

**N.B. This document is currently being revised in the light of field experience**

## INSTRUCTIONS FOR INTERVIEWERS

### IMCI MULTI-COUNTRY EVALUATION HOUSEHOLD SURVEY QUESTIONNAIRE

16 June 2000

---

Note: questions are in **bold**; interviewers' instructions in *italics*. Adaptation notes are in **red**.

*This questionnaire is designed for being applied in the home, after ascertaining that there is a child who, on the day of the interview, is aged under 5 years (that is, up to 4 years 11 months and 29 days). If possible, the child's age should be confirmed using a birth certificate, health card or another type of document. In societies where age ascertainment is difficult, special methods will have to be used based on local practices. If in doubt, complete the questionnaire and check with your supervisor later.*

*The person to be interviewed should be the mother or caretaker (note that in the words "mother" and "caretaker" are used interchangeably in the rest of this document). If she is not available, ask when she will come back and return later if possible. If she is not available and will not return at a time when it is feasible to carry out the interview on that same day, follow the instructions given by your supervisor regarding the number of additional visits needed on separate days (this will vary from country to country and also from urban to rural areas). As a last resort, the questions should be answered by the person who is looking after the child on that occasion. If the child is not available but the mother or caretaker is, complete the questionnaire and do not complete the last module (Anthropometry and Blood Collection).*

*Throughout the questionnaire, the codes 9, 99, 999, etc are used for missing information (for example, when the caretaker does not know the answer). The codes 8, 88, 888 are reserved for questions that are not applicable.*

*In several questions, there are instructions for skipping additional questions depending on the answer given. When skipping questions, draw an oblique line through them so that your supervisor knows that they were intentionally skipped and not just overlooked.*

Adaptation note: A quality control module should be added, including the name or number of the interviewer (or interviewers), the date and hour of the interview, the person who was interviewed (mother, father, other - specified), the number of attempts (visits) necessary for carrying out the interview, the cluster number.

The identification module is to be added in each country. It should include: questionnaire number, child's name, parents' names, address, child's age and sex, locally relevant socioeconomic variables (parental education, income, household belongings, land tenure, occupation, etc).

**The present version of the questionnaire is appropriate for the first child from each caretaker. A shorter version should be developed for subsequent children, to avoid repetition of questions on socioeconomic indicators, caretaker knowledge, distance from closest health facility, etc.**

## BREASTFEEDING MODULE

1. Has <CHILD> ever been breastfed? MICS  
(1) Yes  
(0) No → Skip to question # 5  
(9) Doesn't know → Skip to question # 5

*Breastfeeding is defined as putting the child to the breast at least once a day. If the answer is (1) Yes, ask the next question; otherwise skip it.*

2. Is he/she still being breastfed? MICS  
(1) Yes  
(0) No → Skip to question # 5  
(9) Doesn't know → Skip to question # 5

*Consider the child as breastfed even if the mother refers that the child is just suckling but no milk is coming out. If the answer is (1) Yes, ask the next question; otherwise skip it.*

3. Since this time yesterday, did he/she receive any of the following? (Prompt) MICS
- |  |                       |
|--|-----------------------|
| Vitamin, mineral supplements or medicine                     | (1) Yes (0) No (9) DK |
| Plain water  | (1) Yes (0) No (9) DK |
| Sweetened, flavoured water or fruit juice or tea or infusion | (1) Yes (0) No (9) DK |
| ORS (oral rehydration solution)                              | (1) Yes (0) No (9) DK |
| tinned, powdered or fresh milk or infant formula             | (1) Yes (0) No (9) DK |
| any other liquids (specify: _____)                           | (1) Yes (0) No (9) DK |
| solid or semi-solid (mushy) food                             | (1) Yes (0) No (9) DK |
- CHECK:**
- |                          |                       |
|--------------------------|-----------------------|
| received ONLY breastmilk | (1) Yes (0) No (9) DK |
|--------------------------|-----------------------|

*Make sure that the caretaker understands the question, particularly what you mean by “since this time yesterday” (specify to the mother: mid morning, mid afternoon, etc, as applicable).*

*Prompt for each type of food, using the local words that were defined during your training. If the caretaker does not know the answer, repeat the question using other local words for the fluid or food - if the answer is still not known, tick (9) DK (“Doesn’t know”).*

*This module ends with a check question. If the child is breastfed and all answers to this question are “no”, tick (1) Yes for the question “Received ONLY breastmilk”.*

### IF INTAKE OF SOLID OR SEMI-SOLID FOOD IS MENTIONED, ASK:

4. Since this time yesterday, how many times did he/she eat? \_\_\_\_\_ NEW - compatible with WHO Feeding Recs

*This question should only be asked if in the previous question the caretaker reported that the child is currently eating solids or semisolids. Again, make sure that the caretaker understands that the time period started at the current time but on the previous day. If necessary, ask meal by meal: breakfast, mid morning snack, lunch, afternoon snacks, dinner, at bedtime, and in the middle of the night. IMPORTANT: only count feeds with solids or semi-solids. Do not count milk feeds (breast or other), water, teas or juices.*

5. Since this time yesterday, has <CHILD> been given anything to drink from a bottle with a nipple or teat? MICS  
(1) Yes  
(0) No  
(9) Doesn't know

*Make sure the mother understands the question, using local words for nipple/teat. It does not matter what was in the bottle (milk, water, teas, juices), only whether or not a bottle was used.*

## NUTRITION COUNSELLING MODULE

**Adaptation note: If mothers' cards are not distributed in the country, use the following option:**

6. Have you ever been shown a card like this?

- (1) Yes  
(0) No → Skip to question # 10  
(9) Doesn't know → Skip to question # 10

NEW

*Show the caretaker a laminated copy of the mothers' card that the study supervisor has given you. If the answer is (1) Yes, ask the next question; otherwise skip it. Note that some mothers may report seeing a "card like this" even in areas where mother's cards are not being distributed. Please emphasize that we are interested in cards exactly like the one shown (which should be obtained from the health facilities), not those similar to it.*

7. Do you know what it means?

- (1) Nutrition, diet, feeding, growth, or similar concept  
(9) Doesn't know  
( ) Other (specify): \_\_\_\_\_

NEW

*Do not prompt. Record what the caretaker has to inform. If the answer is related to nutrition or growth, tick (1). If in doubt, write out the answer in full and show it to your supervisor who will code it.*

**Adaptation note: the next two questions apply to countries where mother's cards are being distributed. For expediency, the mother's card could be requested at the same time the mother is asked to produce the vaccination card and the birth registration (if applicable).**

X. Has <CHILD> ever received a card that looks like this? NEW

- (1) Yes  
(0) No → Skip to question # 10  
(9) Doesn't know → Skip to question # 10

*Show a copy of the mother's card to the caretaker. If she/he does not recognize it right away, do not insist. If the answer is (1) Yes, ask the next question; otherwise skip it.*

Y. Could you show me the card? NEW

- (1) Card seen  
(0) Card not seen  
(8) Not applicable

*If she/he informs that the child received a card but it is not available at the moment (for example, she can't find it), tick (0) Card not seen. Check (8) Not applicable if the caretaker informed in the previous question that the child never received such a card.*

