Insights from Surveying Polio Vaccinators

Côte d'Ivoire
Welcome To Your 60dB Results

We enjoyed hearing from 382 vaccinators who worked on the Polio Vaccination Campaign in Côte d'Ivoire – they had a lot to say!

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About the Survey

This study aims to understand vaccinators’ experience with payments and identify ways to ensure payments are timely, complete and convenient.

Countries Covered

- Côte d’Ivoire

Upcoming Countries

- Liberia
- Republic of the Congo

Purpose of the Study

Delays and challenges in vaccinator payments have been identified as a common issue affecting polio campaign quality. The Global Polio Eradication Initiative (GPEI) is supporting a shift from cash payments to mobile money payments to improve the speed of payment, worker satisfaction, and polio campaign quality in the African region. This study seeks to understand how vaccinators experience mobile money payments. Subsequently, these results will be compared to campaign performance to understand the correlation between worker payment experiences and campaign results.

Digital Finance as a Part of Polio Outbreak Response Strategy

The WHO Digital Finance Team (DFT), as a part of the WHO polio outbreak response strategy was established in 2020. Its objective is to support the roll out of mobile money for polio campaigns and other health programs in the African region.

DFT is responsible for country operations, documentation, partnership management, capacity building and all other aspects of the digital payment initiative within WHO AFRO. In addition, they aim to build capacity within WHO to support adoption of an evidence-based, government-managed digital payment system for all health programs by Ministries of Health.
3 Headlines: What’s Going Well?

1. **Mobile money is an effective mode of payment.**

Both male and female vaccinators report near perfect access to a mobile phone and a mobile money account (p 9).

Further, vaccinators across all levels of education, ages, and employment statuses report similar access and ability to carry out mobile money transactions.

2. **Positive experience with cashing out payments suggests that mobile money is a convenient mode of payment.**

Most male and female vaccinators report that they are confident in being able to cash out payments and never or rarely need help in conducting mobile money transactions (p 16).

8 in 10 vaccinators reported that a mobile money agent is less than 30 minutes away from them. Also, nearly all vaccinators said they had successfully cashed out their payment and faced no challenges in cashing out their payments (p 17).

This speaks to the ease of cashing out payments received via mobile money.

3. **8 in 10 vaccinators say they prefer to be paid by mobile money.**

When asked to explain their preference, the top three reasons shared by vaccinators were 1) security of a mobile money transaction, 2) convenience, and 3) speed of receiving funds (p 21).
3 Headlines: Areas for Improvement

1. Payment delays may be hampering vaccinators’ payment experience.

We observed that vaccinators’ payment experience is linked to the timeliness of payments. 2 in 10 vaccinators rated their payment experience as ‘poor’ or ‘very poor’. On average it took a week longer for them to receive payments as compared to those who reported having a ‘good’ or ‘very good’ payment experience.

Timely payments was cited as a top reason for those with positive payment experience and unsurprisingly, delay in payments was one of top two reasons for unsatisfactory experience. (p. 18 and 19).

For discussion: Explore what drives payment delays and how to minimize them.

2. Time spent on cashing out payments may depend on vaccinators’ network provider.

We observed that vaccinators’ mobile network provider plays a role in time taken to travel to the nearest mobile money agent and in cashing out payments. On average, MTN users reported spending more time for travel and cashing out payments as compared to Orange users (p. 17).

This may be because of a difference in number of points of service for mobile money agencies and distributors.

An idea: Communicate to vaccinators that their payment experience may differ based on their network provider. When selecting providers, they could look at agent locations to ensure good coverage and have the option to choose what’s most convenient for them.

3. Vaccinators need more information about the amount and timing of their payment.

While vaccinators display high morale and satisfaction with nearly all aspects of the job (p. 22 and 23), there is room for improving how they experience payments—amount and timeliness.

For both rounds of campaign, 4 in 10 vaccinators were unable to share their payment expectations. Also, 4 in 10 vaccinators reported dissatisfaction with their salary. This was also the top reason cited by those who had a ‘fair’ or ‘poor’ payment experience (p. 19).

