**resilience radar** **Questionnaire**  

**Note***:* Please read the **resilience radar** **user manual** first before using this questionnaire.

**PART O** | BACKGROUND

**Note** that information from this part will not influence the radar outcomes – however, you can use this information to create separate radars (e.g. for women/men, for groups of communities etc. Feel free to add further questions in this section if you would like to enable further disaggregation (e.g. by household size, income bracket etc).

|  |  |  |  |
| --- | --- | --- | --- |
| **0.1** | **ADD LOCAL LANGUAGE IN THIS COLUMN** | **Please select the community that this household fall in.** | |
| 1) |  | A | ☐ |
| 2) |  | B | ☐ |
| 3) |  | C | ☐ |
| 4) |  | D | ☐ |
| 5) |  | E | ☐ |
| 6) |  | F | ☐ |
| 7) |  | G | ☐ |
| 8) |  | H | ☐ |
| 9) |  | I | ☐ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **0.2** |  | My name is \_\_\_\_\_\_\_\_\_\_\_, and I am working with **ORGANISATION.** We are conducting a survey for **NAME OF PROJECT** that (is planned/has been carried out) in this community.  I would like to ask you a few questions that will help us with our programming.  The survey takes 30-45 minutes, and participation in this survey is entirely voluntary. If you choose to participate, your information will be securely stored. Any personal information will be removed for analysis of the data. We hope that you will participate in this survey by providing correct and factual information.  **Would you like to participate with this survey?** | | **FLOW** |
| 1) |  | Yes | ☐ | *🡪 0.3* |
| 2) |  | No | ☐ | *🡪 END* |

|  |  |  |  |
| --- | --- | --- | --- |
| **0.3** |  | **What is the gender of the respondent?** | |
| 1) |  | Female | ☐ |
| 2) |  | Male | ☐ |
| 3) |  | Other | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **0.4** |  | **How old are you?** | |
| 1) |  | Enter age |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **0.5** |  | **What is your level of education?** | |
| 1) |  | No formal schooling | ☐ |
| 2) |  | Primary school | ☐ |
| 3) |  | High school | ☐ |
| 4) |  | Tertiary degrees | ☐ |

**PART A** | COMMUNITY CAPACITY

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **ADD LOCAL LANGUAGE IN THIS COLUMN** | **Enumerator Note: I would now like to ask you about you and your community. To what extent do you agree with the following statements?** | 1. Strongly agree | 2. Agree | 3. Neither agree nor disagree | 4. Disagree | 5. Strongly disagree | 99. Don’t know |
| **A.1** |  | My community has effective leaders. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.2** |  | My community has the resources it needs to take care of community problems (resources include money, information, technology, tools, raw materials, and services). | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.3** |  | My community supports programs for children and families | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.4** |  | People in my community are able to get the services they need. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.5** |  | People in my community know where to go to get things done. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.6** |  | People in my community communicate with leaders who can help improve the community. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.7** |  | People in my community work together to improve the community. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.8** |  | My community looks at its successes and failures so it can learn from the past | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.9** |  | My community develops skills and finds resources to solve its problems and reach its goals. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.10** |  | My community has priorities and sets goals for the future. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.11** |  | My community keeps people informed (e.g. via TV, radio, newspaper, internet, phone, neighbors) about issues that are relevant to them. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.12** |  | I get information/communication through my community to help with my home and work life. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **A.13** |  | People in my community trust public officials. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**PART B** | SOCIAL CAPITAL

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **To what extent do you agree with the following statements?** | 1. Strongly agree | 2. Agree | 3. Neither agree nor disagree | 4. Disagree | 5. Strongly disagree | 99. Don’t know |
| **B.1** |  | People in my community feel like they belong to the community. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **B.2** |  | People in my community are committed to the well being of the community. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **B.3** |  | People in my community have hope about the future. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **B.4** |  | People in my community help each other | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **B.5** |  | I have friends in my community. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **B.6** |  | I would get involved in trying to improve my community. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**PART C** | INCLUSIVENESS

