

Annex 11 Survey form

(A) Cluster form

Date	Entered automatically by the Android
Recorder	[enter 4 digit code] <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Evaluation Unit	[enter 5 digit code] <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Cluster	[enter 3 digit code] <input type="text"/> <input type="text"/> <input type="text"/>
What is the estimated total number of households in the cluster?	[Enter the estimated total number of households]
How are households in the cluster being selected?	1 = Compact segment sampling 2 = Simple random sampling 3 = Systematic random sampling 99 = Other
How many segments have you divided the cluster into? <i>(If selection method is 1 = Compact segment sampling)</i>	[Enter the number of segments]

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Date

(B) Household questionnaire

Recorder

Section 1: Identifying information

1	Country	<input type="text"/>
2	Evaluation Unit [select 5 digit code]	<input type="text"/>
3	Cluster [select 3 digit code]	<input type="text"/>
4	Household ID [write household number followed by the head of household name]	<input type="text"/>

Section 2: Household GPS

G1	Latitude (N)	<input type="text"/> • <input type="text"/>
G2	Longitude (E)	<input type="text"/> • <input type="text"/>
G3	Elevation (metres)	<input type="text"/>
G4	Accuracy (metres)	<input type="text"/>

Section 3: Water, sanitation and hygiene questions

W1	In the dry season, what is the main source of drinking water for members of your household?	<p>1 = Piped water into dwelling 2 = Piped water to compound/ yard/plot 12 = Piped water to neighbour 3 = Public tap/standpipe 4 = Tubewell/borehole 5 = Protected dug well 6 = Unprotected dug well 7 = Protected spring 8 = Unprotected spring 9 = Rainwater collection 10 = Delivered water (water vendor) 13 = Water kiosk 14 = Packaged water (bottled water, sachet water) 11 = Surface water (e.g. river, dam, lake, pond, stream, canal) 99 = Other (specify)</p>
W2	How long does it take to go there, get drinking water, and come back?	<p>Enter number of minutes required <input type="text"/></p> <p>If water source is in the yard (or dwelling) enter "0" If response is unknown, enter "999"</p>

W3	In the dry season, what is the main source of water used by your household for washing faces?	<p>1 = Piped water into dwelling 2 = Piped water to compound, yard, or plot 12 = Piped water to neighbour 3 = Public tap/standpipe 4 = Tubewell/borehole 5 = Protected dug well 6 = Unprotected dug well 7 = Protected spring 8 = Unprotected spring 9 = Rainwater collection 10 = Delivered water (water vendor) 13 = Water kiosk 14 = Packaged water (bottled water, sachet water) 11 = Surface water (e.g. river, dam, lake, pond, stream, canal, irrigation channel) 99 = Other (specify)</p>
W4	How long does it take to go there, get face-washing water, and come back?	<p>Enter number of minutes required to collect face-washing water <input style="width: 20px; height: 20px; border: 1px solid black; display: inline-block; margin-left: 10px;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; display: inline-block; margin-left: 10px;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black; display: inline-block; margin-left: 10px;" type="text"/></p> <p>If water source is in the yard/plot enter “0” If all face washing is done at the water source, enter “888” If response is unknown, enter “999”</p>
S3	If you have one or more children under 3 years of age residing in the household, the last time the youngest child passed faeces, what was done to dispose of the faeces?	<p>1 = Child used latrine/toilet 2 = Put into latrine/toilet 3 = Put into drain or ditch 4 = Thrown into garbage 5 = Buried 6 = Left in the open 7 = Don't know 9 = Other 999 = There is no child under 3 years of age residing in the household</p>
S1	Where do you and other adults in the household usually defecate?	<p>1 = Shared or public latrine/toilet 2 = Private latrine/toilet 3 = No latrine/toilet, outside somewhere 9 = Other</p>