Food for thought: Could setting and managing vaccinators’ expectations around payments improve their payment experience and satisfaction with the salary?
Vaccinator Voices

We loved hearing from vaccinators who participated in the Polio campaigns in Côte d’Ivoire in the months of September and October. Here are some voices that stood out.

Payment Experience

Vaccinators shared what made their campaign experience good (60%), fair (23%), or poor (17%).

Good Payment Experience

“I find that we didn’t have to fill out a lot of paperwork to get our pay, and it was easy.”

“After the first round, we were just asked to give our mobile money number in order to receive our money. And it wasn’t complicated in my opinion.”

“I heard some people complaining that their payments were taking too long to get processed, but I received mine fairly quickly.”

Fair or Poor Payment Experience

“The campaign finished, and we had to wait over a week for a payment. It took long, but we nonetheless received it; That’s the only reason I cannot rate the experience as being ‘poor’.”

“It took a long time because they did not want to process payments on our Orange Money. So, I received the payment almost two weeks after the end of the first round.”

“Most of us got the money when we expected it, but my sister is still waiting for hers.”

Overall Comments on Campaign Work

At the end of the survey, 38% vaccinators shared specific comments on their campaign work experience

“The work we do is a good thing. We were discouraged by the delay in payment. If we were paid on time, we would have been motivated to do more; a lot of people get discouraged because payments take too long.”

“They should tell us how much [payment] to expect before we begin the campaign, maybe pay us bit by bit.”

“If the projects are common, it will help us a lot because we are unemployed, and that makes us very tired.”

“When we go work in people’s farms, we get 3,000 a day plus they feed us. That option is then better than working as a vaccinator because we get 3,000 a day but we have to feed ourselves, we have to buy water on the road, we walk long distances.”

“I’m a community health agent, it would be nice to have motorcycles or bikes to go around to assist people, instead of walking.”

“Some parents refuse the campaign because they said their children become sick after the vaccination.”
Data Collection Approach

We spoke to 380+ vaccinators from all 113 districts of Côte d’Ivoire.

Data Collection Set-Up

- In its preparation for the polio campaign, WHO and the Ministry of Health worked with Dimagi to develop a digital campaign worker registry. All campaign workers were enrolled in the system in a month.

- The Ministry of Health in Abidjan was unable to share vaccinator contact information with third parties, including 60 Decibels. Our team created a workaround that eliminated the need for contact sharing.

- We mobilized a team of six trained enumerators who worked out of the premises of the Ministry in Abidjan. They had offline access to vaccinators’ contact information. These records and were destroyed after data collection.

Sampling

- Stratified random sampling was done to ensure that our final sample consisted of vaccinators from all 113 districts.

- We selected a random subset of 2500 vaccinators from a pool of 21,300+ vaccinators.

- We attempted to survey 514 vaccinators, of which we successfully spoke to 382 vaccinators.

- We surveyed those who had participated in either Round 1 (September 18 – 21), Round 2 (October 9-12), or both rounds of the campaign.

- For most districts, we spoke to at least 2 vaccinators.

Summary of data collected

- Survey Mode: Phone
- Country: Côte d’Ivoire
- Language: French
- Dates: December 1–18, 2020
- Sample Size: 382
- Response Rate: 74%
- Wrong Numbers: 0%
- Unwilling to be Interviewed: 0%
We want to be helped financially, I’m not alone. I, along with my sisters, don’t have work.

Key Questions We Set Out to Answer

Who Are The Vaccinators?
- Vaccinator Profile: Demographics & Mobile Money Access
- Vaccinator Profile: External Work

Campaign Experience
- COVID-19 Concern During Campaign
- Vaccinator Training & Participation
- Time Spent On Campaign Activities

Payments For Vaccinators
- Mobile Money Experience
- Experience With Cashing Out Payments
- Payment Experience

Vaccinator Preference and Perceptions
- Preference for Mobile Money
- Perception of Campaign Work
- Vaccinator’s Satisfaction with Work
Vaccinator Profile: Demographics & Mobile Money Access

The high rate of vaccinators who have access to mobile money indicates that mobile money is widely available in Côte d'Ivoire and could be a highly effective mode of payments.

