**HP in Emergencies Assessment/Monitoring form**

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| **Hygiene Behaviour Check** |  | **Possible Collection methods** |
| **Community Structure** |  |  |
| 1. Where do the community live?
 |  | G, OE |
| 1. What is the population
 | No. of People | No. of Households/Tents | G, HW, CR, OE, WC |
| Men | Women  | Boys | Girls |
| 1. According to them what are the priority problems order?
 | Food shortage | Security | WaterAvailability  | Shelter | Health  | Other | HW, CL, HI, OTW, OE, WC |
| 1. Has there been any change in the priority problems order? What is the change?
 |  | HW, CL, HI, OTW, OE, WC |
| 1. Do people have adequate shelter, fuel, food and security?
 | Yes | No | OE, CL, OTW |
| 1. Is the any change to the effective communication channels?
 | Yes / No  | HW, CL, OTW, CI |
| **Public Health Situation** |  |  |
| 1. What are the main public health problems or risks?
 |  | G. OE, CL, CR, HERU |
| 1. Is there any change in spread of diseases in the community?
 | Yes / No If yes, what diseases and change? | G. OE, CL, CR, HERU |
| 1. What is the water and sanitation related morbidity and mortality?
 |  | G. OE, CL, CR, HERU |
| 1. What changes will have the greatest impact on public health?
 |  | G. OE, CL, CR, HERU |
| **Safe drinking water** |  |  |
| 1. Is there any change in water sources people use?
 |  | HW, CL, OTW, CI, M |
| 1. Are the water sources protected?
 |  |
| 1. Is there any change in why people use this water source?
 | Only source | Like the taste  | Best pure water | HW, CL, OTW, CI, M, FGD |
| 1. Is the water available continuously?
 | Yes / No | HW, CL, OTW, CI, M, FGD |
| 1. For what purpose do they use the water?
 | Drinking | Cooking | Bathing | Washing dishes | CL, OTW, CI, M |
| 1. Is the drinking water likely to be contaminated? Why do you think so?
 | Yes /No | CL, CI, M, FWT |
| 1. Who mainly goes to collect water for the family?
 | women | men | children | CL, CI, FGD, HI |
| 1. How long people have to queue for water?
 | 30 mins | 1 hour | More than an hour | CL, CI, FGD, HI |
| 1. Is there adequate drainage around the water points?
 | Yes/No | CL, CI, M, OTW |
| 1. Are drinking water containers clean and sufficient in number?
 | Yes / No | CL, CI, FGD |
| 1. Do they use any treatment method before using water?
 | Boiling | Chlorination | Solar | Other | CL, CI, FGD, HI, HW |
| 1. What do people use to store drinking water in?
 | Jerrycan | Buckets with lid  | Open containers | Other  | CL, CI, FGD, HI, HW |
| **Safe excreta disposal** |  |  |
| 1. Where do people defecate?
 | Communal Latrines | Shitting field | Open defecation | Trench pit latrines | CL, CI, FGD, HI, OTW, PC |
| 1. Has there been a change in the percentage of people using latrines?
 |  |  |  | CL, CI, FGD, HI, OTW, PC |
| 1. Is there change in evidence of open defecation around the community location? Is it better or worse?
 | Yes / NoBetter / Worse | CL, CI, FGD, OTW |
| 1. How many latrines are there? Is this more than before?
 |  | CL, CI, FGD, OTW, M |
| 1. Do children use latrines?
 | Yes /No | CI, FGD, OTW, HI, HV |
| 1. Who cleans the latrines? Has there been any change in the responsibilities of latrine cleaning?
 |  | CI, FGD, HI |
| Handwashing  |  |  |
| 1. Which key times do people wash their hands?
 | After latrine use | Before eating | Before preparing food | After handling baby’s faeces | Other (specify) | HW, CI, FGD, HI, PC |
| 1. What is the estimated percentage of people who wash their hands in key times?
 |  |  |  |  | HW, CI, FGD, HI, PC |
| 1. What is used for handwashing?
 | Soap | Ash | Only water | Other | HW, CI, FGD, HI, PC |
| 1. Do they still have sufficient number of soap?
 | Yes / No | CI, FGD, HI, HV |
| Hygiene Practices |  |  |
| 1. Is there any change in number of households who cover their food?
 | Yes / No | CI, FGD, HI, HV |
| 1. Is there any change in the available garbage cans?
 | Yes / No | CI, FGD, HI, HV |
| 1. Is the surrounding of the community cleaner than before?
 |  |  |
| 1. Is there proper animal management?
 |  |  |
| Hygiene Practices |  |  |
| 1. Is there a communal garbage pit? And how is it managed?
 | Yes / No | CL, CI, FGD, HI, M, OTW |
| 1. Is there problems of rats, mosquitoes and lice?
 | Yes / No | CL, CI, FGD, HI, OTW |
| 1. Is there a lot of flies around?
 | Yes / No | CL, CI, FGD, HI, OTW |
| 1. Is there proper drainage for waste water?
 | Yes / No | CL, CI, FGD, HI, OTW, M |
| 1. Is there a need for non-food items to improve hygiene and dignity of community members
 | Yes / No | CL, CI, FGD, HI, OTW, M |
| Menstrual Hygiene |  |  |
| 1. What do women use during menstruation? Any change in the percentage of usage of items?
 | Clothe | Sanitary Pads | others | FGD women, HI, HW |
| 1. Are the latrines with enough privacy for women? Any changes made in the latrine design and usage?
 | Yes / No | FGD women, HI, HW |
| 1. Is there washing and handwashing facilities?
 | Yes / No | FGD women, HI, HW |
| Priority and Vulnerable groups |  |  |
| 1. Is there any change in the number of people in the community with disabilities or injuries?
 | Yes / No Estimated number:  | HW, CR, CL, FGD, HV, HERU |
| 1. Are the latrines easily accessible for these people? Any changes made on accessibility?
 | Yes / No | HW, CR, CL, FGD, HV, HERU |

Key for Possible collection methods

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| Discussions/Meeting with Government- G | Mapping- M | Health ERU- HERU |
| Discussion/Meeting with Health workers- HW | Pocket Chart exercise- PC | WASH Cluster- WC |
| Discussion/Meeting with Community or Camp leaders- CL | Focus Group Discussions – FGD | Other ERUs- OE |
| Observation from Transect Walk – OTW | Household Interviews - HI | Field Water Test- FWT |
| Community members Interviews – CI | Clinic records - CR | House Visit- HV |