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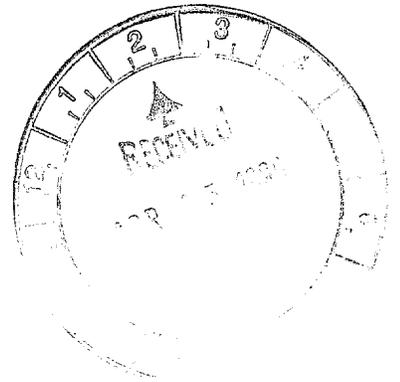
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BASELINE SURVEY

**PVO CHILD SURVIVAL RAPID KNOWLEDGE,
PRACTICE & COVERAGE (KPC)
QUESTIONNAIRE FOR HAITI CS XII BASE LINE SURVEY (30-31, 1997)**

CARREFOUR DISTRICT

HAITI



Submitted to:

**United States Agency for International Development
Washington, DC**

By:

**Adventist Development and Relief Agency International
Silver Spring, Maryland**

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List of Acronyms

ADRA	Adventist Development and Relief Agency/International
ADRA/H	Adventist Development and Relief Agency/Haiti
AIDS	Acquired Immune Deficiency Syndrome
AIDSCAP	AIDS Control and Prevention
AOPS	Association of Private Health Organizations (Fr. l'Association des Oeuvres Privées de Santé)
ARI	Acute Respiratory Infection
BCG	Bacille de Calmette et Guérin
BHR/PVC	Bureau for Humanitarian Response/Office of Private and Voluntary Cooperation
CARE	Cooperative Aid and Relief for Everywhere
CDD	Control of Diarrheal Disease
CHC	Community Health Committee
CMSSA	Centre Médico-Social Saint Antoine
CRS	Catholic Relief Services
CS	Child Survival
CHA	Community Health Agent
DCM	Diarrhea Case Management
DIP	Detailed Implementation Plan
DHS	Demographic and Health Survey (Fr. Enquête Mortalité, Morbidité et Utilisation des Services/EMMUS-II)
DPP	Development Project Proposal (for the USAID funded PL 480 food program)
DTP3	Diphtheria, Tetanus and Pertussis, 3rd immunization
FHI	Family Health International (coordinating agency for the AIDSCAP project)
FP	Family Planning
GDP	Gross Domestic Product
GOH	Government of Haiti
HIS	Health Information System
HIV	Human Immunodeficiency Virus
HQ	Headquarters
IEC	Information, Education and Communication
IPD	In-Patient Department
IST	In-service Training
KAP	Knowledge, Attitudes and Practice
MCH	Maternal and Child Health
MOE	Ministry of Education
MSH	Management Sciences for Health (who will take over for AIDSCAP in 1996)
MSPP	Ministry of Public Health (Fr. Ministère de la Santé Publique et de la Population)
NGO	Non-Government Organization
OPD	Out-Patient Department
OPV3	Oral Polio Vaccine, 3rd vaccination
ORS	Oral Rehydration Salts
ORT	Oral Rehydration Therapy
PHC	Primary Health Care

PL 480	Public Law 480: Congressional Decree authorizing food commodities for use in U.S. foreign aid programs
PSI	Population Services International
PVO	Private Voluntary Organization
SDA	Seventh Day Adventist
SCM	Standard Case Management
TFR	Total Fertility Rate
TOT	Training of Trainers
TT	Tetanus Toxoid
UCS	Community Health Unit (Fr. Unité Communale de Santé)
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development
VACS	Voluntary Agencies for Child Survival (USAID Haiti local contracts)

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EXECUTIVE SUMMARY

The CS XII is going to be implemented in Carrefour, Haiti. The current health state of Haiti represents a unique opportunity for implementing and solidifying achievements in Child Survival and protective health behaviors.

Haiti, located on the island of Hispaniola, shares its land mass with the Dominican Republic. Recently, the Government of Haiti (GOH) redefined the catchment area in which health activities take place, in order to establish distinct, decentralized, health sectors which would coordinate all the local health activities. Under this new definition, Carrefour is now considered a "community health unit" (Unité Communale de Santé or UCS).

Currently, the local Ministry of Public Health (Fr. Ministère de la Santé Publique et de la Population or MSPP) office estimates the population of Carrefour at 310,392, encompassing a geographical area of approximately 165 square km. The residents of Carrefour live in densely populated neighborhoods, in homes which are often rented. Few people have either electricity or water, and there is virtually no personal area around the houses. The area of Carrefour is the largest UCS in the Port-au-Prince area and is densely populated, with poor living conditions for the majority of the populace. In addition ADRA/Haiti has identified the need for leadership within the UCS. Furthermore, ADRA/H's prior experience in Carrefour, as well as the available infrastructure such as ADRA's project office and the SDA Hospital make it an ideal location to initiate a CS project.

CS XII baseline survey was conducted during the last two days of January 1997. ADRA/Central provided technical expertise. The headquarter technical assistance was used as the mechanism for empowering ADRA/Haiti's Child Survival Core Team to train, conduct, analyze and interpret results using the WHO 30 cluster survey methodology. It is expected that this Core Team will continue to conduct quality surveys without external assistance. The Core Team also provided the USAID Mission with a formal presentation of the baseline survey findings. Similar feedback sessions were held for the Haiti MOH and the local communities.

Significant baseline survey findings for several key factors are reported here. Breastfeeding was found to be 5% (2/44) for the age between 20 and 24 months at the time of the survey while exclusive breastfeeding was only 7% (5/70).

The point prevalence rate for diarrhea was 50% (146/294) but 45% used ORS and 10% used cereal-based solutions. Significantly, 89% stated they continued to breastfeed and 57% gave fluids besides breastmilk to their children during the diarrhea episode.

When asked "do you want another child in the next three years?" 87% (240/277) mothers said "No." 19% (49 / 259) of mothers were using a modern contraceptive method to prevent pregnancy.

31% (92/295) of children/infants do not have access to immunizations. 91% (268/295) mother did not know the correct measles vaccination schedule. Immunization Coverage (according to card): EPI Access - 49% of children 12 to 23 months have received DPT 1. On the other hand 9% children 12 to 23 months have EPI Coverage. Drop Out Rate between DPT 1 and DPT 3 is 39%.

