## Appendix VII - Hygiene QUESTIONNAIRE

**WATER, SANITATION AND HYGIENE ASSESSMENT OF HOUSEHOLDS IN**

**Njinikom Cameroon**

**SECTION A- Location and Logistics** (For Interviewer)

1. Name of Interviewer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Date of Interview (MM/DD/YY): \_\_\_ \_\_\_ / \_\_\_ \_\_\_ / \_\_\_ \_\_\_
3. District Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Community/ Village /Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Household ID Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Name of Female Head of Household: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Age\_\_\_\_\_\_
8. How many people live in this household? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. **Table D: List of All Household Members (Caretaker, Children 0-59 Months, and Schoolchildren)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ID# | Name | Sex | Age | Relationship of Primary Caretaker to This Child |
| List of primary caretakers, followed by all her/his children 0-59 months. (Not including Visitors) |  | In months or years | Mother \_\_A  Grandmother \_\_B  Sister \_\_C  Aunt \_\_D  Father \_\_E  Brother \_\_F  Grandfather \_\_G  Other family (F) \_\_H  Other family (M) \_\_I  Not family (F) \_\_J  Not family (M) \_\_K |
| Caretaker |  |  |  |  |
| A |  |  |  |  |
| B |  |  |  |  |
| C |  |  |  |  |
| D |  |  |  |  |
| E |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | What is the main source of water for: | Standpipe  Catchment A | Standpipe  Catchment B | Surface Water | SNEC Water |
|  | Drinking Water |  |  |  |  |
|  | Bathing |  |  |  |  |
|  | Cleaning |  |  |  |  |
|  | Washing clothes |  |  |  |  |
|  | Cooking |  |  |  |  |
|  | Handwashing |  |  |  |  |

|  |  |  |
| --- | --- | --- |
|  | How long does it take you to go to your main water source, get water, and come back? | Minutes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_A  On premises \_\_B  Don’t Know \_\_C |
|  | Who usually collects water? (Check all that apply) | Adult Woman \_\_A  School age female children \_\_B  Adult Men \_\_C  School age male children \_\_D  Young, pre-school age children \_\_E  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_F |
|  | In what type of container is the water carried from your main source? | Bucket \_\_A  Drum/Barrel \_\_B  Jerry Can \_\_C  Aluminum basin \_\_D  Other \_\_E  Don’t Know \_\_F |
|  | How many loads do you fetch per day? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Promotion: It is extremely important to use water from a clean source like catchments A or B for drinking, cooking and handwashing.

**Water Storage, Handling, Treatment, and Cost**

|  |  |  |
| --- | --- | --- |
|  | Do you store water for drinking in the household? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | If yes, what do you store it in? | Clay water pot \_\_A  Bucket \_\_B  Drum/Barrel \_\_C  Jerry Can \_\_D  Aluminum basin \_\_E  Other \_\_F  Don’t Know \_\_G |
|  | May I see the containers please? | No /Yes |
|  | **Observe**  What type of storage containers are present?  Narrow mouthed: opening is 3 cm or less | Narrow mouthed \_\_A  Wide mouthed \_\_B  Of both types \_\_C |
|  | **Observe**  Are the containers covered? | All are \_\_A  Some are \_\_B  None are \_\_C |
|  | How do you remove water from the drinking water container? | Pouring \_\_A  Dipping \_\_B  Both pouring and dipping \_\_C  Container has a spigot or tap \_\_D  Other \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E  Don’t Know \_\_F |
|  | Are the water containers cleaned? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | **Observe**  Cleanliness of containers | Looks new\_\_A  Dust on outside, clean on inside\_\_\_B  Dirt on outside and some dust on inside\_\_\_C  Significant dirt on inside\_\_\_\_D  Dirt and other substances (oil, food waste, etc) \_\_E |
|  | If Yes, how are they cleaned? | With soap\_\_\_A  With sand\_\_\_B  With soap and sand\_\_\_C |
|  | When were they cleaned last? | Today or yesterday \_\_A  Less than one week ago \_\_B  Several weeks ago \_\_C  Never \_\_D  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E  Don’t remember \_\_F |
|  | Do you do anything to your water before you drink it?  *Probe: Do you drink it right from the source, or do you do something to it before you use it?* | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | How? (with what) | Boil \_\_A  Add bleach/chlorine \_\_B  Sieve it through cloth \_\_C  Water filter (ceramic, sand composite) \_\_D  Solar disinfection \_\_E  Sedimentation \_\_F  Add charcoal \_\_G  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_H  Don’t know \_\_I |
|  | If water is treated by a method other than boiling, check for presence of: | Bleach/chlorine present \_\_A  Bleach/chlorine containers are empty \_\_B  Cloth filter present \_\_C  Water filter present \_\_D  Solar disinfection present \_\_E  Other \_\_F \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  None available \_\_G |

Promotion: It is important to keep the water clean and protected until you drink it. This means keeping the water covered, containers cleaned and storing the water for a maximum of one day. The longer you keep the water the more likely it is to get contaminated. Clean jugs and storage containers just like you clean your clothes.