**IF A CARD WAS GIVEN OR SHOWN, ASK THE NEXT TWO QUESTIONS:**

8. Who showed to/gave you this card?

- (1) Health worker or other health professional  
(2) Other person  
(3) Posted on health facility wall  
(4) Other  
(specify): \_\_\_\_\_  
(9) Doesn't know

*If the mother mentions that the card was given or shown at a health facility, ask whether this took place during an individual consultation with the health worker or during a group session of health education involving two or more mothers.*

9. When was the card given/shown? \_\_\_\_\_ / \_\_\_\_\_  
 (99/9999) Doesn't know Month Year NEW

*Answer this question only if the caretaker reports that a card was given to the child, or a laminated card shown to her by a health worker or another health staff. If she did not receive a card, fill in the answer with 88/8888 (not applicable). If she does not know the exact date, try to get an approximate date by asking how old the child was when the card was given and checking which age group was highlighted by the health worker on the card. If it is not possible to establish when the card was delivered, fill in with 99/9999 (doesn't know).*

**THE NEXT QUESTION APPLIES TO ALL MOTHERS OF BABIES AGED UNDER 2 YEARS:**

10. Did a health worker ever ask you to breastfeed the baby in front of him/her? NEW  
 (1) Yes  
 (0) No  
 (9) Doesn't know

*Record if the health worker reportedly observed a breastfeed.*

**THE NEXT TWO QUESTIONS APPLY TO ALL MOTHERS:**

11. Can you tell me until what age a baby should receive only breastmilk, that is, no other food, water or teas?  
 \_\_\_\_\_ months (99=doesn't know) NEW

*Ensure that the mother understands that we want her to tell us the ideal duration of exclusive breastfeeding, that is, nothing but breastmilk. In this question, we do not want to know for how long her baby was exclusively breastfed, but the ideal or recommended duration.*

12. Can you tell me what foods, in addition to breast milk, should be given to an 8-month-old baby? NEW

*Do not prompt.*

- |                     |               |                   |
|---------------------|---------------|-------------------|
| Recommended food #1 | (1) Mentioned | (0) Not mentioned |
| Recommended food #2 | (1) Mentioned | (0) Not mentioned |
| Recommended food #3 | (1) Mentioned | (0) Not mentioned |
| Recommended food #4 | (1) Mentioned | (0) Not mentioned |

Other (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

Other (specify): \_\_\_\_\_

**Adaptation note: The foods recommended by the local IMCI adaptation should be listed. For example, if mangoes, chicken liver and beans are recommended, list these foods in place of recommended food # 1-3.**

*Do not prompt by mentioning specific foods. If the caretaker mentions one foodstuff and stops, insist by asking "Any others?" until you are satisfied. If you are not sure whether a certain type of food - as reported by the mother - fits in one of the above categories, write it down in full and check with your supervisor later.*

## BEDNET MODULE

**Adaptation note: The next questions apply to countries where impregnated bednets are being promoted.**

12. Did <CHILD> sleep under a bednet last night?

(1) Yes

Modified from WHO/AFRO

(0) No → Why  
not? \_\_\_\_\_

\_\_\_\_\_ → Skip to question # 16  
(9) Doesn't know → Skip to question # 16

*Record whether the child slept under an impregnated bednet, regardless of whether the net was shared with others. If the answer is (1) Yes, ask the next X questions; otherwise skip them. If the answer is (2) No, ask why and record the answer in full and skip to question XXX. If last night the child slept outside her home, consider the last night spent at home.*

13. Was this bednet ever treated with a product to kill insects?

(1) Yes

Modified from WHO/AFRO

(0) No → Skip to question # 16

(9) Doesn't know → Skip to question # 16

*Make sure that the caretaker understands the question. Use other words (local terms for insecticide, repellent, etc) if needed. If the answer is (1) Yes, ask the next X questions; otherwise skip them. If the answer is (2) No, ask why and record the answer in full.*

14. When was the bednet treated for the last time? \_\_\_\_\_ / \_\_\_\_\_

(99/9999)

Doesn't know

Month

Year

NEW

*If the previous answer was that the net had been treated, ask when. If the caretaker reports that the bednet was treated but does not know when, try to help her/him provide an approximate date by relating the event to specific seasons or dates.*

## VACCINATION MODULE

15. Is there a vaccination card for <CHILD>? MICS
- ( ) Yes → May I see it?
- (1) Card seen
- (2) Card not seen → Skip to question # 19
- (0) No → Skip to question # 19
- (9) Doesn't know → Skip to question # 19

*If the caretaker reports that a card exists, ask her/him to show. If a card is shown, copy the dates of the vaccinations and ask question 18. If a card is not shown, go to question 19. IF THE MOTHER DOES NOT HAVE A PROPER VACCINATION CARD BUT THE VACCINE DOSES ARE REGISTERED IN ANOTHER DOCUMENT (FOR EXAMPLE, BOOKLET WITH RECORDS OF CLINIC VISITS), CONSIDER THIS AS HAVING A CARD.*

*The original vaccination cards may have been lost and replaced by a new card in which the health worker marked the vaccines with crosses rather than writing dates. For these children, the indicators requiring the exact date of the vaccination will not be valid, so skip to question 19.*

13. Copy all dates of vaccinations from the card to the table below: MICS

VACCINE	DOSE 1	DOSE 2	DOSE 3	DOSE 4
Measles	___/___/___	___/___/___	___/___/___	___/___/___
DPT	___/___/___	___/___/___	___/___/___	___/___/___
Polio	___/___/___	___/___/___	___/___/___	___/___/___
BCG	___/___/___	___/___/___	___/___/___	___/___/___

16. In addition to the doses shown in this card, did <CHILD> receive any other vaccinations?
- (1) Yes → Ask questions 19-23, recording only additional doses
- (0) No → Skip to question # 24
- (9) Doesn't know → Skip to question # 24

*It is possible that some of the vaccines received by the child were not recorded - for example, the mother may have forgotten to bring the card to the health facility. If there are additional doses, ask questions 19-23, recording only additional doses. For example, if 2 doses of DPT are recorded in the card but another dose was given but not recorded, the answer to question 21 should be one dose.*

*IF CHILD DOES NOT HAVE A VALID CARD, OR IF CARD WAS NOT SEEN, ASK QUESTIONS 19-23:*

*The next questions are aimed at obtaining the vaccination status for children who do not have a vaccination card available. Describe the vaccination techniques in detail to the caretaker and provide further explanations if needed. When mentioning the vaccines or the specific diseases, use local synonyms if needed. We are not interested in injections for treating a disease - antibiotics, antimalarials, etc - but only in vaccines.*

17. Has <CHILD> ever been given a BCG vaccination against tuberculosis—that is, an injection in the left shoulder that caused a scar? MICS
- (1) Yes
- (0) No
- (9) Doesn't know
18. INSPECT LEFT SHOULDER FOR PRESENCE OF BCG SCAR: MICS
- (1) Present