I. INTRODUCTION

A. Background information

With a population close to seven million, Haiti currently has some of the poorest health indicators in the Western Hemisphere: an infant mortality rate of 74/1000, child mortality rate of 61/1000, a total fertility rate of 4.8 and maternal mortality rate of 450/100,000. Combined with a high national HIV zero prevalence rate (4%--although it is 10% in ADRA's targeted CS region in Port-au-Prince), an illiterate adult population (35%) and a GDP per capita between U.S.\$225-250, Haiti's situation requires immediate action.

Key Interventions and Objectives are:

- Improving nutrition
- Immunizations
- Diarrheal case management
- Family planning

The CS Child Survival Project targeted major causes of high child and maternal mortality with indication of good results.

B. Intervention area

The project is located in Carrefour, an urban area adjacent to Port-au-Prince. Carrefour is densely populated, with many residents living in near slum conditions. Carrefour hosts two hospitals and over 20 active non-government organizations. Collaborative efforts with both the community and local NGO organizations will be integral to the sustainability of the project. The project will work with these organizations to increase the provision of services to the community. ADRA will act as coordinating agency for the work of NGOs in the Carrefour area.

C. Objectives of the survey

A standardized 30 cluster survey was carried out through the technical support of ADRA/Central. The ADRA/Haiti core staff was adequately trained to conduct future Rapid K & P surveys with a minimum of external assistance.

The purpose of this survey was a Rapid Knowledge and Practice baseline in the new impact intervention area for immunization, nutrition, diarrheal disease control (CDD), and maternal care/birth spacing.

The objectives of the survey are to provide ADRA/Haiti with knowledge and practice baseline information in the impact area about the following issues:

- ◆ Mothers' knowledge (mothers of children under two) regarding: maternal care, family planning, appropriate weaning practices and nutrition, diarrheal disease control and immunizations.
- ◆ Mothers' practices related to the intervention areas mentioned above and safe motherhood.
- ◆ Target groups for health education messages.
- ◆ Immunization card coverage rate of children (12-23 months) with BCG, DPT, OPV, and measles vaccine.
- ◆ Card coverage rate with Tetanus Toxoid (TT) of mothers of children under two.

D. Schedule of activities

November and December 1996 Communication and coordination between survey trainers and ADRA/Haiti's Core Team prior to their arrival at project site. See attached training schedule (Sub-Appendix D).

Preliminary Rapid KPC Survey activities include:

- ◆ Orientation to project and preliminary training of project coordinators
- ◆ Core Team formation
- ◆ Finalize the questionnaire - 43 questions
- ◆ Translation of the questionnaire into Creole Logistic preparation and preparation of materials
- ◆ Training Preparation and assignments
- ◆ Training of supervisors and interviewers
- ◆ Field training exercise of interviewers and supervisors with test of the teams & questionnaire including a debriefing
- ◆ Final adjustments and reproduced questionnaire

- ◆ Data collection (two days) 300 interviews of 43 questions
- ◆ Data entry files written for Epi Info 6.03 software program
- ◆ Data entry into Epi Info 6.03 software program
- ◆ Finalizing data entry 295 interview records entered
- ◆ Data analysis and debriefing completed summary Harvard Graphics done showing important findings
- ◆ ADRA project staff analysis, discussion and feedback of the data
- ◆ Finalize of survey draft report
- ◆ Feedback by ADRA CS XII project to communities surveyed, MOH and USAID/Haiti

II. METHODOLOGY

Haiti presented a unique problem in that there exists no official demographic information. The core team visited all the official government offices responsible for mapping community roads and population studies but without any result. To some extent this is understandable since the catchment is an area where poor people moved in and built their residences without any official sanction of the government. Most of the roads are alleys with no possible access for motor vehicles. These roads are so narrow and in some places two people barely pass each other. The houses are so close that a person could watch while sitting in his or her house what the neighbor is cooking for the next meal.

In the absence of any detailed official information regarding the population of the catchment area or any area for that matter, the core team decided to perform an actual census study by visiting every house in the catchment area. At the beginning of the actual counting it was estimated that the ~~stated catchment area~~ which was 4 Kilo Meters by 5 Kilo Meters would have a population of about 60,000 residents. The actual counting produced about 24,000. When we doubled the area the population also doubled with an average number of 5.7 persons per household.

In the actual survey we also asked how many people lived in the household. This was intentionally done to verify our first finding of 5.7 persons per household. The survey finding was 7.2 persons per household. This is larger than our previous finding. This justified to the core team that multiplying every household in the catchment area by 5.7 is a conservative estimate. If ADRA Haiti wanted to enlarge the catchment area it only has to count the number of residential houses excluding the affluent areas within the community and multiply the number of the houses by six. This will provide the implementing staff with a reliable method of finding the actual population in the future catchment area within the carrefour district.

A. The Questionnaire

The standardized survey questionnaire was designed by PVO Child Survival Support Program (CSSP) at Johns Hopkins with assistance of US and international experts for the various intervention areas. Frequent discussions were held with ADRA Headquarters, ADRA/Haiti and CSSP support staff to further customize and finalize the standard questionnaire according to the actual CS XII project interventions and the project area. The questionnaire was administered to mothers aged 14 to 45 with a child of under 24 months of age.

The questionnaire was composed of 43 questions (see Sub-Appendix B and C for the English and Creole language questionnaires).

The questionnaire was first written in English and then translated into Creole. A translated version was presented to interviewers and supervisors during training. This was further refined for clarity of the intent of the questions.

B. Determination of sample size

The sampling methodology followed the 30 cluster sampling according to the WHO/EPI model.

For the determination of the sample sizes, the following formula was used: $n = z^2 pq/d^2$ where n = the sample size, z = statistical certainty (in this context z is 1.96 when 95% confidence is desired) chosen p = coverage rate; level of knowledge, and $q = 1-p$, d = degree of precision.

The sample size was set up in the following way: the degree of precision (d) was set up at 0.1 and the p was set up at 0.5. Thus, the resulting minimum sample size was 210, which was increased to 300 for statistical improvement in the sub-strata findings.

The number of clusters was 30 with a sample size equal to 300. Thus, each cluster ten mothers with children under two years of age were interviewed.

C. Selection of sample

The following methodology was used: the sampling interval was calculated by dividing the total population by 30; and using a random number as a starting point 30 clusters were chosen.

The starting point for each cluster was determined in the following manner: the center of the village was located and a random direction was selected. The first household encountered in the randomly chosen direction was the starting point. The second and subsequent households were the ones which were nearest to the previous one.

