Country	Geographic area selection	Timing RCM vis-a-vis BCU roll-out	Data collectors (number)	Duration (number days)	Method collection
Burkina Faso	13 regions, 70 districts and in all 2510 public healthcare facilities across Burkina Faso	During a PIRI: RCM conducted in remaining 4 days of a 7-day PIRI	338 (6 WHO supervisors, 280 district supervisors and 52 regional supervisors)	4 days	Digital (ODK)
Cameroon	10 regions and 38 health districts, with a facility component that included 76 health facilities	Completion of 3 consecutive BCU PIRI rounds	76	5 days	Digital (ODK)
Democratic Republic of Congo	2 provinces and used a performance-stratified design: within each province, "*antennes*" were identified and health zones were classified using administrative catch-up data from PIRI round 1 for zero-dose children >12 months missing Penta1 (high ≥80%, moderate 50–79%, low <50%); zones representing each stratum were selected, and within selected zones, 2 health areas per zone were chosen to reflect easier vs harder accessibility	Completion of 2 consecutive BCU PIRI rounds	24 (12 in charges, 12 CHWs)	8 days	Digital (KoboCollect)
Gambia	All 7 regions and 41 districts were surveyed in Western Health Region 1 based on administrative data indicating low coverage, and higher numbers of un-/under-vaccinated children.	Conducted in areas where vaccination had been implemented during the campaign days	120	6 days	Digital (ODK)
Guinea	12 of 38 health districts were selected from eight regions	During a Vitamin A supplementary immunization campaign in the remaining 4 days of the 7-day SIA	12	4 days	Digital (ODK)
Mali	4 regions (Koulikoro, Sikasso, Ségou, Mopti) and 8 health districts	After the last round of PIRI (the country conducted 5 rounds of PIRI: 2 in 2024 and 3 in 2025)	4	8 days	Digital (KoboCollect)
South Sudan	26 counties in six states and three administrative areas, using a multi-stage approach within counties (selection of payams and bomas/settlements) and a standardized household workload per administrative unit	Conducted in November 2025 following completion of two sub-national BCU/PIRI rounds (April/May and June/July 2025), to identify gaps and inform planning for the third round	26 (one enumerator supported by one local guide per county)	4–5 days	Digital (ODK)
Tajikistan	13 high-priority districts, with 52 micro-areas selected based on evidence of zero-dose clustering, inconsistent administrative coverage, urban poor settlements, remote and mountainous areas, migrant/mobile populations, BCU service delivery bottlenecks, and findings from previous rapid monitoring/RCA linked to the 2022–2023 measles outbreak response	Conducted in late 2025 after BCU implementation had started and while catch-up institutionalization was ongoing.	26 district/RCIP field team members plus 5 national supervisors	Planned 5 fieldwork days per district team and 7 supervision days per supervisor	Digital (ODK)

Abbreviations
BCU: Big Catch-Up
CHW: community health worker
PIRI: periodic intensification of routine immunization
ODK: open data kit
RCIP: Tajikistan's Republic Center for Immuno-Prophylaxis