Male and female vaccinators are equally likely to have a mobile phone registered on their names as well as access to mobile money.

Nearly all vaccinators have a phone registered in their name and access to a mobile money account. Two-thirds were male and one-third were female.

<table>
<thead>
<tr>
<th>About the Vaccinators We Spoke With</th>
<th>Age</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Tertiary (university or polytechnic)</td>
</tr>
<tr>
<td>99% Have a phone registered on their name</td>
<td>65</td>
<td>Eldest</td>
</tr>
<tr>
<td>100% Have access to mobile money</td>
<td>36</td>
<td>Average</td>
</tr>
<tr>
<td>67% Have MTN as their network provider</td>
<td>18</td>
<td>Youngest</td>
</tr>
<tr>
<td>32% Female Vaccinators</td>
<td>36</td>
<td></td>
</tr>
<tr>
<td>6.6 Average household size</td>
<td>36</td>
<td></td>
</tr>
</tbody>
</table>
Vaccinator Profile: External Work

Among male vaccinators, farming was the most reported work activity, while females were more likely to report being health workers.

Vaccinators with no or only primary school education were more likely to work in farming (46%) and less likely to work as health workers (29%).

7 in 10 vaccinators reported working for pay outside of their campaign duties, with fewer female vaccinators working for pay compared to males.

Participation in Paid Work Outside the Campaign
Q: Aside from contributing to vaccination efforts, do you do any other kind of work for pay? (n = 382)

- Yes: 40%
- No: 25%

Job Activities of Vaccinators Outside the Campaign
Q: What kind of a job or activity is it?: (n = 267)

- Farming: 42% Male, 4% Female
- Community health worker: 26% Male, 27% Female
- Self employed: 15% Male, 25% Female
- Health worker - government facility: 4% Male, 4% Female
- Health worker - private facility: 11% Male, 4% Female
- Wage employment - salaried: 3% Male, 1% Female
- Wage employment - daily wage: 3% Male, 3% Female
- Other: 3% Male, 3% Female
Key Questions We Set Out to Answer

"I have enjoyed working in this campaign. In our district, the work went well."

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- Vaccinator Profile: External Work

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- Perception of Campaign Work
- Vaccinator’s Satisfaction with Work
COVID-19 Concern During Campaign

Female vaccinators were slightly less likely to be concerned about contracting the virus compared to their male counterparts.

4 in 10 vaccinators report being concerned about contracting COVID-19 during the campaign, and nearly all report wearing a mask always or most of the time.

**Concern About COVID-19**
Q: Were you concerned about contracting COVID-19 while doing vaccination? (n=382)

- Male:
  - No, not at all: 40%
  - No, not really: 14%
  - Yes, slightly: 12%
  - Yes, very much: 24%

- Female:
  - No, not at all: 52%
  - No, not really: 12%
  - Yes, slightly: 24%
  - Yes, very much: 22%

**Usage of Face Masks During Campaign**
Q: How often did you wear a mask during the campaign? (n=382)

- Always: 93%
- Most of the time: 6%
- Never: 1%
Nearly all vaccinators attended at least 1 day of training, and report perfect attendance on the campaign days. Only 5 in 382 answer incorrectly when asked how they administered the vaccine.

**Vaccinator Training Attendance**

Q: How many days of training did you attend during the polio vaccination campaign? (n = 382)

- 1 day: 63%
- 2 days: 25%
- 3 days: 6%
- 4 days: 5%
- 5 days: 1%

**Vaccinator Campaign Attendance**

Q: Over the course of the campaign, were there any days that you were scheduled to work but you were not able to work? (n = 382)

- No: 98%
- Yes: 2%

**Method of Vaccination**

Q: How did you administer the polio vaccine? (n = 382)

- Putting two drops of vaccine into the child’s mouth: 99%
- Other (three drops, tablets): 1%
Time Spent On Campaign Activities

Both male and female vaccinators typically worked for 11 hours per day, spending 6 hours on average administering the vaccine.