For each cluster, 10 mothers were interviewed in intervention area. In cases the mother was not available at the time of the interview, the interviewer rescheduled the interview. If the mother was not present at the time of the rescheduled appointment, another household was chosen (the household nearest to the last household).

D. Method of Data Analysis

The data entry and analysis were done by computer using Epi Info 6.03. In investigating the response data, responses from five mothers in different clusters were considered erroneous and were thrown out. Consequently, the analysis was done for the 295 out of 300 mothers whose responses were fairly clean. For the data analysis, frequencies and cross tabs were generated for key indicators and to establish more meaningful associations between certain characteristics and behaviors that would affect the development of health education messages.

III. THE SURVEY

A. Training

There were 15 supervisors (project officers) and 30 interviewers (community health workers and college students), whose training lasted three days (including the pilot test). The training was carried out in English and Creole by the Project Manager, the Core Team members with assistance by representatives from ADRA Headquarters (Dr Solomon Wako).

The training included the purpose of the survey, sample size, sampling methodology, household starting point, understanding of the meaning of each question and how to ask each question. Role plays were used to familiarize the interviewers with the technique to be used. Each interviewer was expected to role play the entire questionnaire three times and conducted at least one household interview each during the field exercise.

The tasks of the supervisors and interviewers were also outlined. The three main tasks of the supervisors were to:

1. Select the starting point
2. Observe the interviews each day
3. Check the questionnaires for accuracy and completeness and sign each when finished as their approval assurance

Finally, the interviewers and supervisors went out into a project area (that had not been selected as one of the 30 clusters) to interview mothers for the pilot test. A debriefing session was held to deal with any questions that had arisen during the afternoon and to re-emphasize important points in preparation for data gathering the following day. Staff were available for input throughout the entire training process. The debriefing session after the pilot test was conducted by the Core Team staff and by representatives from ADRA Headquarters (Dr. Solomon Wako).

B. The Interviews

The supervisors observed interviews for each interviewer. They verified the questionnaire in order to check out its quality and accuracy.

There were concerns for sensitive questions contained in the questionnaire, particularly when asking the name of the mother and the name of the child. The trainer was informed that due to Vodoo culture name of the mother and the child cannot be asked. For this reason, it was decided that the surveyors only address the mother as "You the Mother" and the child as "Your Child". It observed that this approach made the mother comfortable in answering the questions thus assuring the reliability of the data.

C. Survey Results

Identification

The survey reveals that the mothers age in the target population is between 14 years of age and 45. The mean age was 27.9.

Mother's Education/Occupation

When it comes to education the mothers literacy rate is divided into two groups. The first 50% (147/295) have no education or if they had cannot read and the second half 50% (148/295) have primary or more education and can read.

10% (29/295) of the mothers interviewed work away from home while 90% (266/295) work around the house.

When asked if the mothers were engaged in any income generating work 10% (29/295) answered affirmatively while 90% (266/295) answered negatively.

When asked who takes care of the child while the mother is away from home 34% (101/294) of the mothers responded they take their children with them. 9% (26/294) said their husbands or their partners will do it. 14% (41/2954) said their older children will take care. 44% (129/294) claimed their relatives take of their infants while 14% (40/294) stated neighbors/friends will do. Finally 4% (11/294) said the maid and one person less than a percent stated that the nursery school will take of the child.

Breastfeeding/Nutrition

18% (53/294) of the mothers interviewed are breastfeeding their children and 82% are not. On the other hand 92% (232/251) mothers at one point or another did breast feed their children and 8% (19/251) did not.

After the delivery 64% (177/277) breast-feed their children during the first 8 hours. 36% (100/277) did breastfeed their children after the first 8 hours.

Mothers in the survey were asked about foods that are often the first foods given to infants. They answered as following. 91% (269/295) gave their children water (or herbal teas), 88% (258/295) gave their children cow milk, goat milk, or formula, 87% (256/295) gave their children semisolid foods such as gruels, porridge or semolina and 69% (92/203) provided their children with fruits.

Turning to foods enriched in vitamin A, 72% (213/295) of the mothers in the survey said they gave their children carrot, squash, mango or papaya and 61% (181/295) stated they gave their children dark green leafy vegetables, such as spinach.

Talking of foods enriched in protein, 61% (179/295) of the mothers in the survey stated they were providing their children with meat or fish, 55% (163/295) admitted to giving peanuts, or beans and 58% 168/295 said they feed them eggs.

When mothers were asked what they add to their children's meal 63% (187/295) stated dark green leafy vegetables, such as spinach and 88% (259/295) said honey or sugar. In addition to this 68% (200/295) of the mothers pointed out that they add calorie-dense food items to the child's meals

The mothers in the survey were asked what they can do in their babies' first four days of life to keep on breastfeeding. 29% (85/295) did not know, 6% (19/295) said breastfeed as soon as possible after delivery (don't discard colostrum), 19% (55/295) said mothers should take care of breast nipples, 6% (18/295) supported frequent sucking to stimulate production, 1% (3/295) answered exclusive breastfeeding during the first four months, 1% (4/295) stated mother should avoid bottle feeding of baby, 1% (4/295) suggested relactation (if for one reason or another mother's breastfeeding had to stop for a while, mother can resume breastfeeding again).

Mothers in the survey were asked when they should start adding foods to breastfeeding. 21% (63/294) responded that mother should start adding between 4 and 6 months. 49% (143/294) said mother should start adding earlier than 4 months. 17% (50/294) stated start adding 6 months or later and 13% (38/294) did not know.

When these mothers were asked what should those additional foods to breastfeeding be 9% (27/295) did not know. 14% (40/295) said oil, 17% (51/295) stated food like mango and papaya, 30% (88/295) said food like spinach and meat, and 65% 192/295 mentioned other foods.

Mothers in the survey were asked which vitamin A helps to prevent "night blindness. 38% (111/294) stated vitamin A while 62% (183/294) admitted they did not know.

When asked if they ever bottle fed their children 88% (260/295) mothers in the survey said yes while 12% (35/295) said no.

Mothers were also asked the possible disadvantages of bottle feeding. 46% (135/295) stated infant foods given by bottle do not give special protection against diarrhea. 64% (189/295) said bottles are difficult to keep sterilized. 7% (2/295) claimed Watered down solution can cause poor growth. And finally 13% (38/295) din know.