**General**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Strongly agree | 2. Agree | 3. Neither agree nor disagree | 4. Disagree | 5. Strongly disagree | 99. Don’t know |
| **C.1** |  | My community treats people fairly  no matter what their background is. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **C.2** |  | In my community there are no ongoing tensions or conflicts. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**Disability inclusion**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Strongly agree | 2. Agree | 3. Neither agree nor disagree | 4. Disagree | 5. Strongly disagree | 99. Don’t know |
| **C.3** |  | Persons with disabilities have more or less the same access to community services as anybody else. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **C.4** |  | Persons with disabilities are valued contributors to community affairs and planning. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**Gender**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | **I would like to ask you about the roles of men and women in your community. Generally, who in your community…** | 1. Only men | 2. Mostly men | 3. Men and women equally | 4. Mostly women | 5. Only women | 99. Don’t know |
| **C.5** |  | …takes part in community meetings? | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **C.6** |  | …speaks during community meetings? | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **C.7** |  | …influences decisions about village affairs? | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **C.8** |  | …makes decisions about village affairs? | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**PART D** | LINKAGES

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Strongly agree | 2. Agree | 3. Neither agree nor disagree | 4. Disagree | 5. Strongly disagree | 99. Don’t know |
| **D.1** |  | My community works with organizations and agencies outside the community to get things done. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **D.2** |  | My community approaches relevant authorities if there is a problem we cannot solve on our own. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **D.3** |  | Authorities or other external partners usually take up our issues and provide support. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**PART E** | DISASTER RISK MANAGEMENT

**Community-level disaster preparedness**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Strongly agree | 2. Agree | 3. Neither agree nor disagree | 4. Disagree | 5. Strongly disagree | 99. Don’t know |
| **E.1** |  | My community tries to prevent disasters. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **E.2** |  | My community actively prepares for future disasters. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **E.3** |  | My community can provide emergency services during a disaster. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **E.4** |  | My community has services and programs to help people after a disaster. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **E.5** |  | If a disaster occurs, my community provides information about what to do. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **E.6** |  | My community is well prepared for future disasters. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |
| **E.7** |  | My community has taken concrete measures to reduce disaster risk. | ☐ | ☐ | ☐ | ☐ | ☐ | ☐ |

**Household-level disaster preparedness**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. None | 99. Don’t know |
| **E.8** |  | Does your household have a disaster preparedness plan? | ☐ | ☐ | ☐ |
| **E.9** |  | Do you know of any measures your household can take to prepare for a disaster? ***(2/99 🡪 E.11)*** | ☐ | ☐ | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **E.10** |  | **[Multiple] What measures are you aware of? (DO NOT READ OPTIONS)** | |
| 1) |  | Preparation of lifeline kit | ☐ |
| 2) |  | Family contingency planning | ☐ |
| 3) |  | Preparation and knowledge on use of First Aid | ☐ |
| 4) |  | Participate in different training or orientations | ☐ |
| 5) |  | Know the location of rescue personnel and equipment | ☐ |
| 6) |  | Monitor happenings in the community | ☐ |
| 7) |  | Listen to news or community warnings | ☐ |
| 8) |  | Participate in awareness activities | ☐ |
| 88) |  | Other | ☐ |
|  | | | |
| **E.11** |  | **How prepared is your household to handle a disaster?** | |
| 1) |  | Very prepared | ☐ |
| 2) |  | Somewhat prepared | ☐ |
| 3) |  | Somewhat unprepared | ☐ |
| 4) |  | Very unprepared | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **E.12** |  | **Which of the following statements best describes your household?** | |
| 1) |  | We have not done anything to prepare for a disaster or emergency *and we do not plan to* | ☐ |
| 2) |  | We have not done anything to prepare for a disaster or emergency *but we plan to in the coming months* | ☐ |
| 3) |  | We just recently began preparing for a disaster or emergency | ☐ |
| 4) |  | We are prepared for a disaster or emergency | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | **Note: In this question, replace the words ‘big storm’ by the main hazard in your target area.** | 1. Yes | 2. No | 99. Don’t know |
| **E.13** |  | **In case of a big storm, do you think this community would be warned ahead of time?** | ☐ | ☐ | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **E.14** |  | **[Multiple] Through which channels would people be warned? (DO NOT READ OPTIONS)** | |
| 1) |  | Bell | ☐ |
| 2) |  | Sirene | ☐ |
| 3) |  | Megaphone | ☐ |
| 4) |  | Whistle | ☐ |
| 5) |  | Public address | ☐ |
| 6) |  | Television | ☐ |
| 7) |  | Radio | ☐ |
| 88) |  | Other | ☐ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. No | 99. Don’t know |
| **E.15** |  | Over the past twelve months, have you participated in a disaster simulation /drill? | ☐ | ☐ | ☐ |