Number of Hours Spent on Campaign Work by Activity

Q: On a typical day at work, during the campaign, how many hours of this time did you spend on each of the following activities? (n=382)

- **Traveling to work**
- **Receiving supervision or training**
- **Attempting to deliver the vaccine**
- **Documenting work**
- **Break**
- **Total Time Spent on Campaign Work**

Key: Time Use

Note: Ranges represent the 10th to 90th percentile

- **Average Time Spent on Activity**
- **Range of Time Spent on Activity**
- **Range of Total Time Spent on a Typical Day of Campaign Work**

(sum of time spent on all activities)
Given the difficulties linked to the job, I think the salary should be increased. We visit so many places as we do the campaign.
Most vaccinators report independently using mobile money. Payment cash-out confidence is lower among those with higher concern about contracting COVID-19.

**Independence in Using Mobile Money**
Q: When you use your mobile money account, how often do you ask someone else for help? (n = 381)

- Never: 72%
- Rarely: 19%
- Sometimes: 5%
- Always: 4%

**Confidence in Cashing Out Payments When Needed**
Q: Imagine you needed to get cash out of your mobile money account. How confident are you that you can get all the cash in your account when you need it? (n = 381)

- Very confident: 64%
- Somewhat confident: 29%
- Not very confident: 6%
- Not at all confident: 6%
Experience With Cashing Out Payments

6 in 10 vaccinators took 30 minutes or less to cash out their payment. Nearly all vaccinators who got paid reported no challenges in cashing out their payments.

Vaccinators could choose either MTN or Orange as their mobile money provider.

MTN users were more likely than Orange users to report taking over an hour to travel to the nearest mobile money agent (23% vs. 6%) and cash out payments (25% vs. 8%).

Time taken to travel to the nearest mobile money agent and cashing out payments also varied by districts, likely due to varying presence of mobile money agents by district.

99% of vaccinators reported facing no challenge in cashing out their payments.

No meaningful difference in payment cash-out experience by gender.

Time Taken to Travel to Mobile Money Agent
Q: How long does it take you to travel to your nearest mobile money agent, in minutes? (n = 379)

Time Taken to Cash Out Mobile Money Payment
Q: How long did it take you to travel to a mobile money agent and cash out your payment? n = 365
Payment Experience (1/2)

Time taken for vaccinators to receive payments ranged from as fast as 1 day to 94 days since campaign end. On average it took a week longer for those reporting a ‘poor’ or ‘very poor’ payment experience to receive payments.

On average, vaccinators who report a positive payment experience also report receiving their payments in fewer days.

Payment Experience Rating and Median Days Taken to Receive Payment

Q: For each payment that you have received, I am going to ask you to list when you were paid. (n = 351 for Round 1; n = 334 for Round 2)
Q: Overall, how was your payment experience during the [first / second] round of the campaign? (n = 351 for Round 1; n = 334 for Round 2)

Note: This graph presents averages of Payment Experience rating and time taken to receive payment across both rounds.

No meaningful difference in payment experience by gender.
Payment Experience (2/2)

Qualitative evidence also suggests that timely payments drive positive payment experience among vaccinators.

Payment Experience: Top Reasons

Q: Please explain your answer. (Open ended, coded by 60 Decibels, n = 351 for Round 1; n = 334 for Round 2)

<table>
<thead>
<tr>
<th>Reason</th>
<th>'Very good' or 'Good' payment experience</th>
<th>'Fair', 'Poor' or 'Very poor' payment experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>Timely payment</td>
<td>28%</td>
<td>19%</td>
</tr>
<tr>
<td>Good mode of payment</td>
<td>25%</td>
<td>10%</td>
</tr>
<tr>
<td>No challenges in payment process</td>
<td>12%</td>
<td>6%</td>
</tr>
<tr>
<td>Satisfactory salary</td>
<td>6%</td>
<td>2%</td>
</tr>
<tr>
<td>Unsatisfactory salary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Delay in payment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improve communication about payment timelines</td>
<td>2%</td>
<td></td>
</tr>
</tbody>
</table>

No meaningful difference in payment experience by gender.