When asked which foods contain vitamin A to prevent "night blindness" 52% (154/295) did not know, 63% (154/295) said green leafy vegetables, 40% (117/295) said yellow type fruits, 10% (28/295) stated meat/fish, 10% (30/295) said breast milk, and 25%(74/295) stated egg yolks.

Growth Monitoring

48% (141/294) mothers have a growth monitoring/promotion card. 19% (56/294) claim to have lost it and 33% (97/294) never had one.

38% (54/142) of the children have been weighed in the last four months and 62% (88/142) were not. 59% (84/142) have a record for vitamin A capsules and 41% (58/142) did not,

Diarrheal Diseases

50% (146/294) had diarrhea during the last two weeks and another 50% (147/294) did not and one mother said she did not know.

34% (50/146) of the mothers in the survey did breast-fed more than usual. 30% (45/146) of the mothers did same as usual. 3% (5/146) of the mothers did less than usual. 6% (9/146) of the mothers stopped completely. 25% (37/146) of the mothers did not breastfed.

33% (48/144)of the mothers provided their children with more than usual fluids other than breast-milk. 22% (32/144) of the mothers provided their children with same as usual fluids other than breast-milk. 18% (26/144)of the mothers provided their children with less than usual fluids other than breast-milk. 8% (12/144) of the mothers stopped completely providing their children with fluids other than breast-milk. 18% (26/144) of the mothers exclusively breastfed.

17% (/146) mothers provided more than usual solid/semisolid foods. 24% (35/146) mothers provided same as usual. 21% (31/146) mothers provided less than usual. 20% (29/146) mothers stopped completely. 18% (26/146) mothers exclusively breastfed.

18% (27/146) mothers treated their children with nothing when their children had diarrhea. 45% (66/146) mothers treated with ORS sachet. 11% (17/146) mothers treated their children with sugar-salt solution. 10% (14/146) mothers treated their children with cereal based ORT. 10%

(15/146) mothers treated their children with infusions or other fluids. 11% (16/146) mothers treated their children with anti-diarrhea medicine or antibiotics. 23% (33/146) mothers treated their children with other.

39% (57/145) sought advice or treatment for the diarrhea while 61% (88/145). 25% (15/60) advice came from general hospital, 22% (13/60) from health center/clinic/post, 18% (11/60) from private clinic/doctor, 25% (15/60) from pharmacy and 10% (6/60) from traditional healer.

17% 49 (/295) of mothers do not know the signs/symptoms of diarrhea disease. 23% (68/295) of mothers see vomiting as the signs/symptoms of diarrhea disease. 33% (98/295) of mothers take fever as the signs/symptoms of diarrhea disease. 14% (43/295) of mothers understand dry mouth, sunken eyes, decreased urine output (dehydration) as the signs/symptoms of diarrhea disease. 29% (84/295) of mothers know diarrhea of prolonged duration (at least 14 days) to be the signs/symptoms of diarrhea disease. 8% (23/295) of mothers understand the presence of blood in stool as the signs/symptoms of diarrhea disease. 19% (55/295) of mothers take loss of appetite as the signs/symptoms of diarrhea disease. 17% (49/295) of mothers see weakness or tiredness as the signs/symptoms of diarrhea disease. 13 % (39/295) of mothers state other symptoms as the signs/symptoms of diarrhea disease.

6% (17/295) do not know the important actions they should take if their children have diarrhea. 12% (35/295) initiate fluids rapidly. 19% (55/295) give the child more to drink than usual. 2% (5/295) give the child smaller more frequent feeds. 75% (220/295) provide proper mixing and administration of ORS. 34% (100/295) take child to the hospital/health center. 35% (103/295) feed more after diarrhea episode so that child can re-gain weight. 5% (15/295) withhold fluids. 4% (12/295) withhold foods. 26% (76/295) resort to other means.

16% (47/295) of mothers do not know what important actions they should take when their children are recovering from diarrhea. 18 % (52/295) of mothers give their children smaller more frequent feeds when they are recovering from diarrhea. 26% (78/295) of mothers give their children more foods than usual when they are recovering from diarrhea. 41% (120/295) of mothers give their children foods with high caloric content when they are recovering from diarrhea give. 27 % (79/295) of mothers give their children other foods than all the above when they are recovering from diarrhea.

Immunizations

69% (203/295) of the mothers in the survey have their children immunized. 31% (92/295) did not.

9% (26/295) of the mothers in the survey responded a child should receive measles vaccine at age of nine months. The rest picked various ages though 53% (157/295) admitted they did not know.

59% (174/294) of the mothers who answered the question why pregnant women need to be vaccinated with tetanus toxoid vaccine said it is to protect both mother/newborn against tetanus. 3% (10/294) said to protect only the woman against tetanus. 20% (60/294) stated to protect only the newborn against tetanus. And 17% (50/294) admitted they do not know or gave other reasons.

Answering the question how many tetanus toxoid injections does a pregnant woman need to protect the newborn infant from tetanus? 2% (7/293) said one, 3% (10/293) stated two, 20% (60/293) said more than two, 16% (47/293) answered none, and finally 1% (3/293) admitted they did not know.

50% (144/286) have immunization cards that are verified. 18% (50/286) stated they lost it while 32% (92/286) said they never had one.

The Immunization card

From the vaccination card and record the number of all the immunizations are:

BCG		120 / 295 * 100 = 41%
OPV	1st	118 / 295 * 100 = 40%
	2nd	93 / 295 * 100 = 32%
	3rd	53 / 295 * 100 = 18%
DPT	1st	133 / 295 * 100 = 45%
	2nd	98 / 295 * 100 = 33%
	3rd	63 / 295 * 100 = 21%
Measles		50 / 295 * 100 = 17%
		6 / 295 * 100 = 1%

Family Planning

12% (35/294) of the mothers in the survey have maternal card. 39% (115/294) claim to have lost it and 49% (144/294) did not have any.

The number of TT vaccinations according to the record is: 23% (9/40) have one, 73% (29/40) have two or more and 1% (2/40) do not have any.

5% (14/293) mothers in the survey are pregnant. And 95% (279/293) are not.

Those mothers in the survey who were asked if they want another child in the next two years 7% (18/277) answered yes. 87% (240/277) mothers said they did not and 7% (19/277) responded they did not know.

Mothers who answered "no" or "doesn't know" to whether they wanted another child in the next two years were then asked if they were using any method to avoid/postpone getting pregnant. 19% (54/280) stated they are using some contraceptive and 81% (226/280) said they are not using any birth control.

