

# Red Cross and Red Crescent **PHAST base-line survey**

Example of a Red Cross/Red Crescent base-line survey at household level

Date: \_\_\_\_\_

Area: \_\_\_\_\_

Questionnaire number: \_\_\_\_\_

## A. Information on household members

- 1) Household Nos: \_\_\_\_\_ 2) Male/Female: \_\_\_\_\_
- 3) Education level: \_\_\_\_\_ 4) Household status: \_\_\_\_\_
- 5) Length of time lived in house: \_\_\_\_\_ 6) Total number of people  
living in the house: \_\_\_\_\_
- 7) Number of persons living in house (according to age):  
children (0-5): \_\_\_\_\_ children (6-15): \_\_\_\_\_  
female adults (16 and over): \_\_\_\_\_ male adults (16 and over): \_\_\_\_\_
- 8) Name of head of household: \_\_\_\_\_

## B. Water

➤ 1) Which water sources do you use now for which purposes? (please tick)

### Water uses

- drinking                       washing body                       washing clothes
- household items                       nappies                       livestock

### Water sources

- Red Cross/Red Crescent    other hand pump  
hand pump
- communal tap                       well-shallow
- well-protected                       river
- stream                       spring protection
- gravity schemes                       rainwater harvesting
- small dams/ponds                       other



➤ **2) Does your source of drinking water change according to different seasons?**

- yes  no

if yes (please tick)

**Water seasons**

- hot season  cold season  rainy season (1 only)  
 rainy season (short)  rainy season (long)

**Water sources**

- Red Cross/Red Crescent  other hand pump  
 hand pump  
 communal tap  well-shallow  
 well-protected  river  
 stream  spring protection  
 gravity schemes  rainwater harvesting  
 small dams/ponds  other

➤ **3) How far do you have to go to collect water?**

- less than 20 m  over 500 m  1-1.5 km  
 2 km  3 km  over 3 km

➤ **4) Who collects water for the family?**

- Sex**  female  male

**Persons**

- children 5-10  children 11-167  
 adult (s)  purchased from water vendors

➤ **5) Do you treat your drinking water?**

- yes  no

If yes how?

- boil  chlorinate  sand filtration  other

➤ **6) If you don't treat your water what is the reason:**

- it is expensive  no need  
 it is safe  other

➤ **7) What are the benefits of your drinking water supply?**

- saved collection time  
 reduced walking distance to collect  
 improved quality of water  
 decreased diarrhoea  
 more water for domestic use

- affect on other health problems  
If yes, what? Tick water related problems
- scabies  eye infections
- guinea worm  other
- more time for other activities
- family economic situation improved
- other

➤ **8) Are there any problems with your water supply?**

- yes  no
- If yes, what are they?
- it is dirty  it is irregular  it is a long way
- it is expensive  periods when it dries up
- management issues
- caretaker  water treatment
- other
- breakdown of hand pump
- other

➤ **9) How many of litres of water does each household member use per day?**

Note: estimate capacity of each container (litres) and number of trips per day, divide by number of household-members (refer to Section A: Information on household members)

- 6-9  10-19  20-39
- 40-59  60-79  80 and over

➤ **10) Do you store water separately for drinking and washing or cleaning?**

- yes  no  don't know

➤ **11) What do you clean your drinking water container with?**

- soap and water  water  ash
- sand  don't clean  don't know
- other

## Observation for water

➤ **12) Observation:**

Is drinking water stored separately from water for other purposes?  yes  no

➤ **13) Observation:**

Is the drinking water container covered?  yes  no

➤ **14) Observation:**

Is there a dish rack?  yes  no

## Financing water supplies

- 15) How much do you pay for using water from the installed water point?
- 16) How much did you contribute towards the initial cost of the water point?
- 17) How much did/do you contribute towards the repairs of the water point?

## C. Sanitation

- 18) Does your household have a latrine?
  - yes  no
- 19) Do you use your latrine?
  - yes  no – if not, why not?
- 20) Do you use the latrine at night?
  - yes  no
- 21) What age do children start to use the latrines?
- 22) What happens to the stools of young children?
  - left on courtyard  thrown in the latrine
  - other \_\_\_\_\_
- 23) Where do different people defecate? (please tick)
 

