

	Question	Presenter Response
Bangladesh	Can you share more details about the “e-screening checklist” intervention?	Service providers working at the facility level, including community healthcare providers; family welfare visitors/sub-assistant community medical officers; and midwives working at community clinics, family welfare centers, and antenatal care corners (ANC) at Upazila health complexes; and local non-government organization clinics use this checklist for identification of zero-dose (ZD) children. A previous study found that use of a screening checklist contributed significantly to detecting unmet needs for immunization. Therefore, the Bangladesh Country Learning Hub introduced an e-screening checklist for identifying ZD children. It is used by service providers of the health facilities mentioned above. Mothers who visit a health facility for reproductive health or child health services are asked about the immunization status of their children of eligible age, including accompanying children and others at home. If a child is found unvaccinated, or had missed vaccines, the required vaccines are provided at the clinic, if available. Otherwise the child is referred to an EPI session or other facility where vaccination is available. The service providers record these children in the tab and the record is linked to an assigned health assistant/vaccinator and online application system which automatically includes the children in a targeted effort for the subsequent doses.
Bangladesh	Can you describe the process indicators you are using as outputs to measure success? I understand you’re using coverage, but what additional indicators are you using?	The process evaluation will be done through observation of field activities, key informant interviews, and focus group discussions. The process indicators include: <ul style="list-style-type: none"> • Availability of the staff in the field. • Barriers they face in identifying and vaccinating the ZD children. • Factors that facilitate identification and vaccination of ZD children. • To what extent the proposed approaches related to identification, providing reminders, and vaccination of the ZD children work. • Participants’ perceptions of the approaches related to identification and vaccination of ZD children.

	Question	Presenter Response
		<ul style="list-style-type: none"> • Their opinions about which of the approaches worked well and which did not work well. • Reasons that particular interventions did or did not work well. • Barriers faced in implementing the approaches. • Successful interventions that can be scaled up and brought into the Bangladesh health system. • Best practices regarding identifying, recording, motivating caregivers, and vaccinating ZD children. • Areas where the ZD children are more likely to be found. • Reasons for the children having missed vaccines. • Their perceptions about the interventions (acceptable/not acceptable and feasible/not feasible). • Reasons why particular interventions are perceived as acceptable/not acceptable and feasible/not feasible.
Bangladesh	<p>Thank you for sharing the implementation research (IR) updates! I was curious if the survey questionnaires used in Bangladesh will be shared at some point. They would be so helpful to learn from, especially for trying to capture potential change in key indicators around ZD drivers and (eventual) uptake in vaccination.</p>	<p>Yes, a survey questionnaire is prepared for collecting baseline and endline data from the intervention and comparison areas to impact evaluation of the IR. We will share the questionnaire within an annex of the final IR report.</p>
Both	<p>Are children over 6 months, or children past the time period</p>	<p>Bangladesh: Children who are over 4.5 months old and have missed the DTP-3 dose are considered ZD children. This lower age limit was chosen to ensure that all children included in the</p>

	Question	Presenter Response
	for taking DTPI, considered ZD children?	<p>definition have the potential to have received both DTPI and DTP3. Because the third dose of the DTP vaccine is scheduled for 14 weeks (3.5 months) of age, and because a one-month grace period is allowed in which children are still deemed to be on schedule, the lower limit is set at 4.5 months.</p> <p>Nigeria: Yes, every eligible child that has not taken the DTP vaccine is considered ZD.</p>
Nigeria	<p>What is meant by linking to primary health care (PHC) in the context of ZD and under-immunized (UI) child interventions in Nigeria, and what services are offered?</p> <ul style="list-style-type: none"> • How are these services identified and prioritized? • Additionally, what effects are measured to determine if the services are utilized by families and children? • How are PHC interventions' acceptability and uptake measured? 	<ul style="list-style-type: none"> • What <i>linking to PHC</i> means in this context is that every child identified as ZD or UI is issued a coupon that serves as a referral form to the PHC closest to the residence of the child identified. • The services offered include—but are not limited to—immunization, growth monitoring, nutrition laboratory services, psychosocial support, and other services for the caregivers like ANC, perinatal care, family planning, etc. • There is also default tracking that ensures all individuals that have been enrolled into the PHC services are tracked and receive follow-up services.