group

• In most surveys, samples are slightly different between clusters. Because it is very difficult to cut when it reaches sample size during the census.
  – Include all family members in a same household.
  – Include all houses in a house hold group
  – Avoid that only a small part of a village is excluded
Individuals

Basically everybody should have a chance to be included as an eligible at one place regardless of their ability of participation, if the survey is carried out at the same day in all clusters. However, we need to compromise for convenience

- **Residential Status**
  - Mobile populations, foreigners
- **Length of staying**
  - Actual stay or basically stay
  - Slept last night often invites intentional sick people
- **Age**
Do case studies and give examples

• Census on Sunday identified that there is 20 year old lady who works for a garment factory staying in a dormitory in town from Monday to Friday. She comes back home where she is registered every weekend.

• 18 y old student is registered but he has been actually staying in capital city to go school
Case studies

• A man is registered in a cluster village. However, he is sick in a hospital in the district capital for 2 weeks.

• You are a survey team leader, traveling across country. However, your house by chance is designated as a survey area by another team of your colleague. You know you should go to another cluster in the survey week.

Right answers are different according to definitions of eligibility