

**Nutrition Survey Questionnaires November 2018**

**UNHCR Standardized Expanded Nutrition Survey (SENS) Questionnaire  
Kakuma Nutrition Survey, November 2018**

**Greeting and reading of rights:**

This statement is to be read to the head of the household or, if they are absent, another adult member of the house before the interview. Define a household as a group of people who live together and routinely eat out of same pot. Define head of household as member of the family who manages the family resources and is the final decision maker in the house.

Hello, my name is \_\_\_\_\_ and I work with [IRC/KRCS]. We would like to invite your household to participate in a survey that is looking at the nutrition and health status of people living in this camp.

- UNHCR is sponsoring this nutrition survey.
- Taking part in this survey is totally your choice. You can decide to not participate, or if you do participate you can stop taking part in this survey at any time for any reason. If you stop being in this survey, it will not have any negative effects on how you or your household is treated or what aid you receive.
- If you agree to participate, I will ask you some questions about your family and I will also measure the weight and height of all the children in the household who are older than 6 months and younger than 5 years In addition to these assessments, I will test a small amount of blood from the finger of the children and women to see if they have anaemia.
- Before we start to ask you any questions or take any measurements, we will ask you to state your consent on this form. Be assured that any information that you will provide will be kept strictly confidential.
- You can ask me any questions that you have about this survey before you decide to participate or not.
- If you do not understand the information or if your questions were not answered to your satisfaction, do not declare your consent on this form. Thank you.

1A. Kakuma Nutrition Survey, November 2018, Household Questionnaire- FOOD SECURITY: 1 questionnaire per household (This questionnaire is to be administered to the Main Caretaker WHO IS RESPONSIBLE FOR COOKING THE MEALS).

Kakuma 1/2/3/4/ Kalobeyei: \_\_\_\_\_ Zone: \_\_\_\_\_ Block number: \_\_\_\_\_

Date of interview (dd/mm/yyyy)	Cluster Number	Team Number
____/____/2017	____	____
Household Number		
____		

No	QUESTION	ANSWER CODES	
<b>SECTION FS1</b>			
FS1	Consent:	Yes 1 No 2 Absent .....3	
FS2	How many people Belong to this Household?		____
FS3	Does your household have a Bamba Chakula sim card?	Yes 1 No.... 2	If 1 go to FS8 If 2, go to FS7
FS4	Why does your household not have a sim card?	Not given one at registration 1 Lost card 2 Traded card 3 Not registered but eligible 4 Not eligible 5 Other 98	____ <b>GO TO FS 11</b>
FS5	How many days did your food ration last from the October distribution cycle (general ration and Bamba Chakula)?		____ <b>IF ANSWER IS 15 DAYS OR MORE GO TO SECTION FS 2</b>
FS6	What was the main reason the general ration/Bamba Chakula did not last until the end of the month? (for FS5 <31)	Food was sold or exchanged.....1 Shared with kin .2 Ration not big enough, .3 Gave to livestock .4 Lost due to theft.....5 Lost due to poor storage.....6 Challenges with using Bamba Chakula...7 Others.....98	____ <b>IF ANSWER IS 1 GO TO FS 10</b>
FS7	Now I would like to ask about the food items you bought using Bamba Chakula. Did you buy the following food items?	Cereals (maize, wheat, sorghum, rice, spaghetti, pasta).....1 Pulses (peas, beans, lentils) .2 Oil (Vegetable oil etc).3 Sugar .4 Fruits/vegetables.....5 Milk.....6 Meat, fish.....7 Tea.....8 Salt.....9 Eggs.....10 Drinks/juice.....11	
FS8	Which other items did you buy using <i>Bamba Chakula</i> ?		
FS9	In the last month, have you or anyone in your household borrowed cash, food or other items with or without interest? <b>BRW</b>	Yes 1 No 2	____
FS10	In the last month, have you or anyone in your household sold any assets (furniture, seed stocks, tools, other NFI, livestock etc.)? <b>SOLD</b>	Yes 1 No 2	____
FS11	In the last month, have you or anyone in your household requested	Yes 1	

