



ECOMORE 2 PROJECT

MOSQUITO CONTROL EVALUATION IN LIPA CITY,
BATANGAS

Institut Pasteur

Research Institute for Tropical Medicine

Liverpool School of Tropical Medicine

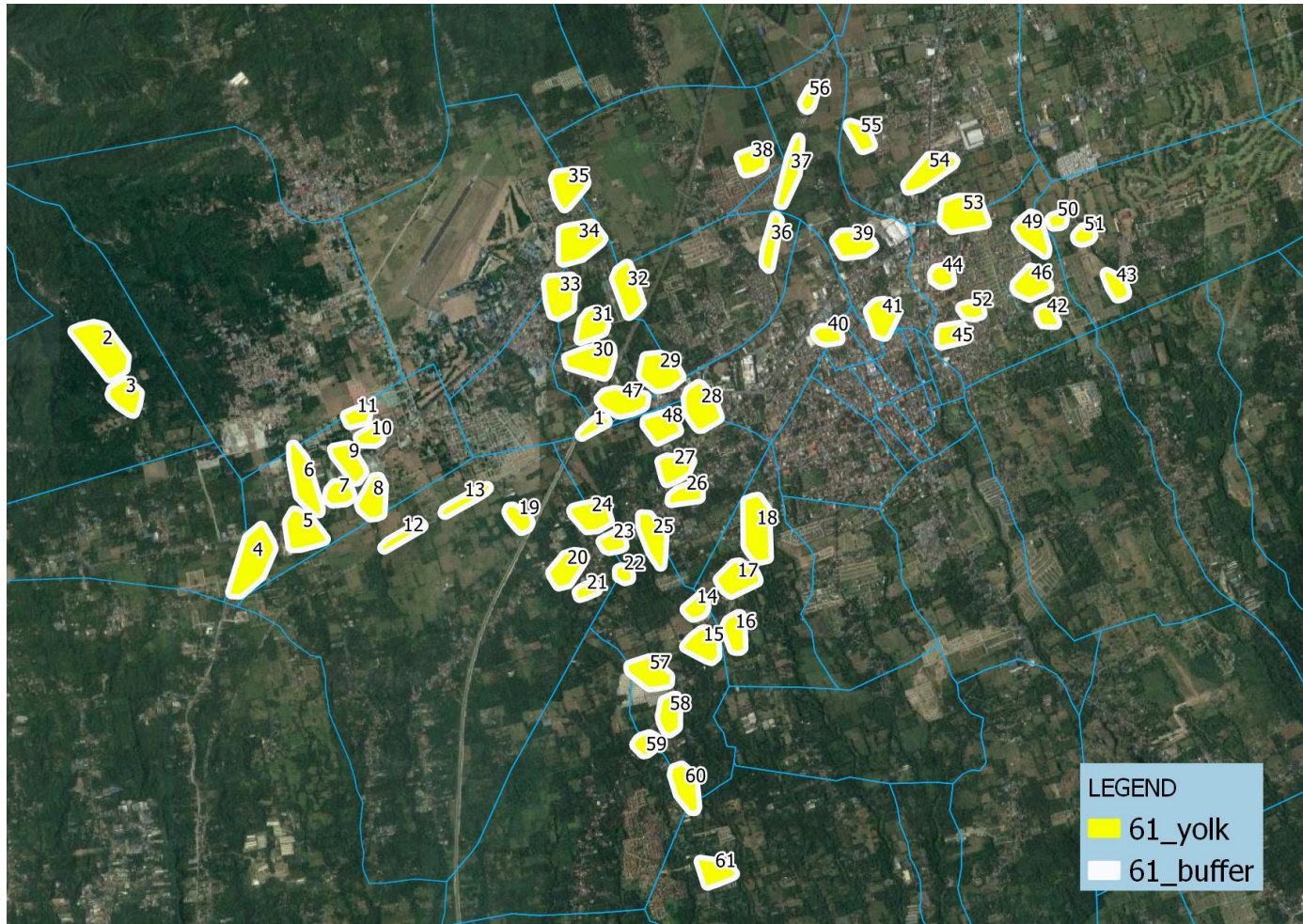


Participant Recruitment and Saliva Collection

Activity Calendar

ACTIVITY	2019																			
	J	F	M	A	M	J	J	A	S	O	N	D								
GPS Mapping				█	█															
Participant Recruitment					█	█	█	█												
Saliva Collection								█	█	█	█	█	█	█	█	█	█	█	█	█

GPS Mapping





Participant Recruitment

MATERIALS:

1. Consent Forms (for parents)
2. Assent forms (for ages 12-16 y.o.)
3. Case Report Forms
4. Masterlist of Households
5. Letters for the Barangay official
6. Notebook/Filler
7. 2 Blue ballpens (used for filling up of forms)
8. Paper clips / Binder clips
9. Trap Visual Aids
10. GPS device with spare batteries

METHODOLOGY: *PREPARATION*

- Courtesy call with the Barangay
- Orientation of BHWs and Teams
- Division of labor (Clusters → Quadrants)



METHODOLOGY: *HOUSE VISIT*

- Get the GPS coordinates – Write the appropriate GPS code in the Masterlist.
- Ask if the household has children aged 6-11 years old (For consent only) and 12-16 years old (For assent).
- Ask if the household owner is available to be interviewed.