Boiling is the best method to treat water. This can be particularly useful for children and babies to prevent them from getting sick.

**Hygiene Behaviors and Knowledge**

|  |  |  |
| --- | --- | --- |
|  | When do you wash your hands?  *Probe: Why do you wash your hands?* | Washing my children’s hand \_\_A  Washing hands after defecating \_\_B  Washing hands after cleaning child \_\_C  Washing hands after feeding child \_\_D  Washing hands before preparing food \_\_E  Washing hands before eating \_\_F  Washing hands after eating \_\_G  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_H  Don’t remember \_\_I |
|  | Can you show me everything you use to wash your hands? | No/Yes |
|  | Where do you usually wash your hands with soap?(Check all that apply) | In or near toilet facility \_\_A  Inside house\_\_B  Elsewhere on premises \_\_C  Outside premises \_\_D  No specific place \_\_E  Don’t wash hands \_\_F |
|  | Can you show me how you wash your hands? | No/Yes |
|  | **Observe** Is there water? (Turn on tap and/or check container and note if water is present) | No \_\_ A  Yes, found in handwashing place \_\_B  Brought by caretaker within 1 min \_\_C |
|  | **Observe** Is there soap, detergent or ash? | No \_\_A  Yes, found in handwashing place \_\_B  Brought by caretaker within 1 min \_\_C |
|  | **Observe** If there is soap, detergent or ash mark all that are present. | Soap \_\_\_A  Detergent \_\_B  Ash \_\_C |
|  | **Observe** Is there a handwashing device such as a tap, basin, bucket, sink, or tippy tap? | No \_\_A  Yes, found in handwashing place \_\_B  Brought by caretaker within 1 min \_\_C |
|  | **Observe** Does the washing device allow unassisted washing and rinsing of both hands, for example, a tap, a basin, bucket, a sink, or a tippy tap? | No \_\_A  Yes \_\_B |
|  | **Observe** What method is used to dispense water? | Tap or spigot \_\_A  Tippy tap or similar device \_\_B  Pipe without tap \_\_C  Pour water into a basin or bucket \_\_D  Pour water from container onto hands assisted by another person \_\_E  Pour water from container onto hands without assistance \_\_F  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_F  Don’t know \_\_H |
|  | **Observe** Is there a towel or cloth to dry hands? | No \_\_A  Yes, found in handwashing place \_\_B  Brought by caretaker within 1 min \_\_C |
|  | **Observe** Does the towel or cloth appear to be clean? | No \_\_A  Yes \_\_B |
|  | What is the subjects hand movements like? | Only washes palms \_\_\_\_A  Washes palms and between fingers \_\_\_ B  Washes palms, between fingers and backs of hands \_\_\_\_C  All of the above and beneath fingernails \_\_D  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E |

Promotion: Washing your hands with soap is the most important thing you can do for health. Washing your hands with soap will prevent you from getting sick. Purchasing soap and using it correctly will prevent you from missing days from work. Missing days from work or not being productive costs more money than soap. Soap IS worth the investment!

