

4 – Reaching Dropouts, the Unreached & Socially Distanced Groups

Storyline

When a supervisor and two frontline workers (FLWs) are reviewing the immunization record of the children who have come to their clinic, they find that a group of children have not been brought back for subsequent vaccines. The supervisor and the FLWs discuss the possible reasons why these parents may have dropped out. One FLW says that he knows some of these parents live in remote areas and transport is an issue. In addition, these parents also belong to an ethnically minority group that often feels isolated. The other FLW says she knows some others on the list and feels that their reasons for dropping out might be because of other concerns.

The supervisor tells a story about a time when he faced a similar challenge so he went to the community where there had been an issue with children not getting their vaccinations. The caregivers were migrants and there was an issue of misunderstanding. He was able to answer the caregivers' concerns and conduct a mapping activity to find out where the unvaccinated children lived.

The FLWs feel inspired by this story to do the same thing in their community and the supervisor gives them tips on approaching marginalized communities and also on conducting community mapping.

Characters

Helen	FLW 1
Duane	FLW 2
Emmanuel	Supervisor
Amadi	FLW in flashback

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Scene 1 – Exterior – A bus drops off FLW at street corner where he meets another FLW and they both walk into the health facility together talking about their day.

(Emmanuel, the supervisor and two of the FLWs, Helen and Duane, are walking to work and discussing the immunization record of the children who have come to their clinic)

Emmanuel: Hello Duane! How are you today my brother?

Duane: Oh, I don't know Emmanuel. The thought of reviewing all those immunization records today is already making me feel tired. Do we really have to do this so often? There are so many records to review.

Emmanuel: This is actually a very important part of the job Duane, and we really should be doing this regularly. That is one of the few ways that we can actually identify those children who have not come back for their immunization and we can follow up with their parents and caregivers.

(Emmanuel and Duane have reached inside the health facility and are now at their desk where there is a large stack of files waiting for their review)

Emmanuel: Look at this pile. *[points towards a large pile of files]* These are the files of people who haven't come back for subsequent vaccinations

Helen: (She is already working at her desk and is looking into the files assigned to her) And it's been growing. I wonder why they wouldn't come back after being told the harmful consequences of not getting their children immunized

Duane (cynical): They are a group of migrants. I've been quite frustrated with them – I've tried everything and they just don't seem to listen. We have so much work already and so little time that it's difficult to pursue all these dropouts.

Emmanuel: Duane, there could be a lot of reasons why they have dropped out. In my experience, a lot of caregivers discontinue vaccination because they receive poor counseling at the first or any subsequent sessions that they attend. But it could be one of many other reasons too.

Helen: Yeah, it is important to find out what's stopping them from coming back.

Duane: What's the point? I feel like there is no way to convince them to listen to us. I've given up.

Helen: I'm sorry but I disagree. We cannot just give up. These migrants are a part of our community too and they need our kindness and understanding.

Emmanuel: Helen is right. In fact, let me give you an example of how important our attitude towards them is, for their well-being. A few years ago, I faced a similar situation. I had just been transferred to a new district. Upon going through the records, I realized that there was a group of dropouts that were being perpetually overlooked. So I consulted some of my colleagues...

FLASHBACK: Scene 2 – Exterior – In a boat crossing a lake and then they arrive in a Rural Community

(We dissolve from the last shot to Emmanuel, talking to a colleague.)

(As Emmanuel narrates his story we see him and a friend getting into a small boat with a boatman. The boatman rows the boat and takes them to the other side of the lake to an island where we see a lot of children are playing by the banks of the lake and women are seen doing some washing).

Emmanuel: Amadi, have you noticed that there have been a lot of dropout cases in our district?

Amadi: Oh yeah, its mostly migrants. They don't listen. It's a waste of time to follow-up, since they can't even understand our language.

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Emmanuel (narration): I was not convinced and so I decided to go visit the community myself. However, Amadi had mentioned that they did not understand our language, so I asked a friend who spoke the migrant's language and asked him to come with me to help translate my message to the dropouts' families. *[Shot of Emmanuel talking to a female friend on the boat].* It was hard getting there but my friend and I made it and we visited the migrant community. *[Emmanuel shown outside the house, knocking and then cut to everybody sitting on the verandah].* They were a reserved lot. It wasn't that easy but with the help of the interpreter, I got through to them. *[Shot of Emmanuel and his friend reassuring the reluctant caregivers.].* They told me that they hadn't even understood the previous health worker. I answered all their questions and addressed their concerns the best I could. *[multiple shots of the caregivers confiding in, and their concerns being addressed by Emmanuel and his friend].* Then with the help of the community members I conducted community mapping to identify which households have children and then which children had not yet been immunized. *[shots of Emmanuel walking around the community conducting community mapping].* Together we mapped the children in need and convinced their caregivers about vaccination. From then on, they followed the vaccination schedule. *[shots of same caregivers at the health center]*

Scene 3 – Interior – Health Facility

(The flashback ends and we are back where we had left off, with Duane and Helen planning the next day's visit.)

Duane (sitting there guilt ridden): ...That's a great story. I see what you're trying to say.

Helen: So, if we are unwilling to take the extra effort, that will drive distant groups even further away from getting proper help.

Duane: You're right. I feel like my own attitude has been extremely unwelcoming. I should've known that marginalized groups need a more welcoming and friendly attitude from us, for them to feel included.

Emmanuel: I am glad that you both see it this way. It's never too late to fix things.

Duane: But Emmanuel, how do you do community mapping? I have never had any experience with mapping.

Emmanuel: I'm glad you asked Duane. We could start by speaking to the migrant farming families. Remember what I said about my experience where I needed to take someone who understands the community's language better, and can communicate with them in their language? We should identify such a person preferably someone from within the community itself. Then with the help of the community we will map out all the households that have children and identify which children have received immunization and which have not including those who have received some vaccines but have since dropped out. Thus after identifying where unreached and socially distanced groups live, and mapping the children in need of immunization, we can map their location to where health services are available. But remember all this will need to be done with the involvement of people in the community.

(Show scenes from Emmanuel's flashback to reinforce how community mapping is done)

Duane: Excellent! We could start by speaking to the migrant farming families tomorrow. If you both don't mind, can I take the lead on this assignment. I would really like to personally make an effort to make up for my negligent attitude of the past.

Helen & Emmanuel: Of course!

Duane: Who do you think will be willing to help us in the community?

Helen: I can speak to the local mothers' club, they will agree to support us in any way possible.

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Emmanuel: Remember also that the migrant families come from different backgrounds than us, and might have different beliefs and values. So we need to respect and be sensitive to that, while we motivate them. And remember that this kind of mapping is helpful not just for displaced people or migrant communities. It can be done in other communities too where certain people or families within the larger community may be isolated. So, even though we did this in a displaced, migrant community the lessons learned are relevant anywhere.

Duane: Excellent, then let's go meet them tomorrow.

The end.