The main method of birth control by mothers who are trying to avoid pregnancy were: 6% (3/55) tubal ligation, 9% (5/55) Norplant, 36% (20/55) injections, 31% (17/55) pill, 7% (4/55) condom, 2% (1/55) rhythm lactational amenorrhea (exclusive breastfeeding), 2% (1/55) rhythm and 7% (4/55) coitus interruptus.

D. Discussion of the Survey Result

Identification

6% (17/294) of the mothers are under 19 years of age and 14% (42/294) of the mothers are above 45 years of age. This means that a total of 20% (59/294) of the mothers in target population are among the high risk delivery population.

Mother's Education/occupation

Since the literacy rate among mothers in the target population is divided equally into those who read and those who can not read the project staff should make a through analysis of the way the health message is designed. If it is not too expensive it may be advisable that a combination of written and pictorial message delivery system in addition to other methods developed.

The project staff should take advantage of the fact that by far the great majority of the mothers in the project area are at or around the home during the day. Obviously since most of the mothers are around the house the location of the health message should be planned accordingly.

90% of the mothers do not generate any income thus limiting their ability to spend on the household. This is consistent with the above findings of 90% mothers staying at or around the house. In view of this the project staff may consider finding some resource to initiate some kind of small enterprise development (SED) project.

Regarding the question who takes care of the child while the mother is away, most mothers stated they take their infants with them. The next significant choice is that the mothers leaves their children with relatives. Therefore the project staff may need to assess the relationship of the mothers to their relatives and try to gear the health message toward the identified relatives. This is not easy at it sounds but it must be considered seriously.

Breastfeeding/Nutrition

A significantly low number of the target population mothers (18% 53/294) are breastfeeding their children. Of the 53 mothers only 10 mothers are breastfeeding their children who are 12 and over years of age. The project staff needs to find out the reason behind this low number and attempt to correct it according to WHO's breast feeding suggestions. The WHO health message is for all mothers is to breastfeed up to two years of life, and exclusively for the first four to six months of life.

The WHO message is that mothers should breastfeed exclusively during the first four to six months of life. Given this fact, while the target population has 64% rate of early breast feeding the project staff may want to increase this percentage to higher target level.

Appropriate Infant Feeding Practices includes Initiation of Breastfeeding of children within the first 8 hours after birth. 64% (177 / 277) of children were breastfed within the first 8 hours after birth. The Child survival staff may need to improve on this percentage

Appropriate Infant Feeding Practices: Exclusive Breastfeeding refers to percent of infants less than four months, who are being given only breast milk. For children 0, 1, 2 and 3 months of age: 7% (5/70) of infants less than 4 months are being exclusively breastfed. This percentage is too low and the implementing staff need to have a higher target. In addition to this a high percentage (49% - 143/294) incorrectly said mother should start adding other food items to the child's meal earlier than 4 months. Obviously this is a serious health problem and the implementing staff should take a close look at improving the knowledge and practice of the mothers in the catchment area.

Appropriate Infant Feeding Practices also includes introduction of solid or semi-solid foods to infants between five and nine months. For children 5, 6, 7 and 8 months of age: 43% (18/42) of infants 5, 6, 7, or 8 months are being given solid or semi-solid food. The staff may need to increase this figure to a higher level.

Appropriate Infant Feeding Practices: To begin with very few mothers about 1% know that "frequent sucking" helps them to breastfeed and that relactation is possible. Persistence of breastfeeding of children between 20 and 24 months, who are still breastfeeding (and being given solid/semi-solid foods) shows only 5% (2/44). This again is too low and needs to show improvement by the end of the project's life.

The percentage of mothers who give their infants four to six months of age foods that are calorie dense, are rich in vitamin A, and are rich in iron is low. Again the majority of the mothers did not link "night blindness" to a lack of vitamin A. Here the project staff has a lot to work on.

Growth Monitoring

Out of all the children in the survey, 18% (54/295) were weighed in the previous four months, as indicated on a growth card. Again this number needs to be improved. The implementing staff should look into the problem why this is so and address the issue.

Diarrheal Diseases

The percentage of mothers who correctly provided their children with the same amount or more fluids during their child's diarrhea episode is 56% (80/144). Furthermore, the percentage of mothers who correctly provided their child with the same amount or more foods during their child's diarrhea episode is 41% (60/146). These numbers are encouraging and the implementing staff may still want to set a higher goal.

65% (95/146) of mothers with children who had diarrhea in the two weeks prior to the survey, had provided their children with Oral Rehydration Therapy (ORT) while only 11% (16/146) gave their children anti-diarrheal medicine which is considered by UNICEF to be ineffective and sometimes harmful. The implementing staff may once again need to improve on this practice.

The implementing staff should take note that during diarrhea disease 43% (26/60) of the mothers sought advice from relatives & friends. If possible at all the CDD health messages to mothers need to include these relatives and friends from whom mothers in the service area seek advice or treatment for their child's diarrhea.

The implementing staff should realize that 17% (49/295) of the mothers did not know the signs and symptoms of diarrheal diseases that should receive medical attention. Depending what area of emphasis the project may take this figure should be looked in the context of the overall intervention.

There are Mothers (5% - 15/295) who said they will withhold fluids and (4% - 12/295) and withhold foods during their children's diarrhea episode. Of course this is an incorrect answer from health point of view and the implementing staff may want to look at it and lessen the percentage of mothers who think in such erroneous way.

Immunizations

31% (92/295) of children/infants do not have access to immunizations. Measles is the largest killer of all preventable immunizable diseases and 91% (268/295) mother did not know the correct measles vaccination schedule. Clearly this lack of knowledge requires a very serious attention from the implementing staff .

Though neonatal tetanus is the second largest killer of all preventable immunizable diseases, 17% (50/294) mothers in the survey did not know why pregnant women need to be vaccinated

with tetanus toxoid vaccine. In addition, 28 % (82/293) mothers did not know the number of tetanus toxoid vaccinations that pregnant women or women of child bearing age should receive. The implementing team should compare this to the Haiti national rate, if one exists, otherwise to UN rate and see if this could be improved upon..

Immunization Coverage (according to card): EPI Access - 49% of children 12 to 23 months have received DPT 1. On the other hand 9% children 12 to 23 months have EPI Coverage. Drop Out Rate between DPT 1 and DPT 3 is 39%. Again this data need to be compared to that of UN and Haiti. This will help the implementing staff set a realistic goals and objectives for Haiti.

