



## StockHousehold Survey Questions for Select Health Behaviors

**Note:** While we are presently using the DHS indicator, we hope to encourage the use of ideal indicators listed for select priority behaviors as they are a better measure to be collected.

BEHAVIORS	INDICATORS	RECOMMENDED QUESTIONS
<b>CHILD HEALTH AND IMMUNIZATION</b>		
<p><b>Care for Pneumonia</b></p> <p>Caregivers appropriately manage care for signs and symptoms of pneumonia in children</p>	<p>Percentage of children under five who had symptoms of ARI and for whom prompt treatment was sought from a health facility or provider (DHS)</p>	<p>Please cite signs and symptoms of ARI:</p> <ul style="list-style-type: none"> <li>- Cough</li> <li>- Difficulty breathing</li> <li>- Fever</li> <li>- Fast breathing</li> <li>- In drawing of lower chest wall</li> </ul> <p>Has your child ever had these symptoms?</p> <p>If yes, did you take him/her to a health facility or provider?</p> <ul style="list-style-type: none"> <li>- Within 24 hours</li> <li>- Within 2 days</li> <li>- Longer</li> </ul>
<p><b>Management of Diarrhea</b></p> <p>Caregivers provide appropriate treatment for diarrhea</p>	<p>Percentage of children born in the five years preceding the survey with diarrhea in the two weeks preceding the survey who received oral rehydration solution (ORS), that is either fluid from an ORS packet or a pre-packaged ORS flu (DHS)</p>	<p>Has your child had diarrhea in the last two weeks?</p> <p>If yes, did you give him/her ORS?</p> <p>If yes, did you give him/her zinc?</p>
<p><b>Full Course of Immunizations</b></p> <p>Caregivers seek a full course of timely vaccinations for infants and children under 2 years</p>	<p>Percentage of children 12-23 months who had received all 8 basic vaccinations (DHS)</p>	<p>Have you taken your child to receive all vaccinations?</p>
<b>MALARIA</b>		
<p><b>Insecticide-Treated Net Use</b></p> <p>Pregnant women and children sleep under an insecticide-treated net (ITN) correctly and consistently</p>	<p>Percentage of pregnant women who slept under an insecticide-treated net (ITN) the night before the survey (DHS)</p>	<p>Did you sleep under a mosquito net last night all night?</p> <p>Do you have any children under five?</p> <p>If yes, did they sleep under a mosquito net last night all night?</p>
	<p>Percentage of children under five who slept under an insecticide-treated net (ITN) the night before the survey (DHS)</p>	

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<p><b>Intermittent Preventive Treatment of Malaria in Pregnancy</b></p> <p>Pregnant women complete a full course of intermittent preventive treatment of malaria (IPTp)</p>	<p>Percentage of women age 15-49 with a live birth in the two years preceding the survey who during the pregnancy took 3 or more doses of SP/Fansidar, with at least one dose during an antenatal care visit (DHS)</p>	<p>How many times did you attend ANC visits: [list number of times]</p> <p>Did you receive malaria prevention treatment?</p> <p>If yes, how many times? [list times]</p>
<p><b>Care for Malaria</b></p> <p>Caregivers manage prompt and appropriate care for symptoms of malaria</p>	<p>Among children under age five with fever in the two weeks preceding the survey, percentage for whom advice or treatment was sought from a health facility or provider (DHS)</p>	<p>Has your child had a fever in the last two weeks?</p>
<b>MATERNAL HEALTH</b>		
<p><b>Antenatal Care</b></p> <p>Pregnant women complete a full course of quality antenatal care (ANC)</p>	<p>Percentage of women who had a live birth in the three years preceding the survey who had 4+ antenatal care visits (DHS)</p>	<p>When did you have your last baby?</p> <ul style="list-style-type: none"> <li>- 1 year ago</li> <li>- 2 years ago</li> <li>- 3 years ago</li> <li>- 4 years ago</li> <li>- 5 years ago</li> <li>- More than 5 years ago</li> </ul> <p>How many antenatal care visits did you attend on your last birth?</p> <ul style="list-style-type: none"> <li>- 1</li> <li>- 2</li> <li>- 3</li> <li>- 4</li> <li>- More than 4</li> <li>- None</li> </ul>
<p><b>Delivery in Health Facility</b></p> <p>Pregnant women deliver in a health facility with an equipped, qualified provider</p>	<p>Percentage of live births in the three years preceding the survey delivered at a health facility (DHS)</p>	<p>Did you deliver at a health facility?</p> <p>If yes, what type?</p> <ul style="list-style-type: none"> <li>- Health post</li> <li>- Health center</li> <li>- Hospital</li> <li>- Other:</li> </ul>
<b>NEWBORN HEALTH</b>		
<p><b>Early Initiation of Breastfeeding</b></p> <p>Mothers initiate breastfeeding within one hour after delivery</p>	<p>Among last-born children born in the two years preceding the survey the percentage who started breastfeeding within 1 hour of birth (DHS)</p>	<p>Did you start breastfeeding your newborn within 1 hour of giving birth?</p> <p>If no, when did you start:</p> <ul style="list-style-type: none"> <li>- Within 1 day</li> <li>- More than 1 day</li> </ul>