	increased remittances or gifts as compared to normal? <b>ASKMORE</b>	No 2	<input type="checkbox"/>
<b>FS12</b>	In the last month, have you or anyone in your household reduced the quantity and/or frequency of meals? <b>LESSMEAL</b>	Yes 1 No 2	<input type="checkbox"/>
<b>FS13</b>	In the last month, have you or anyone in your household engaged in potentially risky or harmful activities such as: [e.g charcoal burning, cutting trees, cross border smuggling] <b>RISKYACT</b>	Yes 1 No 2	<input type="checkbox"/>
<b>FS14</b>	Do you have one or more children 18 years of age or younger currently living in the household? <b>CHILD</b>	Yes 1 No 2	<input type="checkbox"/> <b>IF ANSWER IS 2 GO TO SECTION FS2</b>
<b>FS15</b>	In the last month, have you or anyone in your household sent your child or children of 18 years of age or younger to work outside the household in order to get cash or in-kind goods or services? <b>CHWORK</b>	Yes 1 No 2 Don't know 8	<input type="checkbox"/>
<b>SECTION FS2</b>			

Now I would like to ask you about the types of foods that you or anyone else in your household ate yesterday during the day and at night. I am interested in whether you or anyone else in your household had the item even if it was combined with other foods.

**READ THE LIST OF FOODS AND DO NOT PROBE. PLACE A ONE IN THE BOX IF ANYONE IN THE HOUSEHOLD ATE THE FOOD IN QUESTION, PLACE A ZERO IN THE BOX IF NO ONE IN THE HOUSEHOLD ATE THE FOOD.**

<b>FS16</b>	<p><b>1. Cereals:</b> Any wheat, corn/maize, sorghum, rice or any foods made from these (e.g. bread, porridge) (<i>bread, porridge, chapatti, anjera/kisra, ugali, mandazi, muffo, walwal, dura, azerif, deguk fina, geme, manyiap, laap, bei tin ciw uji, mchele, mandazi, Dabo, kita, gonfo, baso, kiniche, morot, msere, usafu, Canjeero, Camb uulo, Basto, Baris; rooti, Iyo boorash, sarin, ugali/sor</i>)</p>	1..... <input type="checkbox"/>
	<p><b>2. White roots and tubers:</b> Any green bananas, lotus root, parsnip, plantains, irish potatoes, white yam, white cassava, or other foods made from roots. (<i>maboko, mihogo, virungu, magimboi, barada, muth, moos ceyriin, baradho</i>)</p> <p><b>WHTRT</b></p> <p><b>3A. Vitamin A rich vegetables and tubers:</b> Any carrot, pumpkin, squash, or sweet potato that are orange inside + other locally available vitamin A rich vegetables (e.g. red sweet pepper) (<i>karoot nyiwar, kolom, tacmankuar</i>)</p> <p><b>VITAVEG</b></p> <p><b>3B. Dark green leafy vegetables:</b> Any dark green leafy vegetables, including wild forms + locally available vitamin A rich leaves such as amaranth, arugula, cassava leaves, <i>spinach (Caleen Ambogi/sular, moxogta caleenteeda, cagaaran sida kosta gooman cagaar, sukuma wiki)</i></p> <p><b>GREENVEG</b></p> <p><b>3C. Other vegetables:</b> Any other vegetables (e.g., cabbage, green pepper, tomato, onion, eggplant, zucchini, okra/) <i>vegetables (cabbage, biringanya, avocado, okra, sweetcorn, bandol, batho, tamata, basal, kabash, basbas cagaar ton, Baamiye, barbarooni, nyanyo)</i></p> <p><b>OTHVEG</b></p> <p><b>4A. Vitamin A rich fruits:</b> Any mango (ripe, fresh and dried), cantaloupe melon (ripe), apricot (fresh or dried), ripe papaya, passion fruit (ripe), dried peach, and 100% fruit juice made from A rich fruits (<i>canbo kartay, cambe,, papaya,</i>)</p> <p><b>VITAFRT</b></p> <p><b>4B. Other fruits:</b> Any other fruits such as apple, avocados, banana, coconut flesh, lemon, , including wild fruits and 100% fruit juice made from these (<i>ananas, tufax, afkadho, moos, liin- iwmm</i>)</p>	<p>2.....<input type="checkbox"/></p> <p>3A.....<input type="checkbox"/></p> <p>3B.....<input type="checkbox"/></p> <p>3C.....<input type="checkbox"/></p> <p>4A.....<input type="checkbox"/></p> <p>4B.....<input type="checkbox"/></p>

**OTHFRT**

**5A. Organ meat:** Any liver, kidney, heart or other organ meats or blood-based foods.( *cuany,rujk, rok, piu, ber, kilyo, wadna iwm*)

5A.....|\_|

**ORGMT**

**5B. Flesh meats:** Any beef, goat, lamb, mutton, chicken, duck, doves or other small wild bush meat (*del,roam,kolombo, riin thok, riin ajith, riim bath hilib xoola sida ari, lo' geel, ida, digaag ama hilib cidood ,hibib qooley-gaaleed*).