Family Planning

Two or more doses of tetanus toxoid is the required number to protect the child. 73% (29/40) of the pregnant mothers have two or more. Since tetanus is a serous disease the project staff may want to look into the possibility of raising the percentage of mothers who take the vaccine.

89% (49/55) of mothers who are not pregnant and are using contraception stated they are using modern methods of contraception. The other 11% (5/55) are using traditional methods. From this it is clear that usage of modern method of birth control is low in Haiti.

Furthermore 81% (226/280) mothers who are not pregnant and, who do not want to have a child in the next two years or are not sure if they want another child in the next two years are not using any method of contraception. The implementing should take a close look at this since this is a high percentage of neglect in the area of family planning. According to EMMUS-II 34% of the pregnancy among Haitians is not wanted.

E. Implication of the baseline data for the project

These data provide useful information for the future of the child survival project.

Diarrhea Control

Since 50% (146/294) of the children interviewed had an episode of diarrhea in the past two weeks, diarrhea management should be an important emphasis for the project. Considerable work needs to be done in dissemination of the health messages in the diarrhea control and perhaps prevention. The community health workers should be trained how to pass the messages to the mothers.

In addition the current ORT usage is low and again the community health workers must be trained in how to enhance the ORT usage.

Immunizations

The project will need to give clear messages in all the activities of immunization. Coverage levels will need to be raised approximately 20% for BCG, DPT and OPV to reach WHO targets and measles (presently 67%) will need specific attention and "baby tracking" to assure that all children are followed until fully immunized.

ADRA CS staff recognize that a close relation with the MOH structure in all interventions are important for the future of the project.

Nutrition

Exclusive breastfeeding and the length of breastfeeding seems to be a critical problem since only 7% of the mothers interviewed were exclusively breastfeeding and also 5% between 20 and 24 months are breastfeeding.

Growth Monitoring

It was clear that the growth monitoring needs improvement, 62% (88/142) of those who have GM were not weighed in the last four months. Many of the children had GM cards but less than half were weighed in the last three months..

Family Planning

Especially Family Planning should be targeted for intervention efforts because 81% (226/280) mothers who do not want child in the next two years are not using birth control.

The reasons behind this lack of control mothers have over their own fertility require further exploration in terms of qualitative assessment and a sensitive approach on the part of project staff. The concept of greater male involvement needs to be explored.

IV. FEEDBACK SESSIONS/ARRANGEMENTS

A feedback session was conducted in the Carrefour District in the presence of the program manager, the local political leaders and elders for the field-based staff which will provide feedback to the communities surveyed. The USAID representatives at the Port-au-Prince office were invited but they were not able to make it..

V. SURVEY COSTS

COORDONATEUR DU 20-31 JANVIER 1997	11j X 1,500.00 G SALAIRE	11j X 60.00 G PERDIEM	TOTAL
Roland Calixte	16,500.00 gdes	660.00 Gdes	17,160.00 gdes

LISTE DES SUPERVISEURS DU 22 AU 31 Janvier 1997	9j X 1,100.00 G SALAIRE	9j X 60.00G PERDIEM	TOTAL
Rénald Plaisir	9.900.00 Gdes	540.00	10,440.00 G
Marky Jn-Pierre	9.900.00 Gdes	540.00	10,440.00 G
Denis Darius	9.900.00 Gdes	540.00	10,440.00 G
Job Jules	9.900.00 Gdes	540.00	10,440.00 G
Marnette Jn-Pierre	9.900.00 Gdes	540.00	10,440.00 G
Prévil Henry	9.900.00 Gdes	540.00	10,440.00 G
Roseline Honorat	9.900.00 Gdes	540.00	10,440.00 G
Quettely Celestin	9.900.00 Gdes	540.00	10,440.00 G
Jn-Denis Lys	9.900.00 Gdes	540.00	10,440.00 G
Dugué Prévilon	9.900.00 Gdes	540.00	10,440.00 G
Carmelie Estimé	9.900.00 Gdes	540.00	10,440.00 G
Raguel Laguerre	9.900.00 Gdes	540.00	10,440.00 G
Augustin Jn-Junior	9.900.00 Gdes	540.00	10,440.00 G
TOTAL	128,700.00 GDES	7,020.00 GDES	135,720.00 G

LISTE DES ENQUETEURS DU 23 - 31 Janvier 1997	8j x 825.00G SALAIRE	8j x 60.00 G PERDIEM	TOTAL
Evens Fleurissant	6.600.GDES	480.00 GDES	7,080.00 G
Marie Judith Barthelemy	6.600.GDES	480.00 GDES	7,080.00 G
Ludwige Pierre Jerome	6.600.GDES	480.00 GDES	7,080.00 G
Tassie Cange	6.600.GDES	480.00 GDES	7,080.00 G
Peterson Romulus	6.600.GDES	480.00 GDES	7,080.00 G
Samuel Georges	6.600.GDES	480.00 GDES	7,080.00 G
Judith Exama	6.600.GDES	480.00 GDES	7,080.00 G
Jonel Lamur	6.600.GDES	480.00 GDES	7,080.00 G
Tocsin St-Juste	6.600.GDES	480.00 GDES	7,080.00 G
Raulin Lincifot Cadet	6.600.GDES	480.00 GDES	7,080.00 G
Michaëlle St-Brice	6.600.GDES	480.00 GDES	7,080.00 G
Eritha Badin	6.600.GDES	480.00 GDES	7,080.00 G
Heston Dorno	6.600.GDES	480.00 GDES	7,080.00 G
Evelyne Mathurin	6.600.GDES	480.00 GDES	7,080.00 G
Berline Gilot	6.600.GDES	480.00 GDES	7,080.00 G
Edlène Dure	6.600.GDES	480.00 GDES	7,080.00 G
VénoL Louis	6.600.GDES	480.00 GDES	7,080.00 G
Louis Edouard Boussiquot	6.600.GDES	480.00 GDES	7,080.00 G
Maritane Theresias	6.600.GDES	480.00 GDES	7,080.00 G
Resigné Erisma	6.600.GDES	480.00 GDES	7,080.00 G
Jackson Valcourt	6.600.GDES	480.00 GDES	7,080.00 G
Marc Grégory Alexandre	6.600.GDES	480.00 GDES	7,080.00 G
Elimene Charles	6.600.GDES	480.00 GDES	7,080.00 G
Gladysse Douze	6.600.GDES	480.00 GDES	7,080.00 G
Yvon Charles	6.600.GDES	480.00 GDES	7,080.00 G
Christine Estriplet	6.600.GDES	480.00 GDES	7,080.00 G
Lambert Henry	6.600.GDES	480.00 GDES	7,080.00 G
Georges Walkinson	6.600.GDES	480.00 GDES	7,080.00 G
Fleuristin Wilson	6.600.GDES	480.00 GDES	7,080.00 G
TOTAL	191,400.00 G	13,920.00 G	205,320.00G

DATA ENTRY	Salaire 762.50 gdes / jour	TOTAL
Mme Florence Pierre (Du 29 - 31 Janvier 1997)	3 j X 762.50 g	2,287.50 gdes
Mme Mirtelle Calixte (Du 27 - 31 Janvier 1997)	5 j X 762.50 g	3,812.50 gdes
M. Samuel Hermas Pierre (Du 28 - 31 Janvier 1997)	4 j X 762.50 g	3,050.00 gdes
TOTAL		9,150.00 gdes

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Sub-Appendix A: Survey Results

PVO CHILD SURVIVAL, RAPID KNOWLEDGE, PRACTICE & COVERAGE (KPC) QUESTIONS

Haiti CS Base Line Survey - January 30-31, 1997

Supervisor Name _____

Community Name _____

Cluster Number _____ House Number _____

Interview Date --/--/--

Number of people in the household []

	Freq	Percent %	Cum.%
2	1	0.3	0.3
3	20	6.8	7.1
4	36	12.2	19.3
5	46	15.6	34.9
6	54	18.3	53.2
7	44	14.9	68.1
8	31	10.5	78.6
9	20	6.8	85.4
10	21	7.1	92.5
11	3	1.0	93.6
12	6	2.0	95.6
13	2	0.7	96.3
14	2	0.7	96.9
15	1	0.3	97.3
16	2	0.7	98.0
17	2	0.7	98.6
18	1	0.3	99.0
32	1	0.3	99.3
73	1	0.3	99.7
81	1	0.3	100.0
Total	295	100.0	

IDENTIFICATION

1. Mother's Age []

	Freq	Percent	Cum. %
14	1	0.3	0.3
16	2	0.7	1.0
17	5	1.7	2.7
18	10	3.4	6.1
19	9	3.1	9.2
20	18	6.1	15.3
12	10	3.4	18.7
22	11	3.7	22.4
23	17	5.8	28.2
24	15	5.1	33.3
25	21	7.1	40.5
26	20	6.8	47.3
27	16	5.4	52.7
28	20	6.8	59.5
29	8	2.7	62.2
30	23	7.8	70.1
31	6	2.0	72.1
32	16	5.4	77.6
33	9	3.1	80.6
34	8	2.7	83.3
35	7	2.4	85.7
36	4	1.4	87.1
37	8	2.7	89.8
38	7	2.4	92.2
39	1	0.3	92.5
40	12	4.1	96.6
42	5	1.7	98.3
44	1	0.3	98.6
45	4	1.4	100.0
Total	294	100.0	

2. Child's Birth date (dd/mm/yy) Age in months

	Freq	Precent %	Cum.%
0	11	3.7	3.7
1	16	5.4	9.2
2	23	7.8	16.9
3	20	6.8	23.7
4	18	6.1	29.8
5	17	5.8	35.6
6	11	3.7	39.3
7	4	1.4	40.7
8	10	3.4	44.1
9	6	2.0	46.1
10	7	2.4	48.5
11	14	4.7	53.2
12	18	6.1	59.3
13	13	4.4	63.7
14	10	3.4	67.1
15	16	5.4	72.5
16	11	3.7	76.3
17	8	2.7	79.0
18	17	5.8	84.7
19	9	3.1	87.8
20	9	3.1	90.8
21	12	4.1	94.9
22	7	2.4	97.3
23	8	2.7	100.0
Total	294	100.0	

MOTHER'S EDUCATION/OCCUPATION

3. What was the highest educational level you attained? []

	Freq	Precent %	Cum.%
1. none	83	28.1	28.1
2. primary does not read	64	21.7	49.8
3. primary reads	81	27.5	77.3
4. secondary & higher	67	22.7	100.0
Total	295	100.0	

4. Do you work away from home?

	Freq	Precent %	Cum.%
1. Yes	29	9.8	9.8
2. No	266	90.2	100.0
Total	295	100.0	

5. Do you do any "income generating work"? (multiple answers possible; record all answers)

a. Nothing

	Freq	Precent %	Cum.%
1. Yes	193	65.4	65.4
2. No	102	34.6	100.0
Total	295	100.0	

b. Handicraft, weaving rugs, etc.

	Freq	Precent %	Cum.%
1. Yes	3	1.0	1.0
2. No	292	99.0	100.0
Total	295	100.0	

c. Selling agricultural products

	Freq	Precent %	Cum.%
1. Yes	8	2.7	2.7
2. No	287	97.3	100.0
Total	295	100.0	

d. Selling foods, dairy products

	Freq	Precent %	Cum.%
1. Yes	12	4.1	4.1
2. No	283	95.9	100.0
Total	295	100.0	

e. Servant/service

	Freq	Precent %	Cum.%
1. Yes	10	3.4	3.4
2. No	285	96.6	100.0
Total	295	100.0	

f. Shop keeper, street vendor	Freq	Precent %	Cum.%
1. Yes	71	24.1	24.1
2. No	224	75.9	100.0
Total	295	100.0	

g. Salaried worker	Freq	Precent %	Cum.%
1. Yes	8	2.7	2.7
2. No	286	97.3	100.0
Total	294	100.0	

h. Other (specify) _____	Freq	Precent %	Cum.%
1. Yes	23	7.8	
2. No	272	92.2	
Total	294	100.0	