Note: Payment delays are often not the result of mobile payments but internal payment approval and processing.
Key Questions We Set Out to Answer

Who Are The Vaccinators?
  • Vaccinator Profile: Demographics & Mobile Money Access
  • Vaccinator Profile: External Work

Campaign Experience
  • COVID-19 Concern During Campaign
  • Vaccinator Training & Participation
  • Time Spent On Campaign Activities

Payments For Vaccinators
  • Mobile Money Experience
  • Experience With Cashing Out Payments
  • Payment Experience

Vaccinator Preference and Perceptions
  • Preference for Mobile Money
  • Perception of Campaign Work
  • Vaccinator’s Satisfaction with Work

“I wish they would continue to pay us by mobile money, because it suits us. I also thank them for this survey.”
Preference for Mobile Money

8 in 10 vaccinators preferred mobile money as a mode of payment, citing security, speed and convenience as top reasons for their preference.

Vaccinators' preference for mobile money over cash was not significantly determined by their level of education, gender, or employment status. This underscores that mobile money is an inclusive mode of payment.

No meaningful difference in mobile money preference by gender.

*This question was not asked to vaccinators who had not received any payments at the time that they were surveyed.
Perception of Campaign Work

Vaccinators who ‘strongly’ agreed with these statements were more likely to report working longer hours on the campaign.

Vaccinators have a highly positive perception of their role in the campaign and feel adequately supported to play their part.

Vaccinators’ Perception of Work

Q: To what extent do you agree or disagree with the following statements, with respect to your job as a vaccination campaign worker? (n = 382)

- "I do this job because I personally consider it important" 80% 19%
- "These days I feel motivated to work as hard as I can" 82% 17%
- "During this vaccination campaign, I always had the training, materials, supplies and support from supervisors that I needed" 86% 12%

No meaningful difference in perception of work by gender.
Vaccinators’ Satisfaction With Work

Overall, more than 8 in 10 were satisfied with their level of safety and respect in the community, and 4 in 10 were satisfied with the salary they received for campaign work.

Vaccinator Satisfaction with Salary, Sense of Safety and Level of Respect in Community

Q: I am going to read to you a series of statements about your level of satisfaction with various aspects of your current job. For each of these aspects, please tell me whether you are (n = 382)

- Your salary
  - Very satisfied: 39%
  - Satisfied: 16%
  - Neutral: 36%
  - Unsatisfied: 6%
  - Very unsatisfied: 6%

- Safety and security in the community
  - Very satisfied: 10%
  - Satisfied: 77%
  - Neutral: 8%
  - Unsatisfied: 6%

- Your level of respect in the community in your role as a vaccinator
  - Very satisfied: 18%
  - Satisfied: 65%
  - Neutral: 12%
Appendix
# Gender & Mobile Money Experience

<table>
<thead>
<tr>
<th></th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Access</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have access to a mobile phone</td>
<td>99%</td>
<td>99%</td>
</tr>
<tr>
<td>Have a mobile money account</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Have used mobile money in the last 30 days</td>
<td>99%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Comfort with using mobile money independently</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Never need help</td>
<td>73%</td>
<td>71%</td>
</tr>
<tr>
<td>Rarely need help</td>
<td>20%</td>
<td>16%</td>
</tr>
<tr>
<td>Sometimes need help</td>
<td>4%</td>
<td>7%</td>
</tr>
<tr>
<td>Always need help</td>
<td>3%</td>
<td>6%</td>
</tr>
<tr>
<td><strong>Confidence in cashing out payments independently</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very confident</td>
<td>63%</td>
<td>66%</td>
</tr>
<tr>
<td>Somewhat confident</td>
<td>30%</td>
<td>26%</td>
</tr>
<tr>
<td>Not very confident</td>
<td>6%</td>
<td>6%</td>
</tr>
<tr>
<td>Not at all confident</td>
<td>1%</td>
<td>2%</td>
</tr>
<tr>
<td><strong>Experience with cashing Out payments</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time taken to travel to nearest mobile money agent (minutes)</td>
<td>27 min</td>
<td>23 min</td>
</tr>
<tr>
<td>Less than 30 minutes on cashing out payments</td>
<td>58%</td>
<td>68%</td>
</tr>
<tr>
<td>No challenges experienced in cashing out payment</td>
<td>99%</td>
<td>100%</td>
</tr>
<tr>
<td>Preferred mobile money for payment</td>
<td>84%</td>
<td>80%</td>
</tr>
<tr>
<td>Prefer cash payment</td>
<td>9%</td>
<td>14%</td>
</tr>
</tbody>
</table>
## Time Spent On Campaign Activities