- (0) Absent
- (9) Unable to examine/ unable to tell

*Check the answer to the previous question by inspecting the left shoulder for a small round scar (during the training period you will be shown such scars). If there is no scar in the left shoulder, the interviewer should also examine the right side; if there is a scar on the right shoulder, answer (1) Present.*

*If there is a discrepancy between the previous answer and the presence of the scar, repeat the previous question. If in doubt about the consistency, write your observations in full and check with your supervisor.*

19. Has <CHILD> ever been given “vaccination injections”—that is, an injection in the thigh or buttocks—to prevent him/her from getting tetanus, whooping cough, diphtheria? MICS
- ( ) Yes → How many times? \_\_\_\_\_
- (0) No
- (9) Doesn't know
20. Has <CHILD> ever been given any “vaccination drops” to protect him/her from getting diseases—that is, polio? MICS
- ( ) Yes → How many times has he/she been given these drops? \_\_\_\_\_
- (0) No
- (9) Doesn't know
21. Has <child> ever been given “vaccination injections”—that is, a shot in the arm, at the age of 9 months or older — to prevent him/her from getting measles? MICS
- (1) Yes
- (0) No
- (9) Doesn't know

*Measles vaccine is given normally as an injection in the arm. In some countries, some children may receive it as an injection in the thigh. If the mother specifically mentions measles vaccine but refers to an injection in the thigh, accept the answer as valid. If the child is behind the vaccination schedule, refer to a health facility.*

## VITAMIN A MODULE

**Adaptation note: The next six questions apply to countries with a vitamin A supplementation policy.**

22. Has <CHILD> ever received a Vitamin A capsule (supplement) like this one, that was squeezed into his/her mouth?
- (1) Yes MICS  
(0) No → Skip to question # 26  
(9) Doesn't know → Skip to question # 26

*Show the caretaker a capsule or the dispenser. If she/he does not recognize it right away, do not insist. If the answer is (1) Yes, ask the next question; otherwise skip it. If the child is behind the supplementation schedule, refer to a health facility.*

*In some areas, many different vitamin A capsules and dispensers may be used. If a mother reports that the child had received vitamin A, but the capsule did not look like the ones being shown by the interviewer, these answers should be accepted as valid.*

23. When did <CHILD> take the last dose? \_\_\_\_\_ / \_\_\_\_\_ MICS  
(99/9999) Doesn't know Month Year

*If the previous answer was positive, ask when. If the caretaker reports that the child received a dose, but does not know when, try to help her/him provide an approximate date by relating the event to specific seasons or dates.*

**ASK THE NEXT FOUR QUESTIONS ONLY IF THE CHILD IS AGED TWO YEARS OR MORE:**

24. Does your child have any problem seeing in the daytime?
- (1) Yes WHO/NUT  
(0) No  
(9) Doesn't know

*This is a leading question for raising the issue of the child's sight, and checking whether the child may have nonspecific eye problems. If a particular problem is mentioned, write it down and check with your supervisor.*

25. Does your child have any problem seeing in the nighttime?
- (1) Yes WHO/NUT  
(0) No → Skip to question # 29  
(9) Doesn't know → Skip to question # 29

*If the answer is (1) Yes, ask the next question; otherwise skip it.*

26. Is this problem different from other children in your community?
- (1) Yes WHO/NUT  
(0) No  
(9) Doesn't know

*These two questions check the child's sight at night. The latter question checks if the caretaker thinks the child's night vision is worse than that of other children in the community.*

27. Does your child have night blindness?
- (1) Yes WHO/NUT  
(0) No  
(9) Doesn't know

*Use local term that describes night blindness, if available. If in doubt, write the answer and terms used by the caretaker in full and check with your supervisor.*

## MISCELLANEOUS MORBIDITY MODULE

**MOST QUESTIONS IN THIS MODULE SHOULD BE TRANSFERRED TO THE HOUSEHOLD MODULE.**

28. Sometimes children have severe diseases and should be taken immediately to a health facility. What types of symptoms would cause you to take your child to a health facility right away?

Compatible with CDD/ARI HH survey manual

Child not able to drink or breastfeed	(1) Mentioned	(0) Not mentioned
Child becomes sicker	(1) Mentioned	(0) Not mentioned
Child develops a fever	(1) Mentioned	(0) Not mentioned
Child has fast breathing	(1) Mentioned	(0) Not mentioned
Child has difficult breathing	(1) Mentioned	(0) Not mentioned
Child has blood in the stool	(1) Mentioned	(0) Not mentioned
Child is drinking poorly	(1) Mentioned	(0) Not mentioned
Other (specify): _____		
Other (specify): _____		
Other (specify): _____		

*Do not prompt by mentioning the signs listed above. If the caretaker mentions a few signs and stops, insist by asking "Any others?" until you are satisfied. If you are not sure whether a certain sign - as reported by the mother - fits in one of the above categories, write it down in full and check with your supervisor later.*

29. When a child is ill, should you offer him/her more food, less food or about the same as usual?

- (1) None  
 (2) Much less than usual  
 (3) Somewhat less than usual  
 (4) About the same as usual  
 (5) More than usual  
 (9) Doesn't know

NEW, compatible with CDD/ARI HH survey manual and MICSI

*The purpose of this question is to find out how much food the mother states she would offer the child during an episode. This is a hypothetical question about maternal knowledge on feeding sick children, not an actual question on how much the child ate (the 2-week morbidity module - below - includes another question on how much the child ate during the episode). Make sure that the mother understands the question correctly.*

30. Can you tell me which is the closest health facility to your home?

NEW

*Use local name for health facility and write down the location - village, borough, street, etc. Use local words to refer to a health facility (these include government and other non-profit health facilities), as instructed by your supervisor.*

31. How far is this from your home, and how long does it take you to get there?

NEW

Distance: \_\_\_\_\_ (amount/units)

Time: \_\_\_\_\_ (amount/units)

*Information on time and distance may be difficult to obtain from caretakers of low educational level. If possible, collect information both on distance and time required; otherwise collect only information on distance or on time. The information on travel time refers to the time required to take a sick child (children who are not ill may be taken to a health facility by slower means of transport). The information on travel time refers to the current season of the year (travel time may vary from season to season). Check the information provided by each caretaker with that provided by neighbors from the same cluster. If the answer given by the caretaker is markedly different from that of her/his neighbors, inform you supervisor.*

*In some countries it may be easier to ask the village leader or another knowledgeable person about the distance and record this on the questionnaire, or use GPS to locate the cluster center and the health facility. If this is the case, your supervisor will provide you with instructions on how to record this information.*

32. Did <CHILD> ever attend this health facility?

- (1) Yes  
 (0) No

➔ Why not? \_\_\_\_\_

NEW

(9) Doesn't know

Record whether child ever attended this facility. If not, ask why and write down the answer in full. Do not ask this question in a way that the mother may give a positive answer because she feels you are implying that the child should have attended the facility.

33. In this past year, that is, from <MONTH> of last year to now, has <CHILD> been admitted to a hospital or health centre?

