

THE HOUSEHOLD SURVEY FIRM NEEDS TO PRINT EACH QUESTIONNAIRE TO INCLUDE THE ROUND, CLUSTER, HOUSEHOLD, LOCATION AND THE LIST OF CHILDREN UNDER 5 YEARS FOR EACH HOUSEHOLD

CLUSTER¹

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HOUSEHOLD¹

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ROUND¹:

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LOCATION INFORMATION¹

Code

District

Name: _____

Town

Name: _____

Enumeration Area / Census Tract

Household ID Code (from Enumeration List)

Survey Staff

Name

Code

Date

Interviewer

Supervisor

Data

Entry

Data

Validation

Street Address:

Description of how to find household:

GPS Coordinates:

Telephone / Other Contact Information:

Visit

Date:

Time Begun:

Time Ended:

Duration:

Result

1 2 3 4 5 6 7 8

Codes for Result of Visit

Completed Interview.....1
 Incomplete Interview (Explain below.).....2
 Necessary Respondent Not Available (Make appointment.)...3
 Rescheduled Interview (Note next appointment below.).....4
 Nobody Home.....5
 Temporarily Away.....6
 Refused to Participate.....7
 Dwelling Vacated (Nobody lives here.).....8

Observations:

LIST OF CHILDREN UNDER 5¹

(children under five at the time the household questionnaire was administered)

ID CODE

NAME

¹ This information to be printed by the HHS firm for each household.

THE HOUSEHOLD SURVEY NEEDS TO PRINT ONE HEALTH CALENDAR FOR EACH OF THE CHILDREN UNDER 5 YEARS OLD (AS PER THE TABLE ABOVE).

1 Child Health Calendar (ARI, Diarrhea, and HCGI) (1 of 2)

Primary caregiver of children **under 5 years old** (up to, but not after, the child's fifth birthday).

G.1.0 CHILD ID CODE: [] **CHILD NAME:** _____

Now I would like to ask about the health of [NAME] in the last 14 days.

[illegible]

Primary caregiver of children **under 5 years old** (up to, but not after, the child's fifth birthday).

[illegible]

(MODULE 2 CORRESPONDS TO SANITATION QUESTIONS, ONLY APPLICABLE TO TSSM COUNTRIES)

3 Handwashing

Primary caregiver of children **under 5 years old** (up to, but not after, the child's fifth birthday).

3.1. Did you wash your hands with water and soap after the last time you defecated?	3.2a. 👁 INTERVIEWER: PLEASE OBSERVE WHETHER OR NOT THERE IS A HANDWASHING STATION NEAR THE SANITATION FACILITY.	3.2b. 👁 INTERVIEWER: PLEASE OBSERVE WHETHER OR NOT THERE IS WATER FOR THE HANDWASHING STATION.	3.2c. 👁 INTERVIEWER: PLEASE OBSERVE WHETHER OR NOT THERE IS SOAP FOR THE HANDWASHING STATION.	3.3. How many times did you wash your hands yesterday with water?	3.4. How many times did you wash your hands yesterday with water and soap?
Yes 1 No 2	Yes 1 No 2 [>3.3.]	Yes 1 No 2	Yes 1 No 2	Number of times (in two digits) Never 0 Don't know -99	Number of times (in two digits) Never 0 Don't know -99
1 2	1 2	1 2	1 2	[][] 0 -99	[][] 0 -99

4 Behavior Change

4.1. Es importante colocar el jabón en las zonas de lavado de manos en la escuela (esquina saludable, servicios higiénicos).	4.2. El lavado de manos con jabón debe realizarse inmediatamente antes de cocinar y comer.	4.3. El lavado de manos con jabón debe realizarse inmediatamente después de ir al baño.	4.4. Tú sólo necesitas lavarte las manos con jabón si se ven sucias o huelen mal.
STRONGLY DISAGREE1 DISAGREE2 AGREE3 STRONGLY AGREE4 DON'T KNOW-99	STRONGLY DISAGREE1 DISAGREE2 AGREE3 STRONGLY AGREE4 DON'T KNOW-99	STRONGLY DISAGREE1 DISAGREE2 AGREE3 STRONGLY AGREE4 DON'T KNOW-99	STRONGLY DISAGREE1 DISAGREE2 AGREE3 STRONGLY AGREE4 DON'T KNOW-99
1 2 3 4 -99	1 2 3 4 -99	1 2 3 4 -99	1 2 3 4 -99