<table>
<thead>
<tr>
<th>Gender</th>
<th>Sample Size</th>
<th>Traveling to work</th>
<th>Receiving training</th>
<th>Attempting to deliver vaccine</th>
<th>Documenting work</th>
<th>Break</th>
<th>Total time spent on campaign work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>260</td>
<td>0.59</td>
<td>2.60</td>
<td>5.64</td>
<td>1.00</td>
<td>1.15</td>
<td>11.2</td>
</tr>
<tr>
<td>Female</td>
<td>122</td>
<td>0.54</td>
<td>2.26</td>
<td>6.29</td>
<td>0.87</td>
<td>1.21</td>
<td>10.9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level of concern about contracting COVID-19</th>
<th>Sample Size</th>
<th>Traveling to work</th>
<th>Receiving training</th>
<th>Attempting to deliver vaccine</th>
<th>Documenting work</th>
<th>Break</th>
<th>Total time spent on campaign work</th>
</tr>
</thead>
<tbody>
<tr>
<td>‘No, not at all’ concerned</td>
<td>168</td>
<td>0.58</td>
<td>2.31</td>
<td>6.33</td>
<td>0.71</td>
<td>1.30</td>
<td>11.2</td>
</tr>
<tr>
<td>‘No, not really’ concerned</td>
<td>51</td>
<td>0.44</td>
<td>2.68</td>
<td>7.78</td>
<td>0.70</td>
<td>1.13</td>
<td>12.8</td>
</tr>
<tr>
<td>‘Yes, slightly’ concerned</td>
<td>76</td>
<td>0.60</td>
<td>2.27</td>
<td>6.81</td>
<td>0.63</td>
<td>1.26</td>
<td>12.0</td>
</tr>
<tr>
<td>‘Yes, very much’ concerned</td>
<td>87</td>
<td>0.53</td>
<td>2.39</td>
<td>3.97</td>
<td>1.70</td>
<td>0.95</td>
<td>9.5</td>
</tr>
</tbody>
</table>
# Vaccinators’ Satisfaction With Work (1/2)

<table>
<thead>
<tr>
<th>Sample Size</th>
<th>Very satisfied</th>
<th>Satisfied</th>
<th>Neutral</th>
<th>Unsatisfied</th>
<th>Very unsatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average age (years)</td>
<td>374</td>
<td>32.2</td>
<td>34.9</td>
<td>35.3</td>
<td>36.9</td>
</tr>
<tr>
<td>Average household size</td>
<td>382</td>
<td>4.25</td>
<td>6.26</td>
<td>6.83</td>
<td>7.01</td>
</tr>
<tr>
<td><strong>Round 1 Payment Experience</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very Good</td>
<td>70</td>
<td>5.7%</td>
<td>42.9%</td>
<td>5.7%</td>
<td>27.1%</td>
</tr>
<tr>
<td>Good</td>
<td>143</td>
<td>2.8%</td>
<td>52.4%</td>
<td>9.8%</td>
<td>32.2%</td>
</tr>
<tr>
<td>Fair</td>
<td>75</td>
<td>4.0%</td>
<td>28.0%</td>
<td>24.0%</td>
<td>41.3%</td>
</tr>
<tr>
<td>Poor</td>
<td>45</td>
<td>0.0%</td>
<td>20.0%</td>
<td>20.0%</td>
<td>57.8%</td>
</tr>
<tr>
<td>Very Poor</td>
<td>18</td>
<td>0.0%</td>
<td>27.8%</td>
<td>16.7%</td>
<td>38.9%</td>
</tr>
<tr>
<td><strong>Round 2 Payment Experience</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Very Good</td>
<td>61</td>
<td>6.6%</td>
<td>44.3%</td>
<td>6.6%</td>
<td>27.9%</td>
</tr>
<tr>
<td>Good</td>
<td>137</td>
<td>3.6%</td>
<td>51.1%</td>
<td>8.8%</td>
<td>33.6%</td>
</tr>
<tr>
<td>Fair</td>
<td>80</td>
<td>3.8%</td>
<td>25.0%</td>
<td>27.5%</td>
<td>40.0%</td>
</tr>
<tr>
<td>Poor</td>
<td>31</td>
<td>0.0%</td>
<td>19.4%</td>
<td>19.4%</td>
<td>58.1%</td>
</tr>
<tr>
<td>Very Poor</td>
<td>25</td>
<td>0.0%</td>
<td>48.0%</td>
<td>0.0%</td>
<td>40.0%</td>
</tr>
</tbody>
</table>
## Vaccinators’ Satisfaction With Work (2/2)

