

Generic Household Survey: Rapid Assessment

By using some of the demographic health modules that would otherwise be asked in a formal household survey exercise, a company can obtain informal demographic health information. This information will significantly facilitate the planning of systematic household survey exercise should this be needed.

The household survey is critical to establishing a viable baseline for subsequent impact monitoring but it is only a beginning. The ongoing monitoring and evaluation (M&E) of a project is probably more important than the initial assessment and the M&E system should be designed to identify potential positive and negative changes in a timely fashion. M&E systems are complex undertakings and it is critical that appropriate and realistic key performance indicators are selected. The baseline assessment survey needs to select those potential indicators that can actually be resurveyed at a household and community level.

Technical note: It is pointless to try to establish outcomes such as maternal and infant mortality rates for small communities. These are important indicators but they require large populations and are typically performed at a national level.

Key areas of inquiry

Respondent demographics

Housing Characteristics

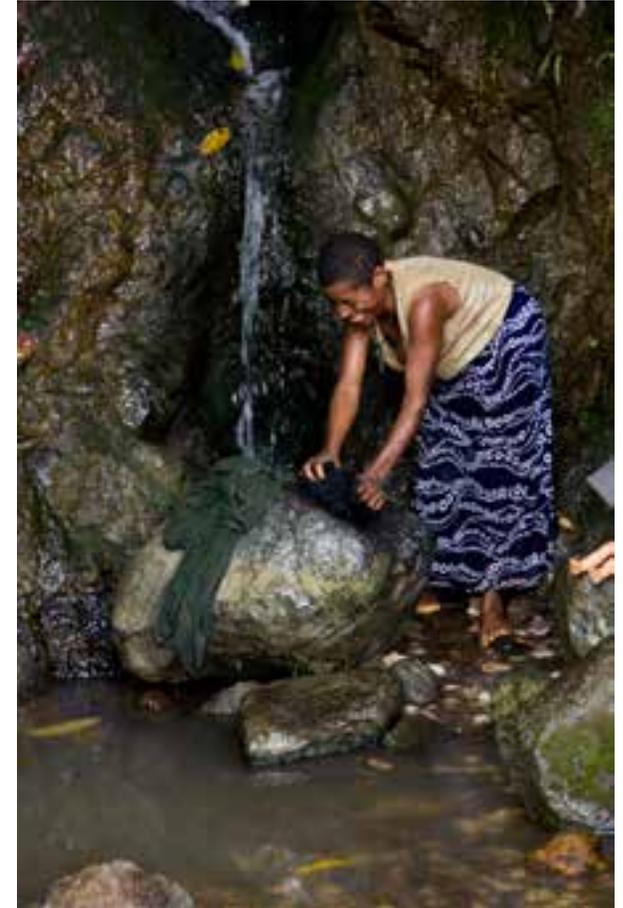
Household assets

Household fuel source

Water and Sanitation

Economic activity

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Key areas of inquiry	Considerations/Questions	Response
Respondent demographics	Age, sex, nationality	
	Children, relatives, friends, etc	
Housing Characteristics	What materials are your house(s) constructed of?	
	What is the roof made of?	
	What are the floors made of?	
	How many rooms are in the house?	
	What is a typical family/household size?	
	Permanent resident or seasonal?	
Household assets	List household assets, e.g., vehicles, bikes, cell phone, TV, etc	
Household fuel source	Is it biomass, wood, charcoal, gas, electricity?	
Water and Sanitation	What is the main source of drinking water for your household? (see water source table below)	
	How long does it take to collect the water?	
	Is your main source of drinking water available all year round?	
	What toilet facility does your household use?	
Economic activity	Are there business activities such as trade store, rental, agricultural products, transport, etc.?	
	Do you sell cash crops?	
	Do you sell livestock?	
	What is the level of income per month, and is it stable or does it fluctuate?	
	What is your household's level of consumption per month for transport, trade store items, fuel, clothing, medications, medical services, educational fees, etc?	



Water Source	Yes/No	Yes/No
Piped water	Piped into household or yard	Piped into neighborhood (communal)
Well water	Well/bore in yard	Public well/bore (communal)
Surface water	Spring	River/stream
Tanks	Household rain water tank	Communal rain water tank



A. HEALTH SERVICE QUESTIONS	
A1 How many days ago was the last time anyone in this household used a health service?	
A2 What was the reason for this visit?	Please use X for your answer
Antenatal care	
Delivery	
Postnatal care	
Illness	
Accident/Trauma	
Health check up	
Family planning	
Other (specify)	
A3 Where did the affected person go to receive this health service?	Please use X for your answer
Aid post	
Sub-health centre	
Hospital	
Traditional practitioner	
Other (specify)	
A4 How did the affected person get to the health service?	Please use X for your answer
On foot	
By river/boat	
Vehicle	
Ambulance	
Helicopter	
Plane	
Other (specify)	
A5 How long did it take to get to the health service?	