**Excreta Disposal**

|  |  |  |
| --- | --- | --- |
|  | What kind of toilet facility does this household use?  *(Probe until all choices are exhausted)* | Pit Latrine \_\_A  Ventilated Pit Latrine\_\_B  Flushing Toilet \_\_C  No Facility \_\_D |
|  | May I see the toilet facility? | No/Yes |
|  | **Observe** Verify that the type of latrine indicated is correct. | Yes, is correct \_\_A  No, correction made \_\_B  Did not verify \_\_C |
|  | **Observe** Toilet facility observation: observe access to the facility- are there obstacles in the path, are there signs of regular use? | Dense vegetation \_\_A  Waste or debris in its path \_\_B  Major crevices or potholes \_\_C  Mud \_\_D  Entrance is obstructed \_\_E  Path is clear \_\_F  Path well worn as sign of regular use \_\_G  Other observation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_H |
|  | **Observe** Toilet facility observation: Observe the superstructure of walls, roof and door | Has walls \_\_A  Has a roof \_\_B  Has doors \_\_C  Superstructure damaged \_\_D  No superstructure \_\_E  Don’t know \_\_F |
|  | **Observe** Toilet facility observation: If doors are present, can they be closed? | No \_\_A  Yes, are unlocked \_\_B  Yes, are locked \_\_C  Impossible to determine \_\_D |
|  | **Observe** If any type of pit latrine, are the holes covered? | No \_\_A  Yes \_\_B  Not a pit latrine \_\_C  Don’t know \_\_D |
|  | **Observe** Are there separate facilities for men and women? | No \_\_A  Yes \_\_B  Cannot identify \_\_C |
|  | **Observe** Does it have any of the following child-friendly features? (may be separate or in the same compartment as an adult facility.) | Pit latrine with smaller hole \_\_A  Lower seat \_\_B  Potty available \_\_C  None of the above \_\_D  Cannot identify \_\_E  Not a pit latrine \_\_F |
|  | **Observe** Is there fecal matter present inside the facility on floor or walls (human or animal) | No \_\_A  Yes \_\_B  Cannot assess \_\_C |
|  | **Observe** Is there fecal matter clearly visible in the pit at less than 30 centimeters depth ( as a sign that the pit is full) | No \_\_A  Yes \_\_B  Cannot assess \_\_C |
|  | Is there a place for handwashing in the toilet facility or within 10 meters? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Are the following items present at the place for handwashing? | Water from tap or container \_\_A  Soap or detergent \_\_B  Ash \_\_C  Towel or cloth \_\_D  Basin or sink \_\_E  None of the above \_\_F |
|  | What do you use for anal cleansing? | Nothing \_\_A  Toilet paper \_\_B  Tree leaves \_\_C  Water \_\_D  Newspaper \_\_E  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_F |
|  | How is it disposed of? | Leave it there \_\_A  Bury it \_\_B  Drop in pit \_\_C  Drop in container next to latrine \_\_D  Other \_\_E |

Promotion: Diarrhea is caused my diseases carried my human fecal matter. These diseases are small and persistent. Flies for example can land on feces inside your pit latrine and then land on your food, carrying the diseases from fecal matter to your food. Covering your pit latrine can prevent these diseases from being transmitted to your food. Cleaning your latrine and washing your hands with soap as soon as you exit the latrine is also an excellent way to prevent disease transmission.

**Caretaker Questionnaire about child less than 60 months (5 years old)**

|  |  |  |
| --- | --- | --- |
|  | Have any of your children had diarrhea during the past 48 hours (today and yesterday)?  Probe: How many stools has your child had(times he/she has gone to the toilet) in the past 24 hours  Diarrhea 3 or more liquid stools in 24 hours | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Has (name of child) had 3 or more liquid stools in a day in the past week?  Probe: If no, when was the last time (name of child) has had diarrhea? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Did \_\_\_\_\_\_\_\_\_\_vomit while he/she had diarrhea? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Did the stool contain:  (check all mentioned) | Blood \_\_A  Mucus \_\_B  Don’t know \_\_C |
|  | Did you give anything to the child after he she had these stools? | No \_\_A  Yes \_\_B |
|  | What did you give him/her? | A fluid from a special packet called \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_A  Pill or syrup \_\_B  Intravenous fluid (IV) \_\_C  Home or traditional medicine \_\_D  Oral Rehydration Salts \_\_E  None of these fluids \_\_\_\_\_F  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_G  Don’t know \_\_H |
|  | Did you seek advice or treatment and if so, where?  If source is hospital, health center or clinic, write the name of the place. Probe to identify the type of source and circle the appropriate code.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name) | * Gov. hospital \_\_A * Catholic Hospital\_\_B * Market/shop \_\_C * Traditional practitioner \_\_D * Did not seek advice/treatment \_\_E * Don’t know \_\_F |
|  | If not, why did you not seek treatment? (Don’t read answers- ask if there is anything else and check all mentioned) | No money \_\_A  Too far \_\_B  Child not seriously ill \_\_C  Nobody to go to \_\_D Place has no drugs \_\_E  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_F  Don’t know \_\_G |

Promotion: Diarrhea can kill people and especially children from dehydration. When children have three or more stools in a day they are losing liquids and need to be rehydrated with oral rehydration solution. An oral rehydration solution can be made with sugar salt and water. If the multiple stools persist for more than 3 days the child needs to go the hospital.

