

**Indicator: # of individuals able to identify at least three symptoms indicative of the need to seek immediate care for diarrhea (HE\_MNCH\_115)****HEALTH SECTOR** **PROJECT AREA:** Maternal,  
Newborn, and Child Health**Type:** Outcome**Unit of Measure:** Individual**Disaggregation:** Sex: M, F  
Age: <1, 1–4, 5–9, 10–14, 15–19, 20–24,  
25–29, 30–34, 35–39, 40–44, 45–49, 50+**Related Objective:** Increase the knowledge and skills of child caregivers to keep children under 5 healthy (Objective 2)**Precise definitions**

**Individuals:** The individuals being measured are mothers, fathers, or caregivers that have attended a multisession training on prevention of childhood illness co-facilitated by the PCV and their counterpart or local health staff/volunteer. The individual should have attended at least 75 percent of sessions to be counted in the denominator for HE\_MNCH\_114: *Number of target population reached with individual or small group education on prevention of common childhood illnesses*, and therefore this indicator.

**Symptoms indicative of the need for the parent or caregiver to seek immediate care with a health-care provider for diarrhea and/or resulting dehydration.**

**If a child:**

- Has difficulty with intake of oral rehydration salts (ORS) or other fluids AND shows symptoms of moderate dehydration \*(sunken eyes and/or decreased skin elasticity)
- Shows symptoms of severe dehydration \*(diminished consciousness, rapid and feeble pulse, pale skin, cool skin)
- Has bloody diarrhea with or without severe malnutrition
- Has acute watery (rice water) diarrhea
- If breastfed infant, unable to feed
- Has a fontanel that is very sunken (present only in infants under 18 months of age)
- Crying without tears

\* The individual must be able to identify the symptoms of moderate or severe dehydration—for example sunken eyes, loss of skin elasticity, or diminished consciousness.

**Data collection****Tool:** Child Health Outcomes Survey

The Child Health Outcomes Survey is intended to be given to the mothers/caregivers who participated in a multisession training focused on preventing and managing childhood illnesses facilitated by the PCV and their counterpart. This survey tool should be used three times:

- 1) As a pre-test at the start of the first training session/meeting
- 2) As a post-test at the last session/meeting to assess change during the time of the training

3) Three to six months after the training/activity has finished to assess whether knowledge is retained

All mothers/caregivers should be given the pre-test and post-test. Only mothers/caregivers who attended at least 75 percent of the defined information sessions should be included in the survey three to six months afterward. If the timing of a PCV's close of service (COS) or other factors will not allow for this, a survey could be conducted earlier, but some indicators may need to be removed. For example, the indicator around pentavalent vaccine is time bound and not enough time may have passed to measure it accurately. While it is the mother/caregiver who is given the survey, many of the questions are focused on the child/infant. The survey should be conducted by the PCV and their counterpart or co-facilitator of the group following the instructions provided in the outcomes survey tool closely. The survey should only include the topics that were included in the training on preventing and managing child illnesses. Questions should be removed from the survey if not discussed in the training.

## Reporting

**To be counted for this indicator the following criteria must be met:**

- The woman/father/caregiver attending the training has children under 5 years of age.
- The individual attended at least 75 percent of the training sessions and/or information offered on prevention of childhood illnesses.
- The information was provided by a PCV or their partner in an individual or small group setting of 25 people or less.
- Attendance at each session was documented by the Volunteer or their partner.