B. PREVENTIVE HEALTH		
		Yes/No
B1	Do you have any mosquito nets in this house?	
IF NOT		
B2	Why don't you have any mosquito nets?	Please use X for your answer
	Too costly	
	Not available	
	Have flywire	
	Use spray	
	Other (specify)	
IF YES		
B3	How many mosquito nets does your household have?	
B4	Who in your house uses the mosquito nets to sleep?	
	Everybody	
	Females only	
	Males only	
	Children	
	Mother and children	
	Pregnant woman	
	Father and mother only	
	(specify)	

B5	How often do these people use the mosquito nets ?	
	Every night	
	Some nights only	
	When it is hot	
	Seasonal	
	Other (specify)	
B6	Why are mosquito nets used?	Please use X for your answer
	Protect against malaria	
	Protect from flies and other insects	
	To prevent mosquito bites	
	Privacy	
	Security	
	Other (specify)	



C.	FAMILY HEALTH QUESTIONNAIRE			
		Yes	No	Don't know
C1	Has anyone in your family been ill with a fever in last two weeks?			
C2	Has anyone in your family been ill with a cough in last two weeks?			
C3	When they had a cough, did they breathe faster than normal with short, fast breaths?			
C4	Has anyone in your family been ill with diarrhoea in last two weeks?			
C5	Has anyone in your family been ill with diarrhea in last 24 hours?			
C6	How many days did the diarrhea last?			
C7	Was there any blood in their stools?			
C8	Was anything given to your family member to treat the diarrhea?			

C9	Where did you seek advice or treatment for the diarrhea?	Please use X for your answer
	Your home	
	Other home	
	Hospital	
	Aid post	
	Sub-health centre	
	Other (specify)	

D	FEMALE HEALTH QUESTIONNAIRE	
	For females aged under 50 years who have given birth in past 5 years.	Answer
D1	When was your last birth?	
D2	Was the child born alive?	
D3	Is the child still alive?	
	If yes, what is the child's PNO	
D4	Was the child born in the area?	
	If no, where?	
D5	When you were pregnant with your last child, did you see anyone for antenatal care?	
D6	If yes, whom did you see?	Please use X for your answer
	Doctor	
	Nurse	
	Midwife	
	Traditional birth attendant	
	Female relative	
	Other (specify)	
D7	How many times did you receive care during your last pregnancy	
D8	Who assisted you with the delivery of your last baby?	
	Doctor	
	Nurse	
	Midwife	
	Traditional birth attendant	
	Village birth attendant	
	Female relative	
	Other (specify)	

E. HIV/AIDS		
		Yes/No
E1	Have anyone in this household ever heard of an illness called AIDS?	
E2	How did you learn about HIV/AIDS?	Please use X for your answer
	Radio	
	TV	
	Newspaper/magazines	
	Posters	
	Health workers	
	Church	
	Schools/teachers	
	Community meetings	
	Friends/relatives	
	Workplace	
	Other (specify)	
		Yes/No/ Don't know
E3	Is there anything a person can do to avoid getting AIDS?	

E4	What do you think a person can do to avoid getting HIV/AIDS?	Please use X for your answer
	Practice safe sex	
	Abstain from sex	
	Use condoms	
	Have sex with only one partner	
	Avoid sex with prostitutes	
	Avoid same sex	
	Avoid blood transfusions	
	Avoid use of reusable needles	
	Avoid kissing	
	Avoid mosquito bites	
	Seek traditional healer	
	Other (specify)	
		Yes/No/Don't know
E5	Is it possible for a healthy looking person to have the AIDS virus?	
E6	Do you believe that people with AIDS die?	Please use X for your answer
	Almost never	
	Sometimes	
	Almost always	
	Don't know	
E7	Do you think your chance of getting AIDS is ...	Please use X for your answer
	Small	
	Moderate	
	Great	
	No risk at all	
	Has AIDS	

		Yes/No
E8	Has your knowledge of AIDS influenced or changed your sexual behavior	
E9	In what way has your knowledge of HIV/AIDS influenced or changed your behavior?	Please use X for your answer
	Stopped all sex	
	Started using condoms	
	Restricted sex to one partner	
	Don't know	
	Other (specify)	
		Yes/No
E10	Have you heard of other diseases (not AIDS) which can be transmitted through sexual contact?	
E11	Can you name the other diseases?	Please use X for your answer
	Gonorrhoea	
	Syphilis	
	Herpes	
	Hepatitis	
	Other(specify)	

F.	Alcohol and Drug Use			
		Yes	No	Unsure
F2	What do you smoke?			
	Cigarettes / Pipe / Other			
F3	In the last 24 hours, how many did you smoke?			
F4	Does anyone in your household drink alcohol?			
F5	Have you ever felt you should cut down on your drinking?			
F6	Have people annoyed you by criticizing your drinking?			
F7	Have you ever felt bad or guilty about your drinking?			
F8	Have you ever needed a drink first thing in the morning to get rid of a hang-over?			
F9	Is anyone in this household taking a hard drug such as Marijuana in the past 12 months?			
F10	Is anyone in this household taking any hard drug now, such as Marijuana?			