5B.....|\_|

**FLSHMT**

**6. Eggs:** Any eggs from chicken, duck, guinea fowl or any other egg ( *manpelk, bet/ukun noc kasta*)

6.....|\_|

**EGGS**

**7. Fish and seafood:** Any fresh or dried fish, canned fish (anchovies, tuna, sardines), or shellfish (*kambale, tuna, omena, chiel, zamak,lic mi kot, makayabo, reec tiop, rec cie rier kaluun, kaluun laqalajjay,, tuna/kaluunka gasacadaha, iwm*).

7.....|\_|

**FISHSF**

**8A. Any dried beans, split peas, lentils or foods made from these**

8A.....|\_|

**PULSGFD**

**8. 8B.:** Any dried peas, lentils, nuts, ground nuts, cowpeas, green grams or foods made from these (eg. hummus, peanut butter), soya beans, kunde seeds

8B.....|\_|

**PULSNGFD**

**9. Milk and milk products:** Any milk, infant formula, cheese, yogurt or other milk products (e.g. goat, camel, cow, fermented milk/yoghurt, powdered milk kiefer, *caano dhamaan, cano fadhi, garoor, susac* )

9.....|\_|

**MILK**

**10A.: Vegetable oil**

10A.....|\_|

**FATSGFD**

**10B.: Any other cooking fat or oil, butter, ghee, fat from camel hump, margarine, oil, added to food or used for cooking**

10B.....|\_|

**FATSNGFD**

**11. Sweets:** Any sugar, honey, sweetened soda or sweetened juice drinks, sugary foods such as chocolates, candies, cookies, sweet biscuits and cakes. (*macmacaanka (sokor, malab, soda, cabitaan lamacaaneyay, nacnac, buskut, doolsha halwa)*)

11.....|\_|

**SWTS**

**12. Spices, condiments, beverages:** Any spices (black pepper, salt), condiments (soy sauce, hot sauce), coffee, tea, alcoholic beverages.( *chili, garlic / kitunguu saum, pilipili hoho, baribari, iliki, royco, dhania, cinnamon / dalasini, angawizi, ginger, cardamom, cloves / kuramtud, coffee, tea, alcoholic beverages, chai masala (filfil madoow, cusba,heel, basbaas, shah, bun )* )

12.....|\_|

**SPICE**

**Food aid fortified blended food:** Have you or anyone else in your household eaten CSB or any food made from these yesterday during the day and at night?( *Boorash*) **CSB IS FROM GFD AND PLW SFP**

Yes.....1  
No.....2



**1B. Kakuma Nutrition Survey, November 2018, Household Questionnaire- WASH: 1 questionnaire per household (This questionnaire is to be administered to the Main Caretaker or, if they are absent, another adult member of the household)**

**Kakuma 1/2/3/4/Kalobeyei: \_\_\_\_\_ Zone: \_\_\_\_\_ Block number: \_\_\_\_\_**

<b>Date of interview (dd/mm/yyyy)</b>  _ _ / _ _ / _ _ _ _ _ _	<b>Cluster Number</b>  _ _ _	<b>Team Number</b>  _ _
<b>Household Number</b>  _ _ _ _ _	<b>Consent</b> Consent : yes =1/ no=2 / absent=3  _ _	