(1) Yes

(0) No

(9) Doesn't know

→ Skip to question # 37

→ Skip to question # 37

NEW

For this study, a hospital or health centre admission requires spending at least 24 hours in the facility. If a child was in a hospital or health centre bed for a few hours, for example, for receiving ORS or IV fluids, or for doing exams, do not consider this as a hospitalization. If the answer is (1) Yes, ask the next question; otherwise skip it.

34. Can you tell me how many times he/she was admitted and for what diseases?

NEW

ARI/pneumonia (1) Yes → How many times? \_\_\_\_\_ (0) No (9) DK → How many days? \_\_\_\_

Diarrhoea (1) Yes → How many times? \_\_\_\_\_ (0) No (9) DK → How many days? \_\_\_\_

Malaria (1) Yes → How many times? \_\_\_\_\_ (0) No (9) DK → How many days? \_\_\_\_

Measles (1) Yes → How many times? \_\_\_\_\_ (0) No (9) DK → How many days? \_\_\_\_

Malnutrition  
or anemia (1) Yes → How many times? \_\_\_\_\_ (0) No (9) DK

Other (specify): \_\_\_\_\_ → How many days? \_\_\_\_

Other (specify): \_\_\_\_\_ → How many days? \_\_\_\_

Other (specify): \_\_\_\_\_ → How many days? \_\_\_\_

Your supervisor will provide you with a list of local terms that fit in each of the disease definitions above. If you are unsure whether the disease mentioned fits one of these categories, write it down under "other" and check with your supervisor later.

If a disease is mentioned, ask how many times the child was in hospital for that condition. If the child was released from hospital but was admitted again within 48 hours (2 days), consider this as a single admission. If the mother mentions two causes for the same admission (for example, diarrhoea and anemia) record only the cause mentioned first.

Also record how many days each admission lasted. If there were two admissions due to diarrhoea, for example, the first lasting 3 days and the second 5, write down 3+5 and add later. In this example, the answer to "How many days?" should be 08. If the mother does not remember the duration, fill in with 99.

## TWO-WEEK MORBIDITY MODULE

35. Does <CHILD> have any illness or health problem today? NEW
- (1) Yes → Skip to question # 39
- (0) No
- (9) Doesn't know

*Accept the caretaker definition of whether or not the child has been ill. If the answer is (1) Yes, skip the next question but ask the next three modules of questions (the Two-Week Morbidity Module, the Provider's Module and the Client Costs Module); otherwise skip them and move to the Additional Drugs Module.*

36. In the last two weeks, that is, since <WEEKDAY> of the week before last, has <CHILD> had any illness or health problem? NEW
- (1) Yes
- (0) No → Go to the Anthropometry module
- (9) Doesn't know → Go to the Anthropometry module

*Accept the caretaker definition of whether or not the child has been ill. Illnesses that started more than two weeks ago but finished within the last two weeks should also be included. If the answer is (1) Yes, ask the next three modules of questions; otherwise skip them and move to the Additional Drugs Module.*

**FILL IN THE MODULE BELOW IF THE CHILD WAS ILL IN THE PREVIOUS TWO WEEKS. IF THE CHILD HAD MORE THAN ONE EPISODE, CONSIDER ONLY THE LAST ONE.**

37. For how many days was <CHILD> ill? \_\_\_\_\_ days NEW
- If the caretaker cannot provide this answer with assurance, ask in which days of the week the episode started and finished, and count the number of days.*

38. (a) Did (does) <CHILD> have? (prompt) Compatible with CDD/ARI HH survey manual
- Convulsions (1) Yes (0) No (9) DK
- Very sleepy (1) Yes (0) No (9) DK
- Vomiting everything (1) Yes (0) No (9) DK
- Drinking poorly/  
not able to drink or breastfeed (1) Yes (0) No (9) DK

- (b) Did (does) <CHILD> have? (prompt) Compatible with CDD/ARI HH survey manual
- IF YES, ASK NO. OF DAYS SINCE IT STARTED**
- Fever (1) Yes (0) No (9) DK → How many days? \_\_\_\_\_ days
- Illness with cough (1) Yes (0) No (9) DK → How many days? \_\_\_\_\_ days
- Difficult breathing\* (1) Yes (0) No (9) DK → How many days? \_\_\_\_\_ days
- Diarrhoea\*\* (1) Yes (0) No (9) DK → How many days? \_\_\_\_\_ days

- (c) Did (does) <CHILD> have? (prompt) Compatible with CDD/ARI HH survey manual
- Ear pain (1) Yes (0) No (9) DK
- Loss of appetite (1) Yes (0) No (9) DK
- Blocked or runny nose (1) Yes (0) No (9) DK
- Sore throat (1) Yes (0) No (9) DK
- Fast breathing\* (1) Yes (0) No (9) DK
- Eye problems (1) Yes (0) No (9) DK
- Generalized rash (1) Yes (0) No (9) DK
- Other sign/symptom: \_\_\_\_\_
- Other sign/symptom: \_\_\_\_\_
- Other sign/symptom: \_\_\_\_\_

*Ask about each listed symptom. Even if the child is less than 2 weeks old, ask about every symptom. Tick each symptom that was present. If the caretaker reports an unlisted symptom, record it in the last three lines.*

*If a symptom started several weeks ago and continued into the 2 week period, it counts. If the symptom just started today, it counts. If the mother is confused about when '2 weeks ago' started, help her understand in terms of local events, for example, market days.*

Do not define any of the symptoms for the caretaker unless she asks you to. If a caretaker asks, "What do you mean by fast breathing?", you may say, "noticeably faster than normal when the child is rested." If a caretaker asks, "What do you mean by difficult breathing?", you may say, "The child sounded or looked like he was having trouble breathing," or you may give other explanations that were developed and tested during the adaptation and pretesting of the questionnaire. If asked to **define diarrhoea**, you may say **that it is 3 or more abnormally loose stools in one day with or without blood**.

"Illness with cough" means a cold or other acute respiratory illness with a cough. "Sick with cough" or a local term for this can be used to explain what is meant. If a caretaker says, "He coughs all the time," or "He's been coughing for three months," do not count this as "illness with cough" as it is a chronic problem.

IF \* SYMPTOMS (FAST/DIFFICULT BREATHING) WERE TICKED, ASK:

39. Was/were <\* SYMPTOMS> due to a problem in the chest or a blocked nose?

- (1) Chest
- (2) Nose
- (3) Both
- ( ) Other: \_\_\_\_\_
- (9) Doesn't know

CDD/ARI HH survey manual

Ask this question only if a \* symptom was ticked in question W3. When asking this question, refer to the \* symptom(s) ticked in question 40, for example, "Was the difficult breathing due to a problem in the chest or a blocked nose?" or "Was the fast and difficult breathing due to a problem in the chest or a blocked nose?" Record (1) for chest, (2) for nose, and (3) if the caretaker says it was both a chest and nose problem. If the caretaker provides another answer, check "other" and write out the answer in full. If a caretaker says she doesn't know, probe once by asking 'Do you think it was due to a problem in the chest or to a blocked nose?' If she still doesn't know, check (9).