6. Who takes care of (name of child) while you are away from home? (multiple answers possible; record each one)

a. Mother takes child with her	Freq	Precent %	Cum.%
1. Yes	101	34.4	34.4
2. No	193	65.6	100.0
Total	294	100.0	

b. Husband/partner	Freq	Precent %	Cum.%
1. Yes	26	8.8	8.8
2. No	268	91.2	100.0
Total	294	100.0	

c. Older children	Freq	Precent %	Cum.%
1. Yes	41	13.9	13.9
2. No	253	86.1	100.0
Total	294	100.0	

d. Relatives	Freq	Precent %	Cum.%
1. Yes	129	43.9	43.9
2. No	165	56.1	100.0
Total	294	100.0	

e. Neighbors/friends	Freq	Precent %	Cum.%
1. Yes	40	13.6	13.6
2. No	254	86.4	100.0
Total	294	100.0	

f. Maid	Freq	Precent %	Cum.%
1. Yes	11	3.7	3.7
2. No	283	96.3	100.0
Total	294	100.0	

g. Nursey school	Freq	Precent %	Cum.%
1. Yes	1	0.3	.03
2. No	293	99.7	100.0
Total	294	100.0	

BREASTFEEDING/NUTRITION

7. Are you breastfeeding (name of child)?

	Freq	Precent %	Cum.%
1. Yes	53	18.0	18.0
2. No	241	82.0	100.0
Total	294	100.0	

8. Have you ever breast-fed (name of child)?

	Freq	Precent %	Cum.%
1. Yes	232	92.4	92.4
2. No	19	7.6	100.0
Total	251	100.0	

9. After the delivery, when did you breast-feed (name of child) for the first time?

	Freq	Precent %	Cum.%
1. during the first hour after delivery	155	56.0	56.0
2. from 1 to 8 hours after delivery	22	7.9	63.9
3. more than 8 hours after delivery	96	34.7	98.6
4. do not remember	4	1.4	100.0
Total	277	100.0	

10. a. Are you giving (name of child) water (or herbal teas)?

	Freq	Precent %	Cum.%
1. Yes	269	91.2	91.2
2. No	25	8.5	99.7
3. Doesn't know	1	0.3	100.0
Total	295	100.0	

b. Are you giving (name of child) cow milk, goat milk, or formula?

	Freq	Precent %	Cum.%
1. Yes	258	87.5	87.5
2. No	37	12.5	100.0
Total	295	100.0	

c. Are you giving (name of child) semisolid foods such as gruels, porridge or semolina?

	Freq	Precent %	Cum.%
1. Yes	256	86.8	86.8
2. No	39	13.2	100.0
Total	295	100.0	

d. Are you giving (name of child) fruits?

	Freq	Precent %	Cum.%
1. Yes	203	68.8	68.8
2. No	92	31.2	100.0
Total	295	100.0	

e. Are you giving (name of child) carrot, squash, mango or papaya?

	Freq	Precent %	Cum.%
1. Yes	213	72.2	72.2
2. No	80	27.1	99.3
3. Doesn't know	2	0.7	100.0
Total	295	100.0	

f. Are you giving (name of child) dark green leafy vegetables, such as spinach?

	Freq	Precent %	Cum.%
1. Yes	181	61.4	61.4
2. No	113	38.3	99.7
3. Doesn't know	1	0.3	100.0
Total	295	100.0	

g. Are you giving (name of child) meat or fish?

	Freq	Precent %	Cum.%
1. Yes	179	60.7	60.7
2. No	116	39.3	100.0
Total	295	100.0	

h. Are you giving (name of child) lentils, peanuts, or beans?

	Freq	Precent %	Cum.%
1. Yes	163	55.3	55.3
2. No	132	44.7	100.0
Total	295	100.0	

i. Are you giving (name of child) eggs?

	Freq	Precent %	Cum.%
1. Yes	168	56.9	56.9
2. No	127	43.1	100.0
Total	295	100.0	

j. Are you adding dark green leafy vegetables, such as spinach, to (name of child)'s food?

	Freq	Precent %	Cum.%
1. Yes	187	63.4	63.4
2. No	108	36.6	100.0
Total	295	100.0	

k. Are you adding honey or sugar to (name of child)'s meals?

	Freq	Precent %	Cum.%
1. Yes	259	87.8	87.8
2. No	35	11.9	99.7
3. Doesn't kow	1	0.3	100.0
Total	295	100.0	

l. Are you adding fat (lard) or oil to (name of child)'s meals?

	Freq	Precent %	Cum.%
1. Yes	200	67.8	67.8
2. No	95	32.2	100.0
Total	295	100.0	

Health workers believe that it is very important to breastfeed during the first two years of the baby's life.

11. What can a mother do in the baby's first four days of life to keep on breastfeeding?
(multiple answers possible; record all answers)

a. Doesn't know	Freq	Precent %	Cum.%
1. Yes	85	28.8	28.8
2. No	210	71.2	100.0
Total	295	100.0	

b. breastfeed as soon as possible after delivery (don't discard colostrum)	Freq	Precent %	Cum.%
1. Yes	19	6.4	6.4
2. No	276	93.6	100.0
Total	295	100.0	

c. care of breasts, nipples	Freq	Precent %	Cum.%
1. Yes	55	18.6	18.6
2. No	240	81.4	100.0
Total	295	100.0	

d. frequent sucking to stimulate production	Freq	Precent %	Cum.%
1. Yes	18	6.1	6.1
2. No	277	93.9	100.0
Total	295	100.0	

e. exclusive breastfeeding during the first four months	Freq	Precent %	Cum.%
1. Yes	3	1.0	1.0
2. No	292	99.0	100.0
Total	295	100.0	

f. avoid bottle feeding of baby	Freq	Precent %	Cum.%
1. Yes	4	1.4	1.4
2. No	291	98.6	100.0
Total	295	100.0	

g. relactation (if had to stop, mother can resume breastfeeding again)	Freq	Precent %	Cum.%
1. Yes	4	1.4	1.4
2. No	291	98.6	100.0
Total	295	100.0	

h. other (specify) _____	Freq	Precent %	Cum.%
1. Yes			
2. No			
Total	295	100.0	

12. When should a mother start adding foods to breastfeeding? []

	Freq	Precent %	Cum.%
1. start adding between 4 and 6 months	63	21.4	21.4
2. start adding earlier than 4 months	143	48.6	70.1
3. start adding 6 months or later	50	17.0	87.1
4. doesn't know	38	12.9	100.0
Total	294	100.0	

13. What should those additional foods to breastfeeding be? (multiple answers possible; record all answers)

a. Doesn't know

	Freq	Precent %	Cum.%
1. Yes	27	9.2	9.2
2. No	268	90.8	100.0
Total	295	100.0	

b. add oil to food (butter)

	Freq	Precent %	Cum.%
1. Yes	