S2	<p>S2. What type of latrine/toilet do the adults in the household use?</p> <p>If private, observation: ask to see latrine/toilet; If shared, question: ask latrine/ toilet type.</p>	<p>1 = Flush/pour flush to piped sewer system 2 = Flush/pour flush to septic tank 3 = Flush/pour flush to pit latrine 4 = Flush/pour flush to open drains 5 = Flush/pour flush to unknown place 6 = Ventilated improved pit latrine (VIP) 7 = Pit latrine with slab 8 = Pit latrine without slab/open pit 9 = Composting toilet 10 = Bucket 13 = Container based sanitation 11 = Hanging toilet/hanging latrine 12 = No latrine/toilet (i.e. using bush or field or surface water) 14 = Not able to access (only select if unable to observe private latrine/toilet) 99 = Other (specify)</p>
H1	<p><i>Observation:</i> Is there a handwashing facility in the yard/plot/premises?</p>	<p>0 = No 1 = Yes</p>
H2	<p><i>Observation:</i> At the time of the visit, is water available at the handwashing facility? (If H1 is 1 = Yes)</p>	<p>0 = No 1 = Yes</p>
H3	<p><i>Observation:</i> At the time of visit, is soap, detergent, or other cleaning agent available at the handwashing facility? (If H1 is 1 = Yes)</p>	<p>0 = No 1 = Yes: soap or detergent (in bar, liquid, or paste form) 2 = Yes: ash, mud or sand</p>

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(C) Census and examination findings

Date	Entered automatically by the Android
EU	Select the 5-digit code from the list (generated from the cluster form)
Cluster	Select the 3-digit code from the list (generated from the cluster form)
Household ID	Select the Household ID from the list (generated from the household form)
Name <i>Name of resident being examined</i>	[Enter the name of the resident being examined]
Gender	1 = Male 2 = Female
Age (years)	[Enter the age of the resident being examined]
Examined? <i>(The survey only continues, if Examined is 1 = Yes (with consent). If Examined is not 1, survey will skip to additional notes)</i>	Examined? 1 = Yes (with consent) 2 = Absent 3 = Refused 4 = Other
E1 Trichiasis: Right eye (upper eyelid)	0 = Sign absent 1 = Sign present 2 = Not able to grade
Right eye (upper eyelid): How many eyelashes are touching the eyeball? (If E1 is 1 = Sign present)	0 1 2 3 4 5 6+
Right eye (upper eyelid): How many eyelashes have been recently epilated? (If E1 is 1 = Sign present)	0 1 2 3 4 5 6+

E2 Trichiasis: Right eye (lower eyelid)	0 = Sign absent 1 = Sign present 2 = Not able to grade
Right eye (lower eyelid): How many eyelashes are touching the eyeball? (If E2 is 1 = Sign present)	0 1 2 3 4 5 6+
Right eye (lower eyelid): How many eyelashes have been recently epilated? (If E2 is 1 = Sign present)	0 1 2 3 4 5 6+
TS: Right eye (If E1 AND/OR E2 is 1 = Sign present)	0 = Sign absent 1 = Sign present 2 = Not able to grade
TF: Right eye	0 = Sign absent 1 = Sign present 2 = Not able to grade
TI: Right eye	0 = Sign absent 1 = Sign present 2 = Not able to grade
<p>Have you ever been offered surgery by a health worker to correct the [upper/lower] eyelid trichiasis in the right eye?</p> <p><i>Right eye ([upper/lower] eyelid)</i></p> <p>Remember to use your locally agreed definition of a health worker</p>	<p>1 = Yes, a health worker informed me and offered me surgery, and I had surgery.</p> <p>2 = Yes, a health worker informed me and offered me surgery and I accepted the offer, but I have not yet had surgery.</p> <p>3 = Yes, a health worker informed me and offered me surgery, but I declined it.</p> <p>0 = No health worker informed me and offered me surgery.</p> <p>8 = Don't know</p>

<p>Have you ever been offered epilation by a health worker to correct the [upper/lower] eyelid trichiasis in the right eye?</p> <p><i>Right eye ([upper/lower] eyelid)</i></p> <p>Remember to use your locally agreed definition of a health worker</p>	<p>0 = No 1 = Yes 8 = Don't know</p>
<p><i>The examination procedure is then repeated for the left eye. Once completed the following questions remain:</i></p>	
<p>Additional notes?</p>	<p>[Enter any other trachoma related notes – for example, treatment offered or referrals provided]</p>
<p>Are there any other eye conditions graders wish to highlight for treatment or referral?</p>	<p>[Enter any other eye conditions]</p>