IF \*\* (DIARRHOEA) WAS TICKED, ASK:

40. During the diarrhoea, did <CHILD> have...? (prompt)

How many watery stools a day? \_\_\_\_\_ (99) DK

Repeated vomiting (1) Yes (0) No (9) DK

Marked thirst (1) Yes (0) No (9) DK

Not eating/drinking well (1) Yes (0) No (9) DK

Blood in stool (1) Yes (0) No (9) DK

Not getting better/getting sicker/  
very sick (1) Yes (0) No (9) DK

CDD/ARI HH survey manual

Ask about each sign. For the number of watery stools, ask how many stools a child passed in the worst day of the episode. You will have to adapt the wording in "not eating/drinking well" to "Did the child stop eating or drinking well?". For the last sign, you may ask "Was the child very sick?".

41. In your opinion, was <CHILD'S> disease mild, severe or so-so?

- (1) Mild
- (2) Average or so-so
- (3) Severe
- ( ) Other. Specify: \_\_\_\_\_
- (9) Doesn't know

NEW

This question aims at recording the caretaker's perception. If you are in doubt about how the caretaker's answer should be coded, write it out in full and check with your supervisor.

42. Was your child's life in danger during this episode?

- (1) Yes
- (0) No
- (9) Doesn't know

NEW

Again, this question is aimed at assessing the caretaker's perception of severity. If necessary, explain to the mother that we want to know whether she thinks that a child from her community with a similar illness might have died from it.

Adaptation note: The question above may not be culturally acceptable in some settings. If so, should be reworded

to investigate if the caretaker perceived the episode as life-threatening.

43. During <CHILD'S> disease, did <CHILD> drink much less, more or about the same amount of total fluids (including breastmilk and formula) as usual? Compatible with CDD/ARI HH survey manual
- (1) None
  - (2) Much less than usual
  - (3) Somewhat less than usual
  - (4) About the same as usual
  - (5) More than usual
  - (9) Doesn't know

*Get the caretaker's best judgement of the relative amount of total fluids actually consumed by the child. All fluids are included, not just special ones given during diarrhoea. For example, water, tea, fruit juice, breastmilk, and formula are included as well as special fluids such as ORS solution. Try to find out what actually happened, not what the caretaker thinks ought to have happened. An answer such as, "A child with diarrhoea needs more fluids," is not satisfactory. You would need to ask, 'But how much did your child actually drink during this diarrhoea?' It may be difficult to estimate the relative amount of breastmilk taken by the child. The caretaker may make an estimate based on whether the child nursed longer or more frequently.*

44. During <CHILD'S> disease, did <CHILD> eat much less, more or about the same amount of food as usual? Compatible with CDD/ARI HH survey manual and MICSI
- (1) None
  - (2) Much less than usual
  - (3) Somewhat less than usual
  - (4) About the same as usual
  - (5) More than usual
  - (8) Does not apply (exclusively breastfed child, or child receiving only fluids)
  - (9) Doesn't know

*If the child takes only breastmilk or other fluids, check (8). If the child takes solid/semi-solid foods in addition to breastmilk or formula, consider only the solid/semi-solid food. The focus on this question is on how much food was actually consumed by the child. If the caretaker offered more food than usual, but the child ate much less, the answer is (2).*

45. Did you seek care outside the home for <CHILD> when he/she was ill? NEW
- (1) Yes
  - (0) No → **Go to the Additional Drugs Module**

*'Seeking care outside the home' means going outside the family or household for advice or treatment. Seeking care could include anything from asking a neighbour for advice, to holding a religious ceremony on the child's behalf, to going to a hospital. If a physician or other provider visits the household to give care this counts as seeking care outside the home. The child may or may not have accompanied the caretaker when she sought care. For example, going to buy medicine without the child counts as seeking care.*

46. **Tell me where or from whom did you seek care first. After the first reply, ask: And after that, did you receive care again from <FIRST PROVIDER> or from someone else? Keep asking until all providers are mentioned. Fill in the spaces with 1 for the first provider sought, 2 for the second (if applicable), and so on. If a provider was not sought, fill in with 0. Prompt only for traditional healers. If the same provider was visited more than once, fill in both columns. Write the name or location (village, borough, street, etc) of the facility in the space provided.**

Compatible with CDD/ARI HH survey manual

<b>Hospital</b> _____	___	___	→ Go on to the provider's module
<b>Health centre</b> _____	___	___	→ Go on to the provider's module
<b>Dispensary</b> _____	___	___	→ Go on to the provider's module
Village health worker _____	___	___	→ Go on to the provider's module
MCH clinic _____	___	___	→ Go on to the provider's module
Mobile/outreach clinic _____	___	___	→ Go on to the provider's module
Private hospital, health center or clinic _____	___	___	→ Go on to the provider's module
<b>Traditional healer</b> _____	___	___	
<b>TBAs</b> _____	___	___	
<b>Religious healer</b> _____	___	___	
<b>Quack</b> _____	___	___	
<b>Pharmacy or Western drug seller</b> _____	___	___	
<b>Traditional drug seller</b> _____	___	___	
<b>Relative or friend (outside the household)</b> _____	___	___	
<b>Other provider:</b> _____	___	___	

**TO BE CODED LATER: WAS AN IMCI FACILITY USED (1) YES (0) NO (9) DK**

**GO TO THE ADDITIONAL DRUGS MODULE IF NO WESTERN MEDICINE PROVIDER WAS SOUGHT**

The term provider is used loosely and may include relatives or friends outside the household who gave advice or drugs they had in their homes. Tick each provider or individual from whom care was sought. Use general prompts, such as 'Anywhere else?' If an unlisted provider is mentioned, describe in the "other" row. If the caretaker does not mention any traditional healer, prompt specifically for this type of provider using local terms. Do not prompt specifically for any other types of providers. Note that this list of providers is fairly detailed. Physicians and quacks are listed separately. Traditional healers not associated with the health system are listed separately from community-based practitioners associated with the health system.

A description of the providers is given below:

*Hospital. Hospitals run by the government and the physicians, nurses, and health workers who work there.*

*Health centre. Government health centres and clinics and physicians, nurses, and health workers who work there.*

*Dispensary. A small health facility, smaller than a health centre, often run only by health auxiliaries.*

*Village health workers. These include trained health workers who provide care in the community rather than in a facility, but are associated with the health care system. Volunteer and paid community health workers not based in facilities are included in this category. This includes TBAs (traditional birth attendants) associated with the health care system but not based in facilities.*

*MCH clinic. A small clinic that provides only maternal and child health services.*

*Mobile/outreach clinic. A clinic that is not geographically fixed, that moves around from village to village.*

*Private hospital, health centre or clinic. This category includes private hospitals and hospitals and clinics run by non-government organizations. It also includes private physicians working on their own.*

*Traditional healer. Local healers not associated with the official health care system.*

*TBA. Traditional birth attendants not associated with the official health care system.*

*Religious leader. Local spiritual leaders who may be sought for special healing rites, treatments, or ceremonies.*

*Quack. Pretenders to medical qualifications.*

*Pharmacy or Western drug seller. Stores where a pharmacist sells drugs, or other drug sellers (e.g., store, market) who sell Western drugs.*