**PART F** | SHELTER

**Safe shelter awareness**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Enumerator note:**  **Show the shelter handout to the respondent.** | 1. **ILLUSTRATION A** | 2. **ILLUSTRATION B** | 3. **ILLUSTRATION C** | 99. Don’t know |
| **F.1** |  | Which one of the two houses is more storm-resistant? | ☐ | ☐ |  | ☐ |
| **F.2** |  | Which of these houses will perform best in earthquakes or storms? | ☐ | ☐ | ☐ | ☐ |
| **F.3** |  | Which of the three foundations is the strongest? | ☐ | ☐ | ☐ | ☐ |
| **F.4** |  | Which house is the most earthquake and storm-resistant? | ☐ | ☐ | ☐ | ☐ |
| **F.5** |  | Which of the three houses is least likely to suffer damage from a storm? | ☐ | ☐ | ☐ | ☐ |
| **F.6** |  | Which house is in the safest location? | ☐ | ☐ | ☐ | ☐ |

**Safe shelter practice**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Enumerator note:**  **This question block is about observations you have to make.**  **To what extent have the following safe shelter principles been applied in the house construction?** | 1. **Applied fully** | 2. **Applied partially** | 3. **Not applied** | 99. Not assessable |
| **F.7** |  | The house has no open areas (e.g. verandas, porches) whose roof is part of the main roof *(as shown in illustration F.1B)* | ☐ | ☐ | ☐ | ☐ |
| **F.8** |  | The house has appropriate cross-bracing on all walls  *(as shown in illustration F.2B)* | ☐ | ☐ | ☐ | ☐ |
| **F.9** |  | Beams rest on a recess of main poles *(as shown in the visual guide)* | ☐ | ☐ | ☐ | ☐ |
| **F.10** |  | The house mainframe is connected to a foundation.  *(as shown in illustration F.3A or F.3B)* | ☐ | ☐ | ☐ | ☐ |
| **F.11** |  | The roof structure is reinforced by storm straps.  *(as shown in the visual guide)* | ☐ | ☐ | ☐ | ☐ |
| **F.12** |  | The distance of any trees around the house is at least as long as the trees’ height. | ☐ | ☐ | ☐ | ☐ |

**PART G** | LIVELIHOOD

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **G.1** | **Based on which of the following sources does your household make its living. Consider food for household consumption and income. NOTE: TRANSLATE BOTH** | | | | |
|  | **G.1a Type A (natural resource-based sources)** |  | **G.1b Type B (sources not based on natural resources)** | |  |
| 1) | Crop and vegetable production (for household consumption) | ☐ | 1) Business income (non-agricultural) | | ☐ |
| 2) | Crop and vegetable production (for sale) | ☐ | 2) Wages (permanent employee, non-agricultural) | | ☐ |
| 3) | Livestock production | ☐ | 3) Casual labour (non-agricultural) | | ☐ |
| 4) | Agricultural labour | ☐ | 4) Public service salaries | | ☐ |
| 5) | Collection of non-timber forest products (NTFP) | ☐ | 5) Pensions or allowances | | ☐ |
| 6) | Fishing, fish farming, aqua product collection | ☐ | 6) Cash for Work | | ☐ |
| 7) | Trading of agricultural or fishing products, livestock and NTFP | ☐ | 7) Remittances (domestic or overseas) | | ☐ |
| 8) | Other natural resource-based sources | ☐ | 8) Other sources not based on natural resources | | ☐ |
| **G.2** | **G.2a Enumerator**: add the number of **Type A** sources (maximum:8) |  | **G.2b Enumerator**: add the number of **Type B** sources (maximum:8) | |  |
| 1) | No Type A source | ☐ | No Type B source | | ☐ |
| 2) | One Type A source | ☐ | One Type B source | | ☐ |
| 3) | Two Type A sources | ☐ | Two Type B sources | | ☐ |
| 4) | Three or more Type A sources | ☐ | Three or more Type B sources | | ☐ |
| **G.3** |  |  | How many percent would you say do **Type B sources** above contribute to your livelihood? | | ☐ |
| ☐ | 1) 76 - 100% | | ☐ |
| ☐ | 2) 51 - 75% | | ☐ |
| ☐ | 3) 26 - 50% | | ☐ |
| ☐ | 4) 0 - 25% | | ☐ |
| **G.4a** |  | **How many members does your household have (those living permanently in the house)?** | | | |
| 1) |  | Enter number | |  | |
| **G.4b** |  | **How many household members contribute to your household’s livelihood?** | | | |
| 1) |  | Enter number | |  | |