<table>
<thead>
<tr>
<th>Sample Size</th>
<th>&quot;Safety and Security in the community&quot;</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very satisfied</td>
<td>Satisfied</td>
<td>Neutral</td>
<td>Unsatisfied</td>
<td>Very unsatisfied</td>
</tr>
<tr>
<td>Total Hours worked</td>
<td>382</td>
<td>12.2</td>
<td>11.1</td>
<td>10.9</td>
<td>10.4</td>
</tr>
<tr>
<td>Hours spent administering the vaccine</td>
<td>382</td>
<td>7.8</td>
<td>6.0</td>
<td>5.6</td>
<td>5.2</td>
</tr>
<tr>
<td>Hours spent documenting work</td>
<td>382</td>
<td>0.6</td>
<td>0.9</td>
<td>1.4</td>
<td>0.7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Sample Size</th>
<th>&quot;Level of respect in the community in your role as a vaccinator&quot;</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Very satisfied</td>
<td>Satisfied</td>
<td>Neutral</td>
<td>Unsatisfied</td>
<td>Very unsatisfied</td>
</tr>
<tr>
<td>Total Hours worked</td>
<td>382</td>
<td>12.2</td>
<td>11.1</td>
<td>9.9</td>
<td>11.0</td>
</tr>
<tr>
<td>Hours spent administering the vaccine</td>
<td>382</td>
<td>8.0</td>
<td>6.0</td>
<td>4.0</td>
<td>6.3</td>
</tr>
<tr>
<td>Hours spent documenting work</td>
<td>382</td>
<td>0.5</td>
<td>0.9</td>
<td>1.6</td>
<td>0.6</td>
</tr>
</tbody>
</table>
Summary of Data Collected

382 phone interviews completed in December 2020

**Methodology**
- **Survey mode**: Phone
- **Country**: Côte d'Ivoire
- **Language**: French
- **Dates**: December 1–18, 2020

**Sampling**
Random sample of 2500 vaccinators selected from 21,300+ vaccinators. Of these, 514 vaccinators were attempted to be surveyed, of which 382 were successfully surveyed.

**Response rate**: 74%

**Accuracy**
- **Confidence Level**: c. 95%
- **Margin of error**: c. 5%

**Responses Collected**
- **Vaccinators**: 382
About 60 Decibels

60 Decibels is a global, tech-enabled impact measurement company that brings speed and repeatability to social impact measurement and customer insights. We provide genuine benchmarks of impact performance, enabling organizations to understand impact relative to peers and set performance targets.

We make it easy to listen to the people who matter most by combining voice, SMS, and other technologies to collect data remotely with proprietary survey tools. We have a network of 750+ researchers in 50+ countries, and have worked with more than 350 of the world’s leading impact investors, companies, foundations, corporations, NGOs, and public sector organizations.

60 Decibels has offices in London, Nairobi, New York, and Bengaluru. To learn more, visit 60decibels.com.

We are proud to be a Climate Positive company.

Acknowledgements

Thank you to the WHO Digital Finance Team, the Ministry of Health Republic of Liberia, Harvard School of Public Health, Dimagi, The Bill and Melinda Gates Foundation, and The Solina Group for supporting this work.
We need more help sensitizing parents to the importance of getting children vaccinated.

I am happy with the work I do for the vaccination campaigns.

> I do it whenever I am free

> I do it for the children

> It’s important.

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