**People**

  - women  men
  - children over 5  children under 5

**Place of defecation**

  - latrine in house  communal latrine
  - bush  cat method
  - other \_\_\_\_\_
- 24) What are the benefits of your latrine?
  - less time to walk to defecate  more privacy
  - increase in status  decrease in diarrhoea
- 25) How often do you clean your latrine?
  - daily  twice weekly
  - once a week  once a month
  - it is safe  other \_\_\_\_\_
- 26) Are you happy with your latrine?
  - yes  no – if not, why not?
- 27) This week did you use soap for washing clothes?
  - yes  no  don't know

➤ **28) This week did you use soap for washing dishes?**

- yes       no       don't know

## Observation for sanitation

➤ **29) Observation: How far is the latrine from the house?**

- inside the house       directly behind the house  
 directly behind the house       other

➤ **30) Observation: Is the latrine clean (no faecal matter/urine on the floor)**

- yes     no

➤ **31) Observation: Does the latrine have a sanplat (concrete slab)?**

- yes     no

If not what does it have? \_\_\_\_\_

\_\_\_\_\_

➤ **32) Observation: Is there any sign of animal or human defecation in the courtyard?**

- yes     no

## D. Household waste

➤ **33) Where do you dispose of your household waste?**

- refuse pit       bush  
 burning       burying  
 other \_\_\_\_\_

➤ **34) Is waste disposal a problem?**

- yes – if yes, why?       no

## Observation for household waste

➤ **35) Observation: Does the house have a refuse pit?**

- yes     no

➤ **36) Observation: Is the surrounding courtyard clean?**

- yes     no

## E. Vector control

- **37) Do you have treated mosquito nets in your household?**
- yes  no
- If yes, how many:  1  2  3  4
- **38) What do you use for vector control in your community/village?**
- nothing  larviciding
- indoor residual spraying  other \_\_\_\_\_
- **39) What causes malaria**
- mosquitoes  germs
- don't know  other \_\_\_\_\_
- **40) What can you do to prevent malaria**
- cover up body  spraying
- clearing grass/scrub  clearing stagnant water
- don't know  other
- (Note for Red Cross/Red Crescent programme implementers:  
modify this and identify vectors according to Red Cross/Red Crescent programme)

## F. Handwashing

- **41) When do you wash your hands?**
- before eating  before cooking
- after defecation  after wiping children's bottoms
- other \_\_\_\_\_
- **42) Why do you wash your hands?**
- keep free of germs  don't know  other \_\_\_\_\_
- **43) What do you use to wash your hands?**
- use water only  ash  soap
- other
- **44) How do you wash your hands?**
- under a running tap  in a bowl
- water poured over hands from a container
- other \_\_\_\_\_

## Observation for hand washing

- **45) Observation: Is there a hand washing facility in the house?**
- yes  no

➤ **46) Observation: Is there a bathing facility in the house?**

- yes  no

## G. Knowledge, attitude and practice

➤ **47) What are the three diseases that your family has suffered from in the last 3 months?**

(Please tick)

- diarrhoea  malaria  
 respiratory infection  HIV  
 any other \_\_\_\_\_

(Note: note for programme implementers - modify this according to Red Cross/Red Crescent programme)

➤ **48) What causes diarrhoea?**

- germs  dirty objects  
 dirty food  dirty fingers  
 dirty fluid  flies  
 open defecation  other \_\_\_\_\_

➤ **49) What is the best way to prevent diarrhoea?**

- washing hands  use of latrines  use of safe drinking water  
 other \_\_\_\_\_

➤ **50) What do you do when your child (under 5) gets diarrhoea?**

- give ORS  give more fluids  
 given more food based fluids  more breastfeeding  
 refer to health service  other \_\_\_\_\_

➤ **51) When was the last time a member of your family got diarrhoea?**

- within the last 2 weeks  within the last 1 month  
 within the last 3 months  other

## Optional

➤ **52) How do you make ORS (Please tick)**

- correct  incorrect

## H. Other

➤ **53) Have you received any health information about water and sanitation?**

- yes  no  
 If, yes:

➤ **54) What was it about?** \_\_\_\_\_

➤ **55) Who did you receive it from?** \_\_\_\_\_

\_\_\_\_\_

➤ **56) How often did you receive it?** \_\_\_\_\_

\_\_\_\_\_

➤ **57) What did you learn?** \_\_\_\_\_

\_\_\_\_\_

➤ **58) Where do you generally get your information about health from?**

- media (TV/radio/newspaper)     place of worship  
 your family     your neighbour  
 health worker     other

➤ **59) What is the hardest hygiene behaviour for you to change?**

- use of clean drinking water     use of latrines  
 hand washing at key times     disposal of children's stools  
 other

➤ **60) And why?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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