*Traditional drug sellers. Those who sell herbal and other traditional drugs.*

*Relative, Friend: Relatives or friends outside the household.*

*Other. Use this code if no other code applies.*

## PROVIDERS MODULE

**FILL IN A SEPARATE PROVIDER'S MODULE FOR EACH OCCASION, IN THE LAST TWO WEEKS, THAT THE CHILD WAS TAKEN TO A QUALIFIED PROVIDER (GOVERNMENT HOSPITAL, HEALTH CENTRE OR CLINIC, OR A COMMUNITY BASED PRACTITIONER, OR A PRIVATE HEALTH CENTER/CLNIC. IF THE CHILD WAS TAKEN TO THE SAME PROVIDER TWICE, FILL IN TWO FORMS, ONE FOR EACH VISIT.**

47. Was this the closest health centre or clinic to your home, the one you mentioned before? NEW  
(1) Yes → Skip to question # 52  
(0) No

*Refer the caretaker to her/his answer to questions no. 32-33 on the closest health facility. Use local words to refer to a government health facility, as instructed by your supervisor.*

48. How far is this facility from your home?  
\_\_\_\_\_ (amount) \_\_\_\_\_ (distance units)

*Information on distance may be difficult to obtain. In some countries it may be easier to ask the village leader or another knowledgeable person about the distance and record this on the questionnaire, or use GPS to locate the cluster center and the health facility. If this is the case, your supervisor will provide you with instructions on how to record this information.*

49. Why was <CHILD> taken to this clinic and not to the closest one?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Write down the answer in full. If needed, reassure the mother that she can be frank in her answer because everything she says is confidential.*

50. Did the health worker say your child had to be taken to a hospital or another health center? NEW  
(1) Yes  
(0) No → Skip to question # 54  
(9) Doesn't know → Skip to question # 54

*If necessary, explain by using local words for hospital or health center.*

51. Did you/they take <CHILD> to hospital/health center? NEW  
(1) Yes  
(0) No → Why not? \_\_\_\_\_  
\_\_\_\_\_

(9) Doesn't know

*Ask this question only if a health worker referred the child. Reassure the mother that her answer is confidential. If you find she is reluctant to answer, mention that we know that sometimes it is not possible to follow the health worker's advice, and asking whether or not it was possible for her to take the child. If the answer is no, ask why and record the answer in full.*

52. Did the health worker ask you/they to bring <CHILD> back to the clinic in a few days? NEW  
(1) Yes  
(0) No → Skip to question # 58  
(9) Doesn't know → Skip to question # 58

*Ask whether a return visit was scheduled. If the health worker mentioned that the child should be brought*

back, but did not mention a specific date, the answer should be (0) No. We are only interested in follow-up visits scheduled for a specific date. If the answer is (1) Yes, ask the next question; otherwise skip it.

53. When did he/she say that <CHILD> should be brought back?

(1) Before today's date

NEW

(2) After today's date

➔ Skip to question # 57

(9) Doesn't know

➔ Skip to question # 58

*If the follow-up visit was scheduled for a date before the date of the interview, ask the next question. If the visit is scheduled for a later date, skip the next question.*

54. Did you/they take <CHILD> back?

(1) Yes

➔

Record answer and skip to question # 58

NEW

(0) No

➔

Why not? \_\_\_\_\_

(9) Doesn't know

*Ask this question only if the date of the interview is taking place after the date of the scheduled follow-up visit. If the answer was (0) No, ask why and write down the answer in full.*

55. Will you take him/her back?

(1) Yes

NEW

(0) No

➔

Why not? \_\_\_\_\_

(9) Doesn't know

*Ask this question only if the date of the scheduled follow-up visit has not arrived yet. Ask whether the caretaker intends to take the child when the visit is due. If the answer was (0) No, ask why and write down the answer in full.*

## CLIENT COSTS MODULE

REPEAT THE MODULE BELOW FOR EACH PROVIDER SOUGHT DURING THIS EPISODE. For example, if two providers were seen, complete a separate module for each of them. If the same provider was seen more than once - for example, an initial visit plus a follow-up visit - complete a separate module for each visit)

**I would now like to ask you some questions about what happened when your child was seen by <PROVIDER>. We are asking these questions because we want to find out how much time and money people spend when they have to take their children to a health facility.**

56. Did the <PROVIDER> come to your home or was the child taken to him/her?  
 (1) Home → **Skip to question # 68**  
 (2) Provider's place  
 ( ) Other place: \_\_\_\_\_

Record whether the child had to be taken to a provider or whether this provider came to the family's home. If the consultation took place somewhere else, write down the place in full. If the consultation was at home, skip to question #73.

57. Who took the child to <PROVIDER>?  
 Mother (1) Yes (0) No  
 Father (1) Yes (0) No  
 Other adult (specify): \_\_\_\_\_ (1) Yes (0) No  
 A child (specify): \_\_\_\_\_ (1) Yes (0) No

The child may have been taken to the consultation by more than one person; in this case, record all those who went. For example, if both parents went, answer (1) Yes for both. If another adult or a child went with the child, write down the relationship to the child (for example, grandmother, sister, etc). A "child" is anyone under 15 years of age.

58. How did you/they get there, how long did it take, and how much did it cost?

From	To	Means	Time	Cost

Write down the means of transportation; if more than one means of transportation were used, record them on separate lines.. For example, walked from home to XXX village (30 minutes, no cost), got a ride on a truck to the dispensary in YYY town (1 hour, paid 100 shillings to the driver). The cost refers to the total amount spent by all persons who went with the child to the provider. If the exact time spent or the trip costs are not known, ask for an approximate time/cost, or check with others (relatives, neighbors) to find out the approximate time/cost of such a trip.

59. How did you/they come back, how long did it take, and how much did it cost?

From	To	Means	Time	Cost


Same instructions as for the preceding question. Do not assume that the same means of transportation were used for the return trip.

60. After arriving at the <PROVIDER'S> place, how much time was spent until you/they were finished? (include waiting time)  
 \_\_\_ \_\_\_ \_\_\_ (amount) \_\_\_\_\_ (time units)

*This is the time since arriving at the provider and leaving the premises. If the caretaker and child had to queue up outside the premises, include the queuing time as well. If they were seen by more than one professional (e.g., MCH aide, medical assistant and pharmacist), include the total time.*

61. After leaving the <PROVIDER'S> place, did you/they have to spend more time getting drugs or laboratory tests?  
 (1) Yes → How much time? \_\_\_ \_\_\_ \_\_\_ (amount) \_\_\_\_\_ (time units)  
 (0) No  
 (9) Doesn't know

*Ask about additional time spent in activities related to the consultation. This can include time needed for obtaining drugs and laboratory tests, including the time to obtain the funds for paying for these, if applicable.*

62. Did you/they have to spend the night away from home either going there or coming back?  
 (1) Yes  
 (0) No → Skip to question # 66  
 (9) Doesn't know → Skip to question # 66

*Ask whether the caretaker and child had to spend the night away from home, and skip the next question if not.*

63. How much did you/they spend for lodging?  
 \_\_\_ \_\_\_ \_\_\_ (amount) \_\_\_\_\_ (cost units)

*Fill in the amount and currency units spent for lodging. If they did not pay for lodging, fill in with 0 (zero).*