BEHAVIORS	INDICATORS	RECOMMENDED QUESTIONS
<p><b>Essential Newborn Care</b></p> <p>Caregivers provide essential newborn care immediately after birth</p>	<p>Among last-born children born in the 2 years preceding the survey, percentage who started breastfeeding within 1 hour of delivery (DHS)</p>	<p>Did you breastfeed your last born within one hour of birth?</p>
	<p>IDEAL - Composite of:</p>	
	<p>Percentage of home births with cord cut with clean instrument</p>	<p>Did you have a home birth?</p> <p>Did the person helping you cut the cord with a clean instrument?</p> <p>Did you get infected any time after the cutting of the cord?</p>
	<p>Percentage of newborns with nothing harmful applied to cord (for home and facility deliveries)</p>	<p>What did you apply to the cord after the cutting?</p> <ul style="list-style-type: none"> <li>- Disinfectant</li> <li>- Other:</li> </ul>
	<p>Percentage of newborns dried immediately after delivery (for home and facility deliveries)</p>	<p>Was your baby dried immediately after delivery?</p>
	<p>Percentage of children born in the last 24 months who were put to the breast within one hour of birth. (Measure Evaluation)</p>	<p>Was your baby put on your breast immediately after birth, within one hour?</p>
	<p>If facility birth, percentage of caregivers who state they obtained/had used by provider a clean care kit</p>	<p>Did your facility provider have supplies once your baby was born?</p> <p>What supplies? [see above]</p>
<p><b>Care for Newborn Illness</b></p> <p>Caregivers seek prompt and appropriate care for signs and symptoms of newborn illness</p>	<p>IDEAL: Percentage of women with a live birth who reported seeking care from a skilled provider for a sick newborn (Measure Evaluation)</p>	<p>Did your child get sick when s/he was a newborn (up to day 28)?</p> <p>Did you take him/her to a skilled provider?</p> <p>If yes, to whom:</p> <ul style="list-style-type: none"> <li>- Nurse</li> <li>- Other:</li> </ul>

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<b>NUTRITION</b>		
<p><b>Exclusive Breastfeeding</b></p> <p>Mothers breastfeed exclusively for six months after birth</p>	<p>Percentage of youngest children under two years of age living with the mother who are exclusively breastfed, age 0-5 months (DHS)</p>	<p>Do you breastfeed your child?</p> <p>If yes, until when:</p> <ul style="list-style-type: none"> <li>- Less than 1 month</li> <li>- 1 month</li> <li>- 2 months</li> <li>- 3 months</li> <li>- 4 months</li> <li>- 5 months</li> <li>- 6 months</li> <li>- Longer</li> </ul>
<p><b>Complementary Feeding</b></p> <p>Caregivers feed adequate amounts of nutritious, age-appropriate foods to children from 6 to 23 months of age, while continuing to breastfeed</p>	<p>Percentage of breastfed children age 6-23 months fed four or more food groups and the minimum meal frequency (DHS)</p> <hr/> <p>IDEAL: Among all children 6-23 months, percentage fed with all 3 infant and young child feeding practices</p>	<p>Have you used an infant and/or young child feeding practice for your child aged___?</p> <p>If yes, which ones:</p> <ul style="list-style-type: none"> <li>- Provide animal source proteins and nutrient-rich fruits and vegetables daily</li> <li>- Provide appropriate adequacy</li> <li>- Provide in appropriate frequency</li> </ul> <p>What do you feed your child aged___:</p> <ul style="list-style-type: none"> <li>- Fish</li> <li>- Meat</li> <li>- Eggs</li> <li>- Dairy products</li> <li>- Fruits</li> <li>- Nuts</li> <li>- Legumes</li> <li>- Vegetables</li> <li>- Other:</li> </ul>
<b>REPRODUCTIVE HEALTH</b>		
<p><b>Adolescent First Birth</b></p> <p>Sexually active adolescents use a modern contraceptive method to delay first birth until after age 18</p>	<p>Percentage of sexually active unmarried women age 15-19 currently using any modern method of contraception (DHS)</p>	<p>Do you use a family planning method?</p> <p>If yes, which one?</p> <ul style="list-style-type: none"> <li>- Oral hormonal pills</li> <li>- Sterilization – male and female</li> <li>- Intra-uterine device</li> <li>- Implant</li> <li>- Vaginal barrier methods</li> <li>- Condom – male and female</li> <li>- Emergency contraception</li> </ul> <p>For how long?</p>

BEHAVIORS	INDICATORS	RECOMMENDED QUESTIONS
	IDEAL: Percentage of sexually active unmarried adolescents age 15-18 currently using any modern method of contraception	Do you use a family planning method? If yes, which one? [see above] For how long?
<b>Birth Spacing</b>  After a live birth, women or their partners use a modern contraceptive method to avoid pregnancy for at least 24 months	Percentage of currently married or in union women using family planning for spacing (DHS)	Do you use a family planning method? If yes, which one? [see above] For how long?  What is the purpose of your contraceptive use? - Birth spacing - Other:
	IDEAL: Percentage of adults, with a child under age two using a family planning method in order to space	Do you use a family planning method? If yes, which one? [see above] For how long?
WASH		
<b>Handwashing with Soap</b>  Family members wash hands with soap at 4 critical times [after defecation, after changing diapers, before food preparation and before eating]	Among households where place for handwashing was observed, percentage of households with soap and water. Soap includes soap or detergent in bar, liquid, powder or paste form. (DHS)	Observe: Does the household have a handwashing station?  Is there soap at this station?  Is there water at this station?
<b>Safe Disposal of Human Feces</b>  Family members safely dispose of human feces	Percentage of households with improved and non-shared toilet facilities (DHS)	Do you have a household latrine?
<b>Safe Drinking Water</b>  Family members drink safe water	Percentage of households whose main source of drinking water is an improved source (DHS)	Observe: Is there a nearby improved source for drinking water?  Ask: Where do you get your water from? - Well - Lake - River - Other:  Do you think this source is safe for drinking?