**Resilience measures**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. No | 99. Don’t know |
| **G.5** |  | Is anyone in your household a member of a savings group? | ☐ | ☐ | ☐ |
| **G.6** |  | Do you think that your household could get access to credit? | ☐ | ☐ | ☐ |
| **G.7** |  | Does your household hold any insurance for house and assets? | ☐ | ☐ | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **G.8** |  | **What is your level of household debt?** | |
| 1) |  | We have no debt. | ☐ |
| 2) |  | We can repay our debt **within 3 months** if we had to. | ☐ |
| 3) |  | We can repay our debt in **3 to 6 months** if we had to. | ☐ |
| 4) |  | We can repay our debt in **7 to 12 months** if we had to. | ☐ |
| 5) |  | We will need **more than one year** to repay our debt. | ☐ |
| 99) |  | I don't know | ☐ |

**Food security**

|  |  |  |  |
| --- | --- | --- | --- |
| **G.9** |  | **Which of the following statements best applies to your household?** | |
| 1) |  | All of our household members have enough to eat throughout the year. | ☐ |
| 2) |  | There are times in the year when we do not have enough food to eat. | ☐ |
| 3) |  | We generally have to prioritize who gets sufficient serves. | ☐ |
| 4) |  | None of our household members has enough food to eat for all or most of the year. | ☐ |
| 99) |  | I don't know | ☐ |

**PART H** | NATURAL RESOURCES

**Household-level Natural Resource Management (NHI)**

|  |  |  |  |
| --- | --- | --- | --- |
| **H.1** |  | **What energy source does your household use for cooking?** | |
| 1) |  | Wood, regular stove or open fire | ☐ |
| 2) |  | Wood, smoke-free or energy-efficient stove | ☐ |
| 3) |  | Electricity ***(🡪 H.3)*** | ☐ |
| 4) |  | Gas ***(🡪 H.3)*** | ☐ |
| 88) |  | Other ***(🡪 H.3)*** | ☐ |
| 99) |  | I don’t know ***(🡪 H.3)*** | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.2** |  | **Where do you collect the wood for cooking?** | |
| 1) |  | Only cut wood from trees | ☐ |
| 2) |  | Mainly cut wood from trees | ☐ |
| 3) |  | Mainly dead wood/branches on the ground | ☐ |
| 4) |  | Only dead wood/branches on the ground | ☐ |
| 88) |  | Other | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.3** |  | **Does your household compost organic waste (e.g. food scraps, egg shells)?** | |
| 1) |  | Yes | ☐ |
| 2) |  | No | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.4** |  | **How do you dispose of inorganic household waste (e.g. plastic, tins)?** | |
| 1) |  | Mainly dump around the house | ☐ |
| 2) |  | Mainly dump in a nearby river or sea | ☐ |
| 3) |  | Mainly dump in a bin | ☐ |
| 4) |  | Mainly burn | ☐ |
| 5) |  | Mainly recycle | ☐ |
| 88) |  | Other | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.5** |  | **Does your household look after any agricultural fields or gardens?** | |
| 1) |  | Yes | ☐ |
| 2) |  | No ***(🡪 H.10)*** | ☐ |
| 99) |  | I don’t know ***(🡪 H.10)*** | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.6** |  | **How do you fertilize your fields or gardens?** | |
| 1) |  | Not at all. | ☐ |
| 2) |  | We only use organic fertilizer. | ☐ |
| 3) |  | We mix organic and chemical fertilizers. | ☐ |
| 4) |  | We only use chemical fertilizer. | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.7** |  | **To what extent do you use pesticides?** | |
| 1) |  | Not at all. | ☐ |
| 2) |  | We apply pesticides about once a year. | ☐ |
| 3) |  | We apply pesticides 2-3 times a year. | ☐ |
| 4) |  | We apply pesticides 4 times a year or more often. | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.8** |  | **Regarding the majority of your fields or gardens, ho do you mainly irrigate the crops or vegetables?** | |
| 1) |  | Not at all; we rely on the rain. | ☐ |
| 2) |  | The fields are connected to an irrigation system (canals). | ☐ |
| 3) |  | We use groundwater from wells. | ☐ |
| 4) |  | We use a rainwater harvesting system. | ☐ |
| 99) |  | I don’t know | ☐ |

