

**HOUSEHOLD SURVEY MANUAL:
DIARRHOEA AND
ACUTE RESPIRATORY INFECTIONS**

Division for the Control of Diarrhoea and Acute Respiratory Disease

World Health Organization

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THE HOUSEHOLD SURVEY MANUAL

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TABLE OF CONTENTS

	Section-Page
INTRODUCTION	A
Key WHO/UNICEF Programme Indicators Measured	A-2
Flowchart	A 4
1.0 PLAN THE SURVEY	B
1.1 Select Survey Coordinator	B-1
1.2 Decide on Rates to Measure, Sections of Survey to Include, and Geographic Scope of Survey	B-1
Rate List: CDD/ARI Household Survey	B 4
1.3 Decide on the Time Period to be Covered by the Survey	B-19
1.4 Determine Sample Size	B-20
Denominator Sample Sizes for an Initial CDD/ARI Survey	B-24
Worksheet for Determining Sample Size for an Initial CDDIARI Household Survey .	B-25
1.5 Prepare Budget	B-29
2.0 PREPARE TO CONDUCT THE SURVEY	C
2.1 Adapt and Translate Questionnaire and Other Survey Forms as Necessary	C-1
2.2 Pretest Survey Forms and Revise them as Necessary	C-11
2.3 Select Communities where Clusters will be Located	C-14
Sampling Process	C-16
2.4 Prepare Information and Guidelines Needed for Selection of Households in Clusters	C-20
Process for Selecting Households in Clusters	C-21
2.5 Select Survey Personnel	C-23

2.6 Copy Questionnaire	C-27
2.7 Make Other Administrative Arrangements	C-32
2.8 Train Survey Personnel	C-33
3.0 CONDUCT/SUPERVISE THE SURVEY	D
3.1 Select Households in Clusters	D-1
3.2 Conduct Interviews	D-2
3.3 Investigate ORS Access	D-2
3.4 Monitor Performance of Survey Personnel	D-2
3.5 Compile Data	D-3
3.6 Provide Feedback and Solve Problems	D-14
Examples of Problems, Causes, and Remedial Actions	D-15
4.0 ANALYSE SURVEY RESULTS	E
4.1 Calculate Rates	E-1
4.2 Calculate Limits of Precision	E-11
Worksheet for Calculating Limits of Precision	E-13
4.3 Interpret Survey Results	E-15
4.4 Report Survey Results	E-17
ANNEXES	
CDD/ARI Core Household Survey Questionnaire	F
Question-by-Question Explanation of Core Questionnaire	G
ORS Access Investigation and Question-by-Question Explanation	H
Forms Used in Compiling and Analysing Core Survey Data	I
Green Drug Option (Cough)	J

Yellow Drug Option (ANA)	K
Pink Drug Option (Diarrhoea)	L
Breastfeeding Option	M
Age Option	N
Measles Option	O
Gender Option	P
Instructions for the Drug Analyst	Q
Alphabetical Drug List	Q-16
Converting 2-Week Diarrhoea Prevalence to 2-Week Incidence and Estimating Annual Incidence Rate from 2-Week Incidence	R
Random Selection	S
Calculating Sample Size for Follow-up Surveys	T
Calculator Programmes for Limits of Precision	U
Coordinator's Checklist and Time Chart, Sample Supervisors' Checklist, Sample Surveyors' Checklist	V
Training Surveyors and Supervisors	W
Notes and Exercises, Core Survey	W-6
Tips on Good Interviewing Technique	W-10
Sample Training Agenda, Core Survey	W-67
Notes and Exercises, Survey with Options	W-73
Sample Training Agenda, Survey with Options	W-109
Directory of Software to Support Survey and Instructions on Using Lotus Spreadsheets	X
Glossary	Y

INTRODUCTION

WHY CONDUCT HOUSEHOLD SURVEYS?