METHODOLOGY: *INTRODUCTION*

- Introduce yourself and the institution and agency you belong to (DOH-RITM).
- Ask the NAME of the household owner or parent – Write this in the Masterlist.
- Ask how many children they have that belong in the target age group.
- Introduce the research study – “Mosquito Control Evaluation in Lipa City, Batangas”.
- Stress the important points about the project and let them ask questions.



METHODOLOGY: *COMPREHENSION*

- After the project briefer, ask the parent/guardian if they are willing to participate.
- **REFUSE** → Outcome of “4”.
- **YES** → Move to Comprehension questionnaire. This should be asked individually for each consenting/assenting person. Ask this portion to the parents first before the child (aged 12-16 y.o.).
- Mark the boxes in both pages with an “**x**”.
- Repeat important parts of the briefer if they show signs that they do not fully comprehend what you discussed.



METHODOLOGY: *FORMS*

- **CONSENT FORM** (Form 2) → for parents/ legal guardians
- **ASSENT FORM** (Form 3) → for children aged 12-16 y.o.
(parental consent should be obtained first before filling out this form)
- **CASE REPORT FORM** → should only be accomplished after the Consent and/or Assent is obtained.
 - Fill-up the boxes from A1 to B1.1 in the CRF

CODING FORMAT

- *Barangay Code:* [] []
- *Purok / Sitio Name:* _____
- *Cluster Code:* [] []
- *Household Number:* [] [] []
- *Child number:* [] []

**Example: Bulaklakan (01)*

Purok 2, Cluster 3 HH # 045 , 1 child

- *Barangay Code:* [0] [1]
- *Purok / Sitio Name:* PUROK 2
- *Cluster Code:* [0] [3]
- *Household Number:* [0] [4] [5]
- *Child number:* [0] [1]

LEGEND (OUTCOMES)

- *1 - ALL eligible children enrolled*
- *2 - With PENDING enrolment (For callbacks)*
- *3 - Household NOT available (May or may not be for callbacks)*
- *4 - Household REFUSED*
- *5 - Not ALL eligible children enrolled (May or may not be for callbacks)*