**Community-level Natural Resource Management (NCI)**

|  |  |  |  |
| --- | --- | --- | --- |
| **H.9** |  | **Does your community have a committee or group that manages or regulates the use of natural resources such as water, land, forests, wildlife, or fish?** | |
| 1) |  | Yes | ☐ |
| 2) |  | No | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.10** |  | **In terms of the use of natural resources, which of the following statements applies best to your community?** | |
| 1) |  | Every household can use as much as it wants or needs. | ☐ |
| 2) |  | There are some rules/regulations/restrictions, but these are not well enforced. | ☐ |
| 3) |  | There are some rules/regulations/restrictions, and these are well enforced. | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **H.11** |  | **With the current usage patterns of natural resources, would you say that in five years time, the community would still have the same level/quality of natural resources to rely on?** | |
| 1) |  | Yes, certainly: the level of resources is certain to be sustained | ☐ |
| 2) |  | Yes, likely: the level of resources is likely to be sustained | ☐ |
| 3) |  | No, unlikely: the level of resources is likely to diminish | ☐ |
| 4) |  | No, certainly not: the level of resources is certain to diminish | ☐ |
| 99) |  | I don’t know | ☐ |

**PART I** | HEALTH

**Health knowledge (HKI) Note** that questions I.1 – I.4 can be changed to reflect the most common diseases in the surveyed area (see supplementary sheet).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. No | 99. Don’t know |
| **I.1** |  | **Are you familiar with the disease Tuberculosis (TB)? *(2/99 🡪 I.3)*** | ☐ | ☐ | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **I.2** |  | **What are the signs and symptoms of TB? *(DO NOT READ OPTIONS)***   * Prolonged Cough (More than 3 Weeks) * Coughing Up Blood * Fever * Pain in the Chest * Night Sweats * Loss of Appetite * Rapid Weight Loss * Feeling Tired | |
| 1) |  | Respondent can list 5 or more of the above symptoms | ☐ |
| 2) |  | Respondent can list 3-4 of the above symptoms | ☐ |
| 3) |  | Respondent can list 1-2 of the above symptoms | ☐ |
| 4) |  | Respondent cannot list any of the above symptoms | ☐ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. No | 99. Don’t know |
| **I.3** |  | Are you familiar with dengue fever? ***(2/99 🡪 I.5)*** | ☐ | ☐ | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **I.4** |  | **What measures can you take to prevent Dengue Fever? *(DO NOT READ OPTIONS)***   * Cover Skin with Clothes * Cover Water Jars/Rainwater Collectors * Clean Up Areas in Community that Collect Standing Water * Use Mosquito Repellents (Spray, Lotion) on Body * Spray Internal Walls with Mosquito Repellents * Use other Mosquito Repellents (incense, electric bats/rackets) * Put Up Screens on Doors and Windows * Use Larvacide or Fish to Treat Water * Use Bed Nets/Insecticide Treated Bed Nets * Fogging, burning, etc. * Cleaning the surroundings | |
| 1) |  | Respondent can list 5 or more of the above measures | ☐ |
| 2) |  | Respondent can list 3-4 of the above measures | ☐ |
| 3) |  | Respondent can list 1-2 of the above measures | ☐ |
| 4) |  | Respondent cannot list any of the above measures | ☐ |

**Health practices (HPI)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. No | 99. Don’t know |
| **I.5** |  | Are there reservoirs in the surroundings in which stagnant water could gather?  ***(Observation)*** | ☐ | ☐ | ☐ |
| **I.6** |  | Over the past five years, have you taken part in a First Aid course? | ☐ | ☐ | ☐ |

**Access to health services (HSI)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  | 1. Yes | 2. No | 99. Don’t know |
| **I.7** |  | Are you aware of a community health worker who you can contact? | ☐ | ☐ | ☐ |
| **I.8** |  | Is there a functional primary health center in this community? | ☐ | ☐ | ☐ |
| **I.9** |  | If a woman in this community is pregnant, can she receive pre- and postnatal care (through a midwife)? | ☐ | ☐ | ☐ |