National programmes to control diarrhoeal disease and acute respiratory infections (CDD and **ARI** programmes) need information on the population's knowledge about the diseases, careseeking practices, and treatment practices in order to effectively plan, manage, and evaluate activities. Some of this information can be obtained through reports from health facilities. However, cases seen in health facilities represent only a fraction of actual cases occurring in the community. Many cases may be treated at home or get well without treatment. Some cases will get worse and die at home without coming to the attention of the health system. Therefore, it is useful to visit households to ask about illnesses, types of care sought, and treatment given. A methodology for a sample survey of households is presented in this manual.

GENERAL SURVEY OBJECTIVES

This household survey can be used in the following ways:

- to establish a baseline against which changes in the population's knowledge, careseeking practices, and treatment practices can later be measured,
- to measure progress and identify problems in existing CDD and **ARI** programmes by measuring key **WHO/UNICEF** programme indicators outlined in the following table, and by measuring other indicators and rates summarized in Section B.

For the household survey to contribute positively to your national programme, it is essential that you plan the survey with a clear idea of what rates you need in order to evaluate programme activities, identify problems, and make decisions about subsequent programme activities.

Carefully conducted periodic surveys of this type will provide reliable information on long-term trends to determine the impact and future direction of a CDD or **ARI** programme. Follow-up surveys should be done when sufficient activities have taken place to expect detectable changes in knowledge, careseeking practices, or treatment practices.

KEY WHO/UNICEF PROGRAMME INDICATORS MEASURED

The following indicators are among the key child survival programme indicators agreed upon by WHO and UNICEF from the UNICEF Child Survival Monitoring Report. Additional important indicators measured by this survey are presented in Section B of this manual. See the Evaluation modules of the CDD and ARI Programme Management courses for further information on indicators useful to these programmes.

Diarrhoea	Caretaker knowledge of home case management Use of ORT (increased fluids) plus continued feeding Access to oral rehydration salts (ORS)
Acute Respiratory Infection (ARI)	Caretaker knowledge of when to seek care for ARI Careseeking from appropriate providers for ARIs needing assessment (i.e., having fast or difficult breathing)

WHY CONDUCT COMBINED SURVEYS OF DIARRHOEAL AND ACUTE RESPIRATORY DISEASES?

CDD and ARI programmes both have key programme indicators which require a household survey for measurement. For example, CDD programmes must survey households in order to measure caretakers' knowledge of home therapy for diarrhoea. ARI programmes must survey households in order to measure caretakers' knowledge of when to seek care for ARI.

Both CDD and ARI programmes are primarily concerned with the same target population, that is, children less than 5 years of age.

Often CDD and ARI programmes are within the same division in the Ministry of Health and share personnel and other resources. Using a combined survey can help conserve these resources. Surveys often mean that 20 - 30 health workers must be absent from their usual clinical jobs for several weeks to participate as surveyors. Combining the surveys means these absences will occur less often.

This manual provides a combined survey instrument which measures rates important to both CDD and ARI programmes.

PURPOSE OF THIS MANUAL

This manual is written for coordinators of **CDD/ARI** household surveys. By "coordinator," we mean the person responsible for planning the survey, selecting and training survey personnel, overseeing the survey, and analyzing the results. If these functions are divided among a number of people, then each person will need to study the relevant sections of the manual.

In some countries the CDD or ARI programme manager or the maternal and child health evaluation officer may serve as the survey coordinator. In any case, the relevant programme managers should be responsible for the initial decisions about the rates to measure in the survey, the sections of the survey to include, and the timing and geographic scope of the survey.

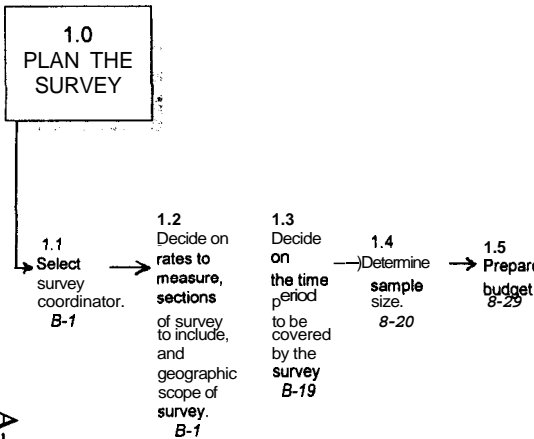
Here are some examples of how this manual can help the survey coordinator. This manual:

