

A66053 - Scale up of female genital mutilation prevention and care services in primary care in Guinea and Kenya - CONTEXT ASSESSMENT CHECKLIST (CHK)

IDENTIFICATION



World Health Organization

[Click here to upload file. \(< 5MB\)](#)

You are being asked to participate in Scale up of female genital mutilation prevention and care services in primary care study in Guinea and Kenya.

Centre ID *

- 2235 = Centre for Research in Reproductive Health – Guinea
- 2028 = University of Nairobi College of Health Sciences – Kenya

Region/County *

Facility ID *

Type of visit *

- 0 = Baseline
- 2 = Nine Months

FACILITY FUNCTIONALITY

1. Number of health care providers in the health facility:

1a. All health care providers

(specify number)

1b. Health providers in ANC and immunization

(specify number)

2. Average number of clients per month in the last quarter:

2a. In ANC

(specify number)

2b. In immunization

(specify number)

3. Number of mentorship and supportive visits to the health facility in the past 6 months

(specify number)

4. What is the size of the population served by this facility?

(specify number)

5. Number of community outreaches conducted in the past 6 months

(specify number)

6. My facility has enough health workers with the right training and skills to do everything that needs to be done in terms of providing FGM prevention and management of FGM-related complications *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

7. My facility has enough space to provide health care services related to FGM prevention and care *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

8. My facility has enough medicine to provide FGM-related health care services *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

9. My facility has enough functional equipment to provide FGM-related health care services *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

10. My facility has enough disposable medical equipment, such as syringes, gloves, and needles to provide FGM-related health care services *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

11. In my facility, we listen to what community members think about the health care services we provide *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

12. In my facility, we have meetings with community members to discuss health matters *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

13. In my facility, we encourage other organizations to contribute to improving the health of the community *

- 1 = Strongly disagree 2 = Disagree 3 = Neither agree nor disagree
 4 = Agree 5 = Strongly agree

14. My facility regularly uses information/data to make plans for improving its health care service delivery *

- 1 = Strongly disagree
 2 = Disagree
 3 = Neither agree nor disagree
 4 = Agree
 5 = Strongly agree

15. My health facility works for the good of the clients and puts their needs first *

- 1 = Strongly disagree
 2 = Disagree
 3 = Neither agree nor disagree
 4 = Agree
 5 = Strongly agree

16. Members of the health facility feel personally responsible for improving the health care services *

- 1 = Strongly disagree
 2 = Disagree
 3 = Neither agree nor disagree
 4 = Agree
 5 = Strongly agree

17. Members of the health facility approach clients with respect *

- 1 = Strongly disagree
 2 = Disagree
 3 = Neither agree nor disagree
 4 = Agree
 5 = Strongly agree

COMMENTS

Comments

Data Collector name *