No	QUESTION	ANSWER CODES	
<b>SECTION WS1</b>			
<b>WS1</b>	How many people live in this household and slept here last night? <b>HHSIZE</b>	_ _	
<b>WS2</b>	What is the <i>main</i> source of drinking water for members of your household? <b>SOURCE</b>  <b>DO NOT READ THE ANSWERS</b>  <b>MORE THAN ONE ANSWER POSSIBLE</b>	Public tap/standpipe .....01 Small water vendor 03 Surface water (e.g. river, pond) 04 Other 98 Don't know 99	_ _
<b>WS3</b>	Are you satisfied with the water supply? <b>THIS RELATES TO THE DRINKING WATER SUPPLY SATISFY</b>	Yes 1 No 2 Other 6	_  <b>IF ANSWER IS 1 GO TO WS7</b>
<b>WS4</b>	What is the <i>main</i> reason you are not satisfied with the water supply? <b>REASON</b>	Amount is not enough 1 Long queue at the tap stand 2 Water point is far 3 Water tastes bad 4 Other 98	
<b>WS5</b>	What kind of toilet facility does this household use? <b>TOILET</b>  <b>DO NOT READ THE ANSWERS</b>  <b>SELECT ONE ONLY</b>	Simple pit latrine with floor/slab 02 Pit latrine without floor/slab 03 No facility, field, bush, plastic bag.....04	_ _  <b>IF ANSWER IS 04 GO TO WS9</b>
<b>WS6</b>	How many <i>households</i> share this toilet?  <b>(THIS INCLUDES THE SURVEYED HOUSEHOLD)</b>	RECORD NUMBER OF HOUSEHOLDS IF KNOWN (RECORD 96 IF PUBLIC TOILET OR 98 IF UNKNOWN)  <b>SUPERVISOR SELECT ONE ONLY</b> Not shared ( <b>1 HH</b> ) 1 Shared family ( <b>2 HH</b> ) 2 Communal toilet ( <b>3 HH or more</b> ) 3 Public toilet ( <b>in market or clinic etc.</b> ) 4 Don't know 8	_ _  Households
<b>WS7</b>	Did you receive soap within the last two distribution cycles	Yes 1 No 2 Don't know .....99	<b>IF ANSWER IS 2 GO TO WS11</b>

WS8	Why did you not receive soap in the last two distribution cycles	<b>No soap distribution .....1</b> <b>HH not registered .....2</b> <b>HH members did not collect from FDP ....3</b> <b>Other .....98</b> <b>Don't Know.....99</b>			
WS9	Do you have children under three years old? <b>CHILD</b>	Yes 1 No 2			<input type="checkbox"/> <b>IF ANSWER IS 2 GO TO WS13</b>
WS10	The last time [NAME OF YOUNGEST CHILD] passed stools, what was done to dispose of the stools? <b>STOOL</b>  DO NOT READ THE ANSWERS  SELECT ONE ONLY	Child used toilet/latrine 01 Put/rinsed into toilet or latrine 02 Buried 03 Thrown into garbage 04 Put/rinsed into drain or ditch 05 Left in the open 06 Other 96 Don't know 98			<input type="text"/>
WS11	<b>CALCULATE THE TOTAL AMOUNT OF WATER USED BY THE HOUSEHOLD PER DAY</b>  THIS RELATES TO ALL SOURCES OF WATER (DRINKING WATER AND NON-DRINKING WATER SOURCES)	Please show me the containers you used yesterday for collecting water  ASSIGN A NUMBER TO EACH CONTAINER	Capacity in litres	Number of journeys made with each container	Total litres  <b>SUPERVISOR TO COMPLETE HAND CALCULATION</b>
		1 E.g. jerry can	20 L	1 x	25
		2 E.g. jerry can	10 L	2 x	20
		3 E.g. jerry can	5 L	2 x	10
		4 E.g. Jerry can	3 L	1 x	5
		5 E.g. bucket	50 L	1 x	50
		<b>Total litres used by household</b>			<b>110</b>
WS12	Please show me where you store your drinking water. <i>(ARE THE DRINKING WATER CONTAINERS COVERED OR NARROW NECKED?)</i>	All are 1 Some are 2 None are.....3			<input type="text"/>

2. Kakuma Nutrition Survey, November 2018, Questionnaire for reproductive women aged 15 - 49 years IN EVERY OTHER HOUSEHOLD

Kakuma 1/2/3/4/Kalobeyei: \_\_\_\_\_ Zone: \_\_\_\_\_ Block number: \_\_\_\_\_

Cluster Number: _____		Team Number: _____							
Consent : yes =1/ no=2 / absent=3									
WM1	WM2	WM3	WM5	WM6	WM7	WM8	WM9	WM10	WM11
ID	HH	Consent given 1=yes 2=no 3=absent	Age (years)	If breastfeeding, what is the age of your child? 1= 0-5 months 2= 6-24 months 3= 25-36 months	Are you pregnant? 1=yes 2=no (GO TO HB) 8=DK (GO TO HB)	Are you currently enrolled in the ANC programme? 1=yes 2=no 8=DK	Are you currently receiving iron-folate pills (SHOW PILL)? 1=yes (STOP NOW) 2=no (STOP NOW) 8=DK (STOP NOW)	Hb (g/L or g/dL)	MUA C (cm)  If WM10 Is 1 or 2
01									
02									
03									
04									
05									