64. To make sure I got everything right, can you tell me again how much time you/they spent between leaving home and getting back after the consultation?  
 \_\_\_ \_\_\_ \_\_\_ (amount) \_\_\_\_\_ (time units)

*This question is aimed at ensuring that the information on the total time spent for the consultation is correct. Ask the caretaker to go through the time spent again: how much time to get there, how much time in the premises (including waiting time) and how much time to get back home.*

65. Did you/they have to spend money to buy food or drinks while you were away for the consultation?

- (1) Yes → How much? \_\_\_\_\_ (amount) \_\_\_\_\_ (cost units)  
 (0) No  
 (9) Doesn't know

*Do not consider food that was taken from home or obtained without cost at relatives, friends, etc, but only that which was purchased. If there were expenses, ask how much and answer with the amount and currency units.*

66. Did you/they have to pay for the consultation?  
 (1) Yes → How much? \_\_\_\_\_ (amount) \_\_\_\_\_ (cost units)  
 (0) No  
 (9) Doesn't know

*Ask if the provider had to be paid, whether in currency or in goods. In some countries, paying providers from the government sector is illegal but happens anyway. Be alert to this possibility and reassure the caretaker that this information is confidential. If there was a payment, ask how much was paid and fill in the amount and currency units. If the provider was paid with goods, write down the type and quantity and consult your supervisor.*

67. Did the <PROVIDER> prescribe <CHILD> any drugs, such as pills, syrups, capsules or injections?  
 (1) Yes  
 (0) No → Skip to question # 72  
 (9) Doesn't know → Skip to question # 72

*Make sure that the whole question is asked, including the possible types of drugs: "pills, syrups, capsules or injections". Do not include herb or plant remedies. This question refers only to drugs prescribed by this provider. Later in the questionnaire there will be space to fill in drugs recommended by other providers, by traditional healers, pharmacists, relatives or by the caretaker her/himself.*

68. Did you have to pay to get these medicines?  
 (1) Yes → How much? \_\_\_\_\_ (amount) \_\_\_\_\_ (cost units)  
 (0) No  
 (9) Doesn't know

*If it was necessary to pay for the drugs that were prescribed, ask how much was spent altogether. Later we will ask about the prices of the individual drugs. If the caretaker obtained the drugs from two or more sources, or on two or more occasions, record how much was paid on each occasion and add the amounts later.*

69. Please tell me which drugs were prescribed, even if the child did not take them. For each drug, ask: **Did you/they get it for free or did you/they have to buy it? If purchased: How much did it cost for the whole treatment? How many bottles, pills or injections were prescribed/ purchased/ received?** For each drug, also ask: **Did <CHILD> take it?** and, if yes, ask whether he/she took all or part of the treatment.

*Fill in one block for each drug prescribed - even if the caretaker informs that these were not obtained or taken by the child.*

*Try to find out and record the name and form of any drugs given. First, ask to see the package or prescription. If unavailable, or if the package is not labeled, ask the caretaker if she knows the name of the drug. If you have been trained to recognize samples of drugs, you may also try to identify an unlabeled drug. If you cannot identify the drug, write "unknown" in the space for name of drug; also write whether the drug was a pill, syrup, capsule, or injection.*

*There is enough space in the questionnaire for 4 drugs. If a child received more than 4 drugs,*

you may record the additional drugs on the margin of the page.

If the drug was provided free of cost, tick  Free and specify where it was obtained (for example, directly from the provider, at another government facility, etc). If it was purchased, tick  Purchased and record the cost (amount and currency units).

If the caretaker purchased several drugs and does not know the price of each individual item, write down the full amount for all drugs in the space provided for the cost of the first drug, and make a note on the margin. Leave blank the costs for the other drugs. If the prescribed drug was not obtained/purchased, tick  Not obtained and ask the caretaker why, recording the answer in full.

Fill in the amount received or purchased (for example, 1 injection, 1 bottle, 12 capsules, etc). If the drug was not obtained, fill in the amount with 0 (zero) and ask the caretaker why the drug could not be obtained.

Finally, answer if the child actually took, wholly or partially, the drugs.

Drug: \_\_\_\_\_  
Amount prescribed: \_\_\_\_\_ (number/units)  
 Free. Specify where obtained: \_\_\_\_\_  
 Purchased. Cost: \_\_\_\_\_ (amount/cost units)  
 Not obtained. **Why?** \_\_\_\_\_  
Amount received/purchased: \_\_\_\_\_ (number/units)  
**Did <CHILD> take it?** (1) Yes, all (2) Yes, partly (0) No (9) DK

Drug: \_\_\_\_\_  
Amount prescribed: \_\_\_\_\_ (number/units)  
 Free. Specify where obtained: \_\_\_\_\_  
 Purchased. Cost: \_\_\_\_\_ (amount/units)  
Amount received/purchased: \_\_\_\_\_ (number/cost units)  
 Not obtained. **Why?** \_\_\_\_\_  
**Did <CHILD> take it?** (1) Yes, all (2) Yes, partly (0) No (9) DK

Drug: \_\_\_\_\_  
Amount prescribed: \_\_\_\_\_ (number/units)  
 Free. Specify where obtained: \_\_\_\_\_  
 Purchased. Cost: \_\_\_\_\_ (amount/units)  
Amount received/purchased: \_\_\_\_\_ (number/cost units)  
 Not obtained. **Why?** \_\_\_\_\_  
**Did <CHILD> take it?** (1) Yes, all (2) Yes, partly (0) No (9) DK

Drug: \_\_\_\_\_  
Amount prescribed: \_\_\_\_\_ (number/units)  
 Free. Specify where obtained: \_\_\_\_\_  
 Purchased. Cost: \_\_\_\_\_ (amount/units)  
Amount received/purchased: \_\_\_\_\_ (number/cost units)  
 Not obtained. **Why?** \_\_\_\_\_  
**Did <CHILD> take it?** (1) Yes, all (2) Yes, partly (0) No (9) DK

COMPLETE ANOTHER PROVIDER'S MODULE IF MORE THAN ONE PROVIDER WAS SEEN DURING THE EPISODE.



## ADDITIONAL DRUGS MODULE

IF A PROVIDER'S MODULE WAS FILLED IN, ASK:

70. Did <CHILD> take any other drugs during the illness?
- (1) Yes  
(0) No → Skip to question # 75  
(9) Doesn't know → Skip to question # 75

Record any drugs that were given by any other person than a Western provider. Drugs prescribed by Western providers have already been recorded in the provider's modules.

Again, define drugs as injections, pills, syrups or capsules. This question now refers to drugs taken by the child following recommendations, for example, of traditional healers, pharmacists, relatives or by the caretaker her/himself. Do not consider herb or plant remedies. In this question we are only interested in drugs that were actually taken by the child, not those that were recommended by someone but not taken. If the answer is (1) Yes, skip the next question and ask about the drugs. If the answer is (0) No, go to question #80.