**Caretaker Questionnaire**

|  |  |  |
| --- | --- | --- |
|  | Have you had diarrhea during the past 48 hours (today and yesterday)?  Probe: How many stools have you had (times you have gone to the toilet) in the past 24 hours?  Diarrhea 3 or more liquid stools in 24 hours | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Have you had 3 or more liquid stools in a day in the past week? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Did you vomit while you had diarrhea? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Did the stool contain:  (check all mentioned) | Blood \_\_A  Mucus \_\_B  Don’t know \_\_C |
|  | What are some things that you think causes diarrhea? | Not washing hands\_\_\_A  Touching feces\_\_\_\_B  Flies\_\_\_C  Unclean food\_\_\_D  Evil spirits\_\_\_E  Dirty Water\_\_\_F  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_G |

**Malaria**

|  |  |  |
| --- | --- | --- |
|  | How many times a week do you dispose of large quantities of water near your compound? | Never\_\_\_A  1-2\_\_\_\_\_\_B  3-5\_\_\_\_C  5-7\_\_\_\_\_D  7+\_\_\_\_\_E  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_F |
|  | How many times have you had malaria? | 0 \_\_\_A  1-3 \_\_\_B  3-5\_\_\_\_\_C  5-10\_\_\_\_D  10+\_\_\_\_\_E  Don’t know \_\_F |
|  | What do you do when you have malaria? | Wait it out/do nothing \_\_\_A  Go to the hospital \_\_\_B  Go to a traditional healer \_\_\_C  Take over the counter medication \_\_\_D  Other \_\_\_E |
|  | What do you think causes malaria? | Diet\_\_\_\_\_\_A  Water\_\_\_\_\_B  Mosquitos\_\_\_\_C  Evil spirits\_\_\_\_D  Other\_\_\_\_\_\_\_\_\_\_\_\_E |
|  | Do you sleep using a mosquito net?  If Yes, may I see it? | Mosquito net present\_\_\_A  Not present\_\_\_\_B  Only use when pregnant\_\_\_\_C  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D |

Malaria is a disease carried by mosquitos and transmitted when mosquitos bite. Malaria give you a very high fever and can kill people if not treated. The best way to avoid getting malaria is to try to avoid getting bit by mosquitos. Mosquitos like to bread in water, so one way to keep mosquitos away from your compound is to not pour large quantity of water out near your compound. Mosquitos also like to bite when you are sleeping, and thus sleeping with a bed net is another great way to prevent you from getting the high fevers that malaria causes. Sleeping in a bed net is extremely important for pregnant women and babies, as malaria is extremely harmful to them. The best way to treat malaria is to go to the hospital and they can give you medicine to treat malaria.

**Household Environment:**

|  |  |  |
| --- | --- | --- |
|  | Is livestock (poultry, goats, pigs, etc) present inside living quarters? | No \_\_A  Yes \_\_B  Don’t know \_\_C |
|  | Are animal feces visible in the house or in the yard? | No \_\_A  Yes \_\_B |
|  | Is there garbage lying in the open in the house or in the yard? | No \_\_A  Yes \_\_B |
|  | Is there sewage in the yard? | No \_\_A  Yes \_\_B |
|  | Is there sewage or are there open sewers outside the premises or in the streets within 10 meters of the dwelling? | No \_\_A  Yes \_\_B |
|  | Is there smoke coming from burning garbage in the area? | No \_\_A  Yes \_\_B |

Keeping your compound clean is a sign of respect and also prevents diseases from trash and animal feces.

**Lower Respiratory Infections**

|  |  |  |
| --- | --- | --- |
|  | Is your cooking area in the same building as where you sleep? | Yes\_\_\_A  No\_\_\_\_\_\_B  Other\_\_\_C |
|  | How many windows are in the compound where the cooking is done? | 0 \_\_\_A  1-3 \_\_\_B  3-5\_\_\_\_\_C  5-10\_\_\_\_D  10+\_\_\_\_\_E  Don’t know \_\_F |
|  | How do you preserve your food? (check all that apply) | Covered \_\_\_A  Refrigerated \_\_\_B  Out of the sun \_\_\_C  In clean dishes \_\_\_D  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E |
|  | How do you wash dishes and clean food?  (check all that apply) | No practice\_\_\_\_\_\_A  With clean water\_\_\_\_\_B  Soap\_\_\_\_C  All vegetables and dishes\_\_\_\_D  Other\_\_\_\_E |

Chronic inhalation of smoke produced from wood fires causes infections of the lungs and excessive coughing. If your cooking area produces smoke, you should to allow for plenty of ventilation for smoke to escape. All stored food is covered and not kept in sun. If possible it is best to cook in a different building than where you sleep and ventilate this area to remove the smoke while you are in the building. When cooking it is imperative to keep dishes and food clean by washing it with clean water and soap if needed.

THANK YOU!