\* For MUAC <21 refer to clinic

\*\* For Hb <6 refer to clinic

3. Kakuma Nutrition Survey, November 2018, Questionnaire for Children Aged 6-59 months

Kakuma 1/2/3/4/ Kalobeyei: \_\_\_\_\_ Zone: \_\_\_\_\_ Block number: \_\_\_\_\_

				Team Number: _____							
C1	C2	C3	C4	C5	C6	C7	C8	C9	C10	C11	C12
Child No.	HH No.	Name of child	Consent 1=yes 2=no 3=absent	Sex (m/f)	Birthdate (dd/mm/yyyy)	Age (months)  If child is 0-5 months, GO TO IF1	Weight (kg)	Height (cm)	Bilateral oedema (y/n)	MUAC (cm)	IS CHILD ENROLED IN NUTRITION PROGRAMME?  1 = SC/OTP; 2 = SFP; 3 = None
1											
2											
3											
4											
5											

Child No.	HH No.	C13 Measles Vaccination  1=Yes with card 2=Yes by recall 3=No or don't know	C14 Vit. A in past 6 months (SHOW CAPSULE)  1=Yes card 2=Yes recall 3=No or don't know	C15 Dewormed in past 6 months (SHOW PILL)  1=Yes recall 2=No or don't know	C16 Diarrhoea in last 2 weeks (3 or more loose or liquid stools/24hrs)  1 = yes 2 = no 99 = don't know	C17 When [name] had diarrhoea did you feed [name]:  1=less 2= the same 3=more 4=no food	C20 Hb (g/dL)	C21 Child referred for severe anaemia  1=yes 2=no	IS THIS CHILD AGED 6-23 MONTHS?  1=yes 2=no  IF 1 GO TO C25
1									
2									
3									
4									
5									
6									

		23B	23C	23D	23E	23F	23G
Child No.	HH No.						
		CSB+	CSB++/Super cereal +(SHOW SACHET)	Plumpy'Nut® (SHOW SACHET)	Plumpy'Sup® (SHOW SACHET)	Infant formula: for example; ( <i>caano boodhe, sahha ( Nan, mamex, S26 ,saha ,cow and gate)</i> )	List any iron fortified solid, semi-solid or soft foods designed specifically for infants and young children available in the local setting that are different than distributed commodities. ( <i>Weetabix Serifam , Cerelac</i> )
1							
2							
3							
4							
5							
6							

Cluster Number:		Team Number:	
Consent : yes =1/ no=2 / absent=3			

Child No.	HH No.	Consent	Birthdate (dd/mm/yyyy)	Age (months)	IF1 Ethnic group 1=South Sudanese 2=Somali 98=Others	IF2 Was [name] ever breastfed? 1=yes 2=no GO TO IF7 99= don't know GO TO IF7	IF3 How long after birth did you first put [name] to the breast? 1 = within 1 hr 2 = >1hr-<24 hrs 3 = 24 hrs or more 99 = don't know	IF4 Was [name] breastfed yesterday during the day or at night? 1 = yes 2 = no 99 = don't know
1								
2								
3								
4								
5								

Child No.	HH No.	6A Yesterday during the day or at night, did (name) eat solid or semi-solid (soft, mushy) food? 1 = yes 2 = no 99 = don't know	6B	6C	6F Did [name] drink anything from a bottle with a nipple yesterday during the day or night? 1 = yes 2 = no 99 = don't know	6G	6H	6I	6J	IF6	IF7
		Plain water	Infant formula: for example Mamex, Sahar, Nan, S26	Clear broth	Sour milk or yogurt	Thin porridge made from CSB+ or CSB++	Tea or coffee white or black	Any other water based liquids (sodas, other sweet drinks, Sweetened water, herbal infusion, gripe water, clear tea with no milk, black coffee, ritual fluids )			
1											
2											
3											
4											
5											

4. Kakuma Nutrition Survey, November 2018, Questionnaire for Infants Aged 0-5 months

Kakuma 1/2/3/4/Kalobeyei: \_\_\_\_\_ Zone: \_\_\_\_\_ Block number: \_\_\_\_\_