IF A PROVIDER'S MODULE WAS NOT FILLED IN, ASK:

71. Did <CHILD> take any drugs during the illness?
- (1) Yes  
(0) No → Skip to question # 75  
(9) Doesn't know → Skip to question # 75

This question applies to drugs taken by children who were ill but were not seen by a Western provider. See instructions for the preceding question.

72. Please tell me which drugs. For each drug, ask: **Did you get it for free or did you have to buy it? If purchased: How much did it cost for the whole treatment?**

Drug: \_\_\_\_\_

- ( ) Free. Specify where obtained: \_\_\_\_\_  
( ) Purchased. Cost: \_\_\_\_\_ (amount/units)  
Amount received/purchased: \_\_\_\_\_ (number/units)

Drug: \_\_\_\_\_

- ( ) Free. Specify where obtained: \_\_\_\_\_  
( ) Purchased. Cost: \_\_\_\_\_ (amount/units)  
Amount received/purchased: \_\_\_\_\_ (number/units)

Drug: \_\_\_\_\_

- ( ) Free. Specify where obtained: \_\_\_\_\_  
( ) Purchased. Cost: \_\_\_\_\_ (amount/units)  
Amount received/purchased: \_\_\_\_\_ (number/units)

See instructions for question #71. Note that here we are only interested in drugs that were actually taken by the child, not in drugs that were recommended by someone but not taken.

73. Did you have to spend on anything else due to <CHILD'S> illness, such as syringes, bandages, etc?

- (1) Yes → How much? \_\_\_\_\_ (amount) \_\_\_\_\_ (cost units)  
(0) No

Include other expenses associated with the episode. If there were expenses, ask how much and fill in the amount and currency.

## ANTHROPOMETRY AND BLOOD COLLECTION MODULE

74. *Conditions under which anthropometry took place:*  
(1) Cooperative child  
(2) Child did not cooperate but exam was possible  
(3) Examination was not possible. Reason:

\_\_\_\_\_  
*Record your assessment of the conditions under which anthropometry took place. If exam was not possible, explain why.*

75. *Was the child wearing any clothes when weighed?*

(1) Yes → *List all clothes being worn:* \_\_\_\_\_

\_\_\_\_\_  
(0) No

*Always insist that the child should be weighed naked, but if the is absolutely impossible, make a detailed listing of all pieces of clothing worn by the child during the exam, including diapers, underwear, footwear, headwear, etc.*

**Adaptation note: In each country, the supervisors will prepare a list of the weights of common child clothes to be deducted from the observed weight when applicable.**

76. Child's weight: \_\_\_\_ \_\_\_\_ . \_\_\_\_ kg

*FOR CHILDREN AGED UNDER 2 YEARS:*

77. Child's recumbent length: \_\_\_\_ \_\_\_\_ . \_\_\_\_ cm

*FOR CHILDREN AGED 2 YEARS OR MORE:*

78. Child's standing height: \_\_\_\_ \_\_\_\_ \_\_\_\_ . \_\_\_\_ cm

*All children under 2 years should be measured lying down. If for any reason this is not possible and a child under 2 years is measured standing up, 1 cm should be added to the height to obtain the length measure. For this child, question 79 should be answered, not question 80. If a child aged 2 years of more is measured lying down, 1 cm should be subtracted and question 80 completed, not question 79.*

**IF EXAMINATION WAS REPEATED BY SUPERVISOR:**

79. Child's weight: \_\_\_\_ \_\_\_\_ . \_\_\_\_ kg

80. Child's height or length: \_\_\_\_ \_\_\_\_ . \_\_\_\_ cm

**Adaptation note: The module of questions below should be adapted to the examinations to be carried out in each country.**

81. *Was blood collected?*

(1) Cooperative child  
(2) Child did not cooperate but collection was possible  
(3) Blood collection was not possible. Reason:

---

*RESULTS OF BLOOD EXAMINATIONS:*

82. Hemoglobin level: \_\_\_\_\_. \_\_\_\_ g/dl
83. Retinol level: \_\_\_\_\_. \_\_\_\_  $\mu\text{mol/l}$
84. Malaria parasitemia: \_\_\_\_\_ parasites per 100 fields

Adaptation note: A mortality module will have to be developed for countries where the evaluation will include a mortality survey. The MICS mortality module may be adapted for this purpose.

## **Weight**

*The description of the technique assumes that UNICEF Electronic Scale (UNISCALE) will be used.*

*The child should be naked. In cold climates, the mother can be given a blanket (after her weight has been recorded and before taring the scale), so that she can wrap the child and keep him/her warm. For infants from birth to two years, the mother is weighed first and then the mother and her child are weighed together. The weight of the child is derived by subtraction. The scale does this automatically by the so-called tared weighing procedure. If the UNISCALE has been well calibrated, well positioned and cleaned, tared weighing proceeds as follows:*

- turn the scale on by covering the solar cells for less than one second.*
- if the display shows the figure 0.0 ask the mother to stand on the middle of the scale*
- make sure that the mother stands still on the scale*
- make sure that the solar cell is not covered by a skirt or by the mother's feet*
- the mother's weight now appears on the display, is read and recorded*
- with the mother standing still on the scale, cover the solar cell for less than one second*
- the display now shows again the figure 0.0*
- hand over the baby to the mother*
- the display now shows the child's weight which is read and recorded*

*For children from two years onwards the child is requested to stand on the scale and the weight is recorded if the child accepts to stand still. If the child is uncooperative, the tared weighing procedure must be applied.*

## **Length:**

*Supine length will be measured for all children under 2 years. For supine or recumbent length two observers are required (the second observer can be replaced by the mother). One observer or the mother holds the head of the child and the other observer will position the child's legs and record the measurement. The child lies on the measuring board such that the head is positioned in the Frankfort Plane (the lower orbits of the eyes on the same vertical plane as the external auditory meati), the shoulders and buttocks are resting on the board and the shoulders and hips are aligned at right angles to the long axis of the body (i.e., in the median or mid-sagittal plane). The first observer or the mother holds the head throughout the measurement procedure to ensure that the head position (Frankfort Plane) is maintained and to ensure that the top (vertex) of the head maintains contact with the vertical headboard. The second observer ensures that the child is relaxed, or at least not arching the spine or bending the knees. This observer holds the feet such that the ankles are at right angles and the toes not bending over to interfere with the footboard. The footboard is then moved into contact with the heels and slight pressure is applied to the ankles to straighten the legs and extend the spine. The measurement is recorded to the **last completed unit (mm)**. With very young children it may be necessary for the second observer to apply downward pressure to the knees to prevent flexion.*

## **Height.**

*The child, dressed in the minimum of clothing and without socks or shoes, is instructed to stand upright against the backboard of the stadiometer or vertical surface to which the measuring instrument is aligned. The heels, buttocks and scapulae should be in contact with the backboard or vertical surface and the ankles should be touching each other or slightly apart. The head is positioned with the lower orbits of the eyes on the same horizontal plane as the external openings into the ear or external auditory meati (Frankfort Horizontal Plane) and the headboard is moved down to make contact with the top (vertex) of the head (skull). Apply gentle pressure to the headboard to make sure the hair is compressed and does not contribute to the measurement. The observer records the height to the **last completed unit (mm)**.*