**Usage of health services (HUI)**

|  |  |  |  |
| --- | --- | --- | --- |
| **I.10** |  | **When do you use formal health services?** | |
| 1) |  | Never | ☐ |
| 2) |  | In emergencies only | ☐ |
| 3) |  | In emergencies, if there is prolonged or serious sickness, or to give birth | ☐ |
| 4) |  | In emergencies, if there is prolonged or serious sickness, to give birth, and for check-ups *(🡪 J.1)* | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **I.11** |  | **Which of the following factors keep you from using the health service more frequently?** | |
| 1) |  | Long distance | ☐ |
| 2) |  | High cost | ☐ |
| 3) |  | Long wait times | ☐ |
| 4) |  | Poor service | ☐ |
| 5) |  | Lack of trust | ☐ |
| 6) |  | Loss of income | ☐ |
| 7) |  | Beliefs or traditions | ☐ |

**PART J** | WATER & SANITATION

**Safe drinking water (SWI)**

|  |  |  |  |
| --- | --- | --- | --- |
| **J.1** |  | **What is your main source of drinking water, and do you treat it before drinking?** | |
| 1) |  | Tap, treated | ☐ |
| 2) |  | Tap, untreated *🡪 J.3* | ☐ |
| 3) |  | Bottled water | ☐ |
| 4) |  | Closed well, treated | ☐ |
| 5) |  | Closed well, untreated *🡪 J.3* | ☐ |
| 6) |  | Open well, treated | ☐ |
| 7) |  | Open well, untreated *🡪 J.3* | ☐ |
| 8) |  | Rainwater harvesting, treated | ☐ |
| 9) |  | Rainwater harvesting, untreated *🡪 J.3* | ☐ |
| 88) |  | Other, treated | ☐ |
| 89) |  | Other, untreated *🡪 J.3* | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **J.2** |  | **What do you usually do to make water safer to drink?**  ***(DO NOT READ OPTIONS)*** | |
| 1) |  | Boil OR water filter | ☐ |
| 2) |  | Add bleach/chlorine | ☐ |
| 3) |  | Solar disinfection | ☐ |
| 4) |  | Strain water through cloth OR Let it stand and settle | ☐ |
| 88) |  | Other | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **J.3** |  | **Does your household have sufficient drinking water throughout the year?** | |
| 1) |  | Yes | ☐ |
| 2) |  | No | ☐ |
| 99) |  | I don’t know | ☐ |

**Hand-washing practices (HWI)**

|  |  |  |  |
| --- | --- | --- | --- |
| **J.4** |  | **What are the activities you routinely associate with hand-washing?**  ***(READ OPTIONS one by one)*** | |
| 1) |  | Before food preparation | ☐ |
| 2) |  | After food preparation | ☐ |
| 3) |  | Before feeding children | ☐ |
| 4) |  | Before eating | ☐ |
| 5) |  | After eating | ☐ |
| 6) |  | After defecating | ☐ |
| 7) |  | After cleaning baby’s bottom | ☐ |
| 8) |  | After caring for a sick person | ☐ |
| 9) |  | After handling animals | ☐ |
| 99) |  | I don’t know | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **J.5** |  | **OBSERVATION: Does the household have a fixed water point (like a tap) for hand-washing?** | |
| 1) |  | No. | ☐ |
| 2) |  | Yes, there is a foxed water point but no soap. | ☐ |
| 3) |  | Yes, there is a fixed water point and soap. | ☐ |
| 99) |  | This aspect cannot be assessed. | ☐ |

**Latrine usage (LUI)**

|  |  |  |  |
| --- | --- | --- | --- |
| **J.6** |  | **Do you have a latrine?** | |
| 1) |  | Yes | ☐ |
| 2) |  | No | ☐ |

|  |  |  |  |
| --- | --- | --- | --- |
| **J.7** |  | **How often do you clean your latrine?** | |
| 1) |  | Daily | ☐ |
| 2) |  | Few times a week | ☐ |
| 3) |  | Weekly | ☐ |
| 4) |  | Monthly | ☐ |
| 5) |  | Other | ☐ |

**THANK YOU** FOR YOUR PARTICIPATION IN THIS SURVEY!