Case scenario 1:

A young mother accompanies her 2-year-old child 3 km by foot to the nearest MDA distribution site. She joins the long queue trying her best to soothe her child who is tired and hungry from the long journey. When she approaches the CDD, her child refuses the medication, kicking and screaming. The CDD impatiently asks her to step aside to calm the child and he moves on to the next person. Mother protests saying that she has been standing in line for a while and demands that the CDD just give her the medication to administer to the child herself.

Skills: Conflict management, Communication, Negotiation

The scenario described above represents one of the problems frequently faced by CDD and mothers of children in a health structure with limited resources in terms of personnel that often have increased workload and limited time.

In order to mitigate these problems:

1. **Supervisors should take action by:**
   - Training CDDs on good patient reception practices
   - Advocate for increasing the number of CDDs to reduce the workload on CDDs
   - Intervene as a mediator in case of conflict between a CDD and the child's mother

2. **Responsibility for CDDs**
   - Take advantage of community gatherings to reinforce drug safety messages before the days of administration of the drugs
   - Welcome the child's mother and talk to her to explain how to take the medication
   - Consider using aides like a small chain or colorful object to disarm the child; They may cry out of fear of pain from receiving an injection or vaccine

3. **Children's mothers:**
   - Generally, mothers are open to receiving information related to the well-being of their children, first try to explain the drug safety protocol.
   - Reinforce these 3 messages to mothers: how to prepare the child when the CDD approaches, how to hold the child during the administration of the medication and how to calm the child afterwards.
Case scenario 2:

The community headman approaches a Community Drug Distributor (CDD) during mass drug administration. He notices the numerous boxes of pills and pulls the attending CDD aside, asking him for three doses of medication to take home and give to his children. He figures that since the drugs are plentiful, there would be no harm in sparing just three pills.

In this scenario, it is CDD’s duty to communicate well and to understand their responsibility:

- The CDD should emphasize that the number of drugs available is well in account to cover exactly the mass of the population he will receive. If a few doses are lacking, they will not be able to administer the dose of the medication to all children.
- They should also inform the headman that only CDDs are trained to administer doses to children.
- The CDD in turn will have to use a clear communication language while avoiding frustrating him, explain to this community headman why he cannot give him these doses.
- The CDD should take ownership and responsibility for the community and their duty as a Community Drug Distributor.
- The CDD should decide whether it is important to administer doses or propose to bring all these children at another time.

Skills: Communication, Leadership

Case scenario 3

CDD is being reprimanded by his or her supervisor for not achieving a high enough drug coverage, especially among young children, yet the CDD is simply “following the new guidelines” that encourage CDDs not to force medication upon children who resist taking it.

For CDD:  
CDDs are well experienced and integral to the drug administering process, please reinforce the importance of their roles by:

- Drawing on key points from previous communication and leadership skills training
- Acknowledge and praise where due
- Highlighting new guidelines that emphasize both safety and high coverage are part of high-quality programs.

Supervisor of the CDD:
- Avoid reprimanding the CDD and consider the option of resuming CDD training on the new guideline.
- Reinforce key messages and skills for CDDs in dealing with children who refuse to take the medicine.
- Advise CDD on the need to involve children's mothers during administration because they know their children well and know best how to calm them down.

**For children of school age:**
- Refusing to take the medicine is less often a problem for school-age children, and risk of choking is less than for younger children.
- They generally obey and stop resisting if a family member who is influential is present during the administration of doses. (This person can be an elder sibling or a father).
- The CDD should reassure children but not force them to take the doses.

**For children who continue to receive breastmilk:**
- The CDD should use the child's mother and involve her in all the process of administering the doses. If the child continues to cry, allow the mother time to breastfeed and cradle the child until they are calm before administering the medication.

**Skills: Resilience, Agency**

**Case scenario 4**

A man and his 5-year old child approach the CDD who is giving Zithromax® for trachoma. CDD begins to prepare Zithromax® oral solution for the child when another CDD asserts that “this boy is big enough for a tablet.” The boy’s father interjects saying that his child is a big boy and that POS is only for babies and small children.

In this scenario, the CDD has been confronted by his colleague in front of the father of the child, creating a conflict between following the safety guidelines and publicly overriding both the CDD’s colleague and the boy’s father. This can also exacerbate a child’s fear of receiving the doses. The following decisions should be considered:

- The CDD’s colleague’s attitude suggests that additional training may be needed on the new dosing guidelines.
- Do not administer the dose and avoid exchanging with the co-worker in front of the child's father so as not to give an impression that the two CDDs contradict each other.
- Ask to withdraw with the colleague to discuss the administration protocol after attending to the others’ needs.
- Reassure the child's father that a decision will be made for his child.
• The CDD supervisor is well experienced and can support the CDD in what decision to take in the face of similar cases.

Skills: Decision making, Discernment, judgement