- describes all the steps involved in planning and conducting a household survey. These steps are shown on the flowchart on the next page. Sections B, C, D, and E of the manual correspond to the major steps 1.0, 2.0, 3.0 and 4.0 on the flowchart.
- provides a core survey instrument for measuring rates most important to ARI and CDD programmes.
- describes options for expanding the core survey instrument to obtain breastfeeding rates, drug use rates, and other rates which may be needed by some programmes.
- provides worksheets for determining sample size.
- provides an extensive section on training of surveyors and supervisors, including agendas, exercises, training notes, and pages which can be photocopied and given to survey supervisors and surveyors to study during their training.
- includes forms for compiling data, calculating rates and limits of precision, and analysing survey results.
- provides a directory of supporting software available from the Division for the Control of Diarrhoeal and Acute Respiratory Disease (CDR) at WHO.
- includes a checklist and time chart of tasks to be done by the survey coordinator, as well as examples of checklists for surveyors and supervisors.

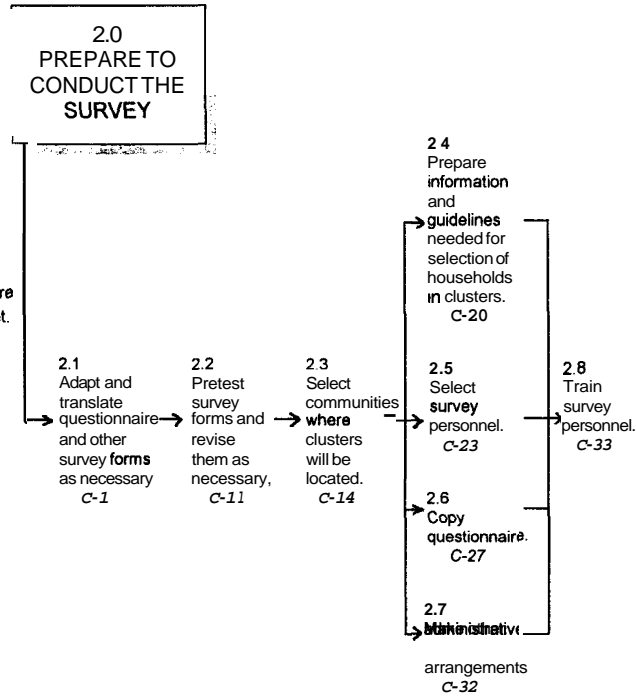
Before beginning study of the manual, the survey coordinator may wish to refer to the Coordinator's Checklist and Time Chart in Section V for an overview of the survey process and the time required for planning and preparation.

Flowchart: Conducting CDD/ARI Household Surveys

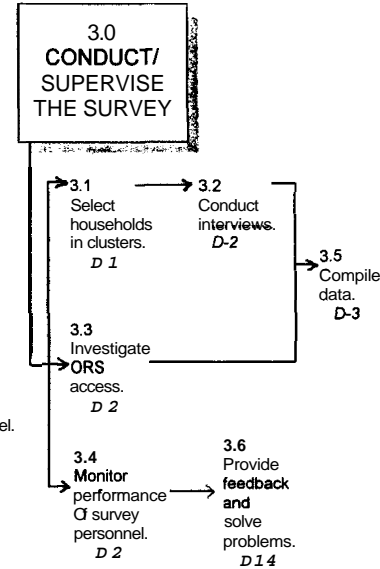
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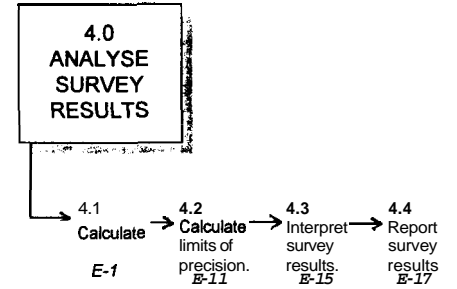
SECTION C:



SECTION D:



SECTION E:



Page references are in italics below each step.