Recruitment Status

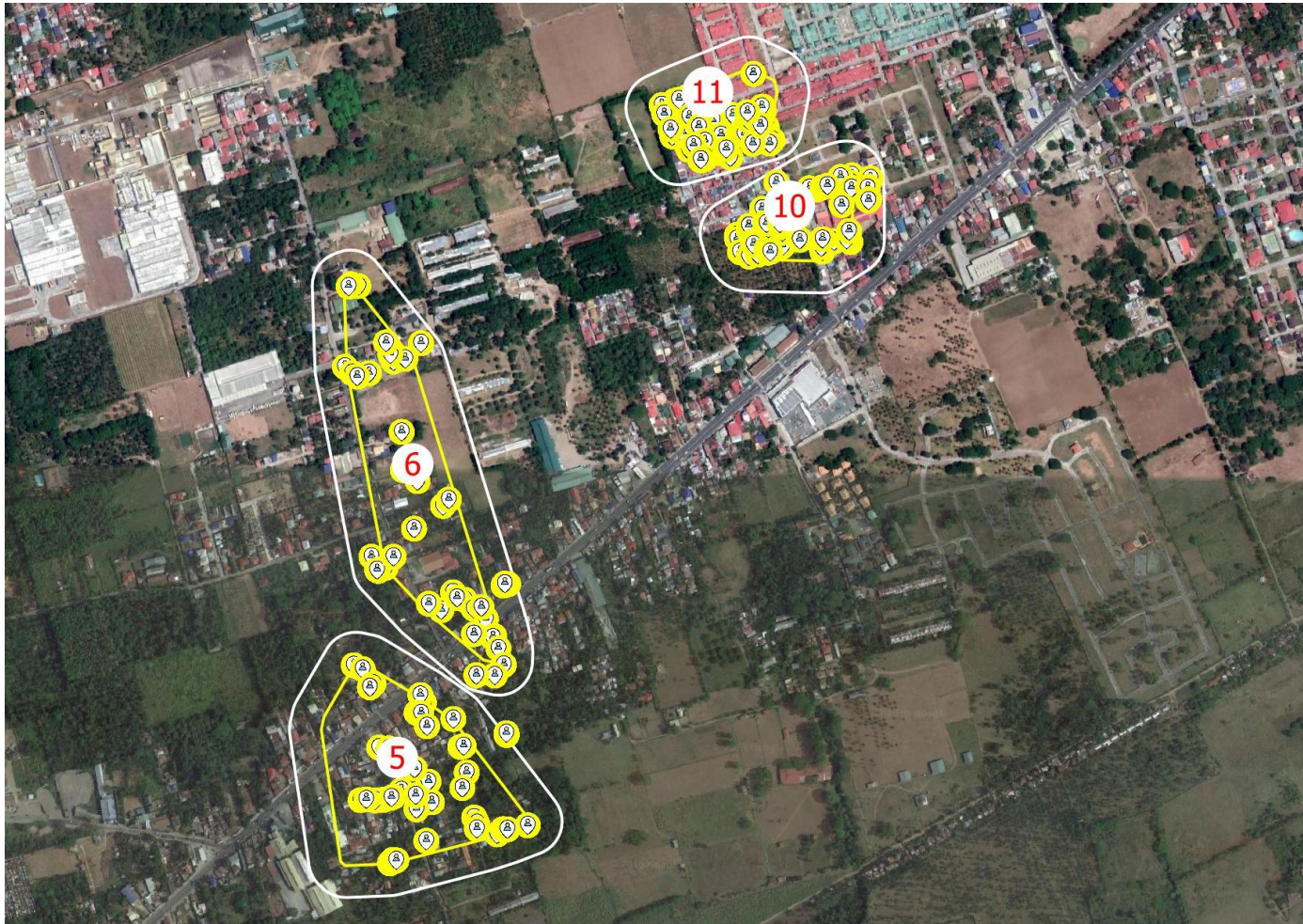
As of August 2, 2019 (without revisit)	HHs	Individuals/Children
(1) Number identified during GPS coordinates collection stage	3,947	7,573
(2) Actual number enrolled	3,169	3,817
(3) Current turnout	80.28%	66.94%

*Number of enrollees after August 2 are directly encoded by the database manager into the DDMS system

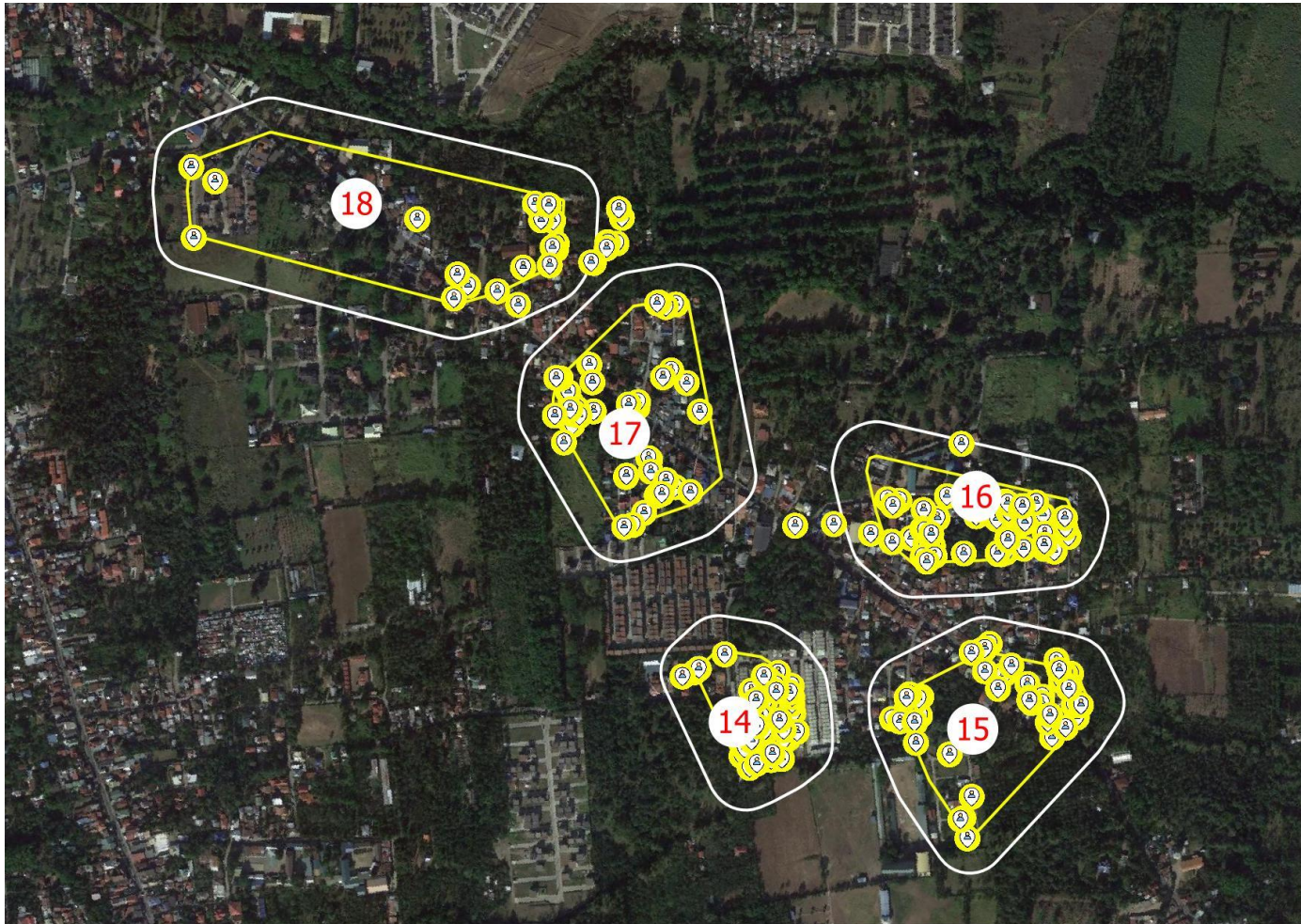
Cluster Maps with Recruited Children



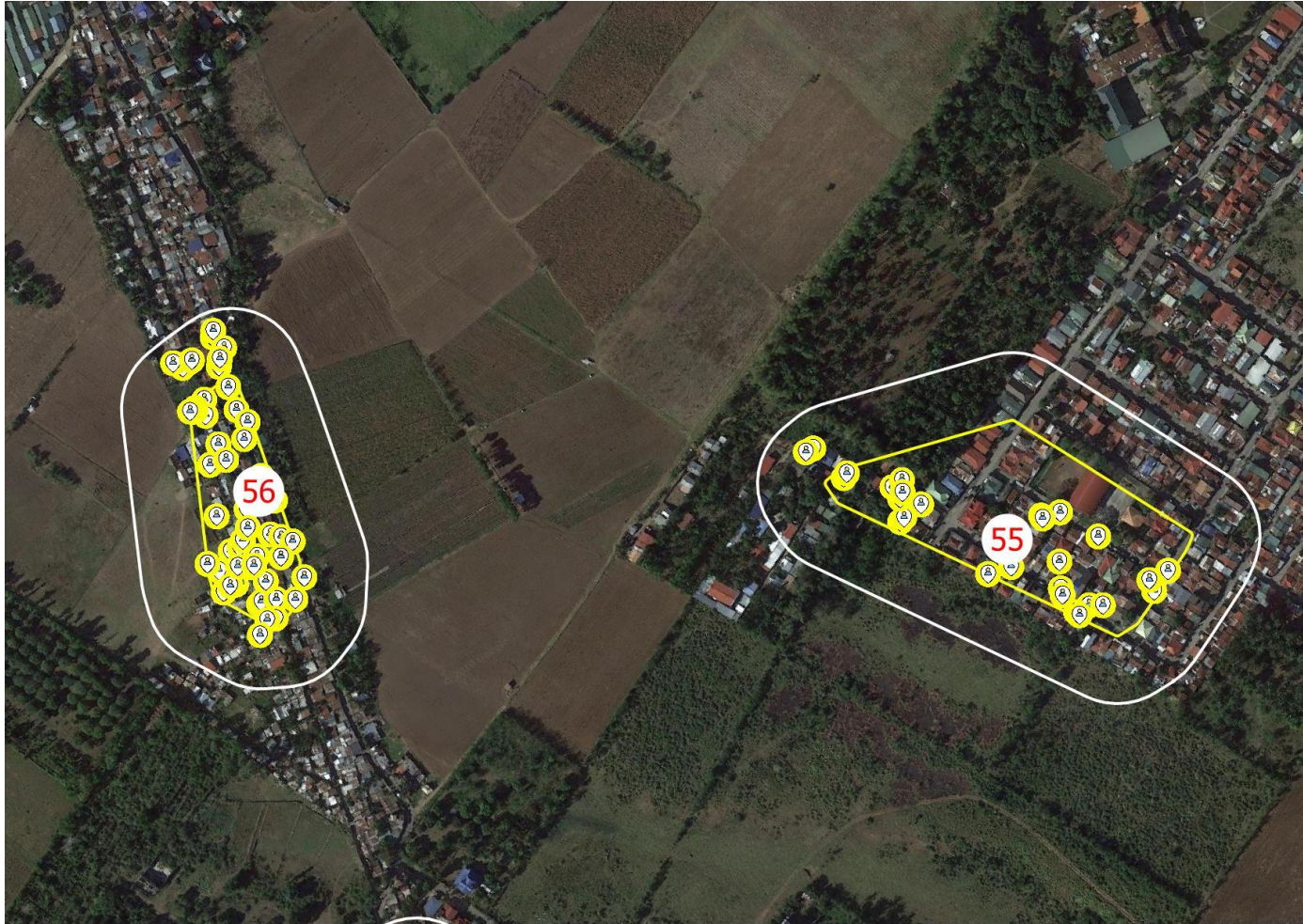
Cluster Maps with Recruited Children



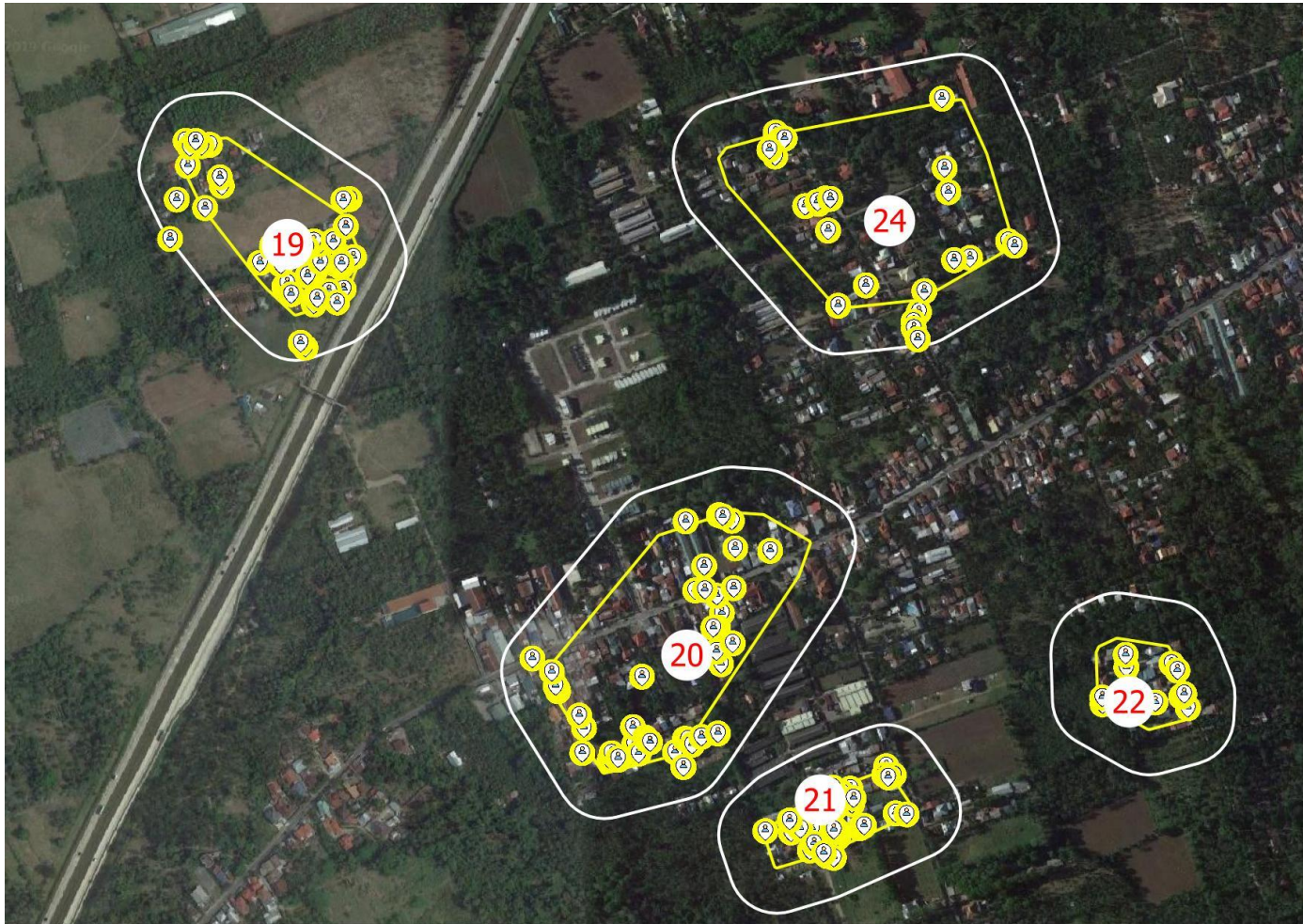
Cluster Maps with Recruited Children



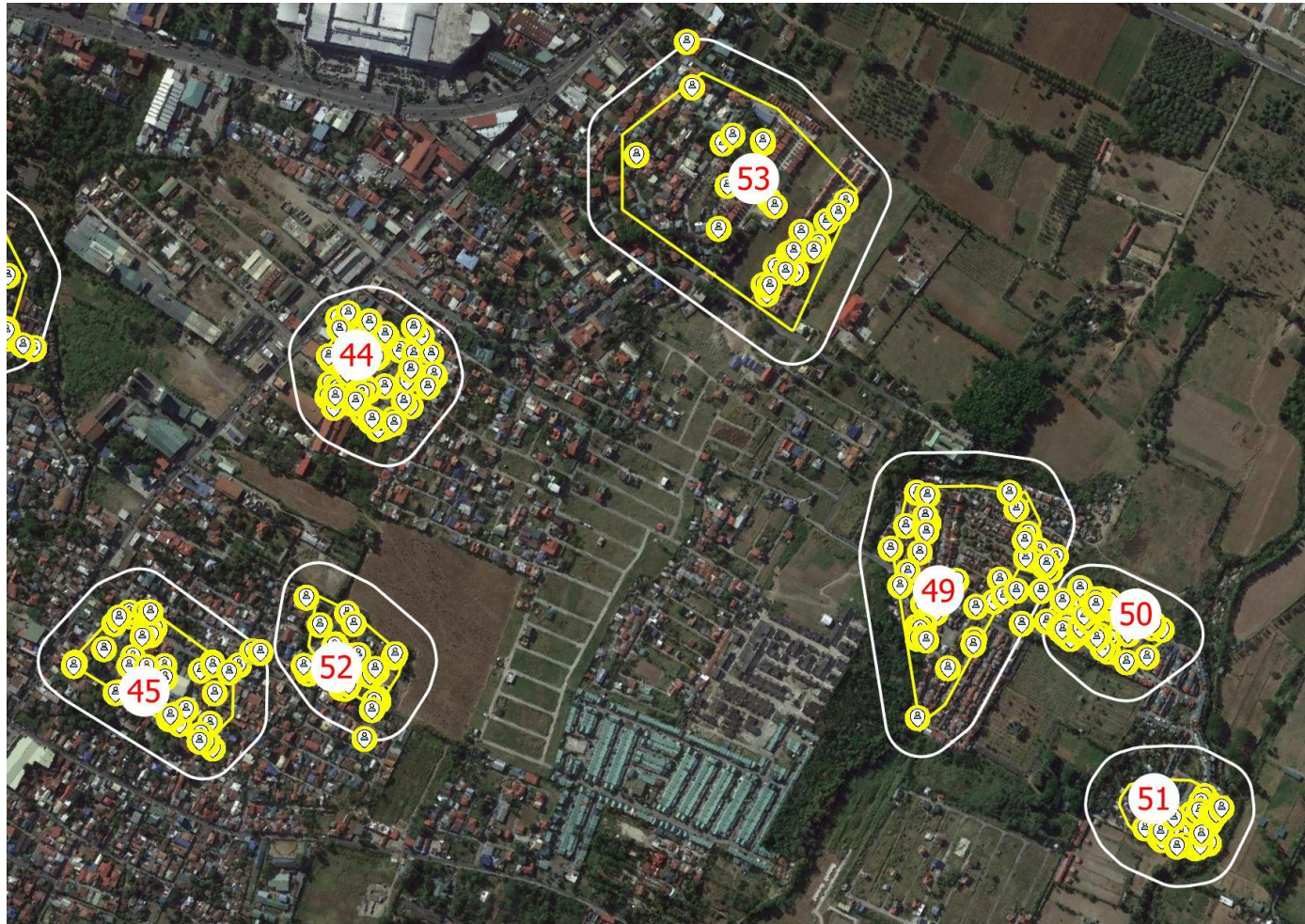
Cluster Maps with Recruited Children



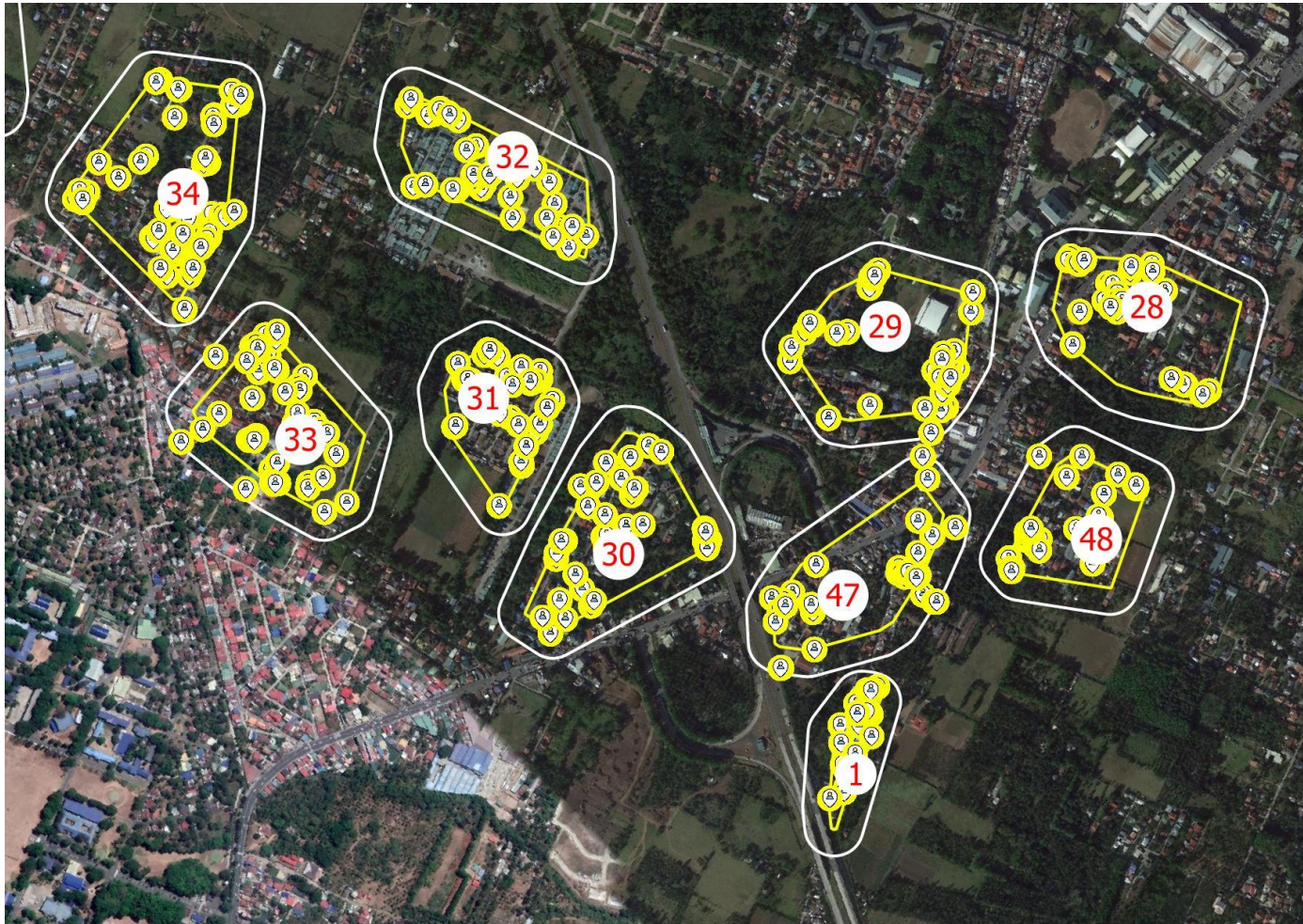
Cluster Maps with Recruited Children



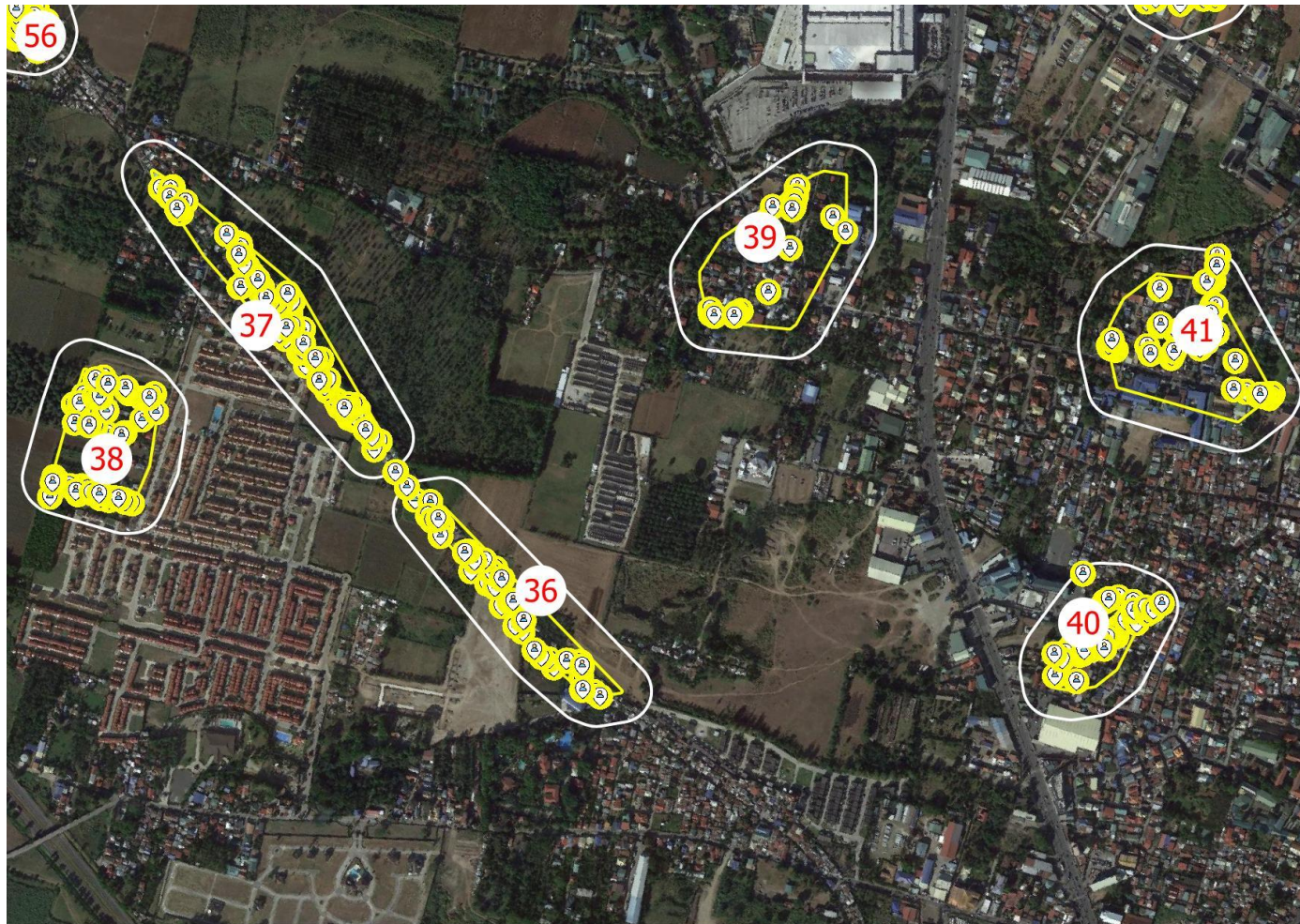
Cluster Maps with Recruited Children



Cluster Maps with Recruited Children



Cluster Maps with Recruited Children



Cluster Maps with Recruited Children



Difficulties experienced

- Recruitment

1. Reading of maps for BHWs
2. Weather (Rainy)
3. Distance between houses
4. Availability of Households (During weekdays)
5. Lack of communication between BHWs and barangay

Solutions

- Recruitment

1. Use of landmarks for easier understanding of the map
2. Umbrellas
3. Group assignments (Quadrants)
4. Weekend visits
5. Advance notice to the BHWs – constant follow ups



Saliva Collection

MATERIALS:

1. Masterlist of Households
2. Saliva collection worksheets
3. 2 Blue ballpens (used for filling up of forms)
4. Cryotubes and cryoboxes
5. Straw and tissue
6. Gloves
7. Laboratory mat
8. Cooler box
9. Trash bags
10. Cold dogs

METHODOLOGY: *GARGLE*

- Barangay Health Workers gather the children on a selected area in the barangay
 - Children gargle before proceeding to the master list check to avoid food debris on the saliva
- *Saliva collection was done 1 hour after the child last food consumption

METHODOLOGY: *MASTERLIST CHECK*

- Names of the children are cross-checked with the Master list of households and summarized list of children eligible for saliva collection

*Children that are not in the list but has a parent/guardian was added to list after filling up the consent and case report form



METHODOLOGY: SALIVA COLLECTION



Saliva Collection Status

As of November 23, 2019 (1st Batch of Saliva Collection)	Children	Average per Cluster
(1) Number children attending saliva collection	1955	42.50 (min = 10, max = 81)
(2) Control Clusters	929	40.39 (min = 11, max = 79)
(3) Treatment Clusters	1026	44.61 (min = 10, max = 81)

Difficulties experienced

- Saliva Collection

1. Encouraging of children / parents to attend saliva collection (difference of persuasiveness between BHWs)
2. Distance of post to the house of the participants
3. Transportation – one post to another (time consuming, costly, tedious)
4. Information dissemination and relaying information between the BHWs
5. Number of staff attending

Solutions

- Saliva Collection

1. Accepting suggestions from the BHWs
2. Nearby and additional teams and posts
3. Van hire from local (Lipa)
4. Advance notice to the BHWs – constant follow ups
5. Increased number of staff assisting in the project



THANK YOU!



Department of Health
RESEARCH INSTITUTE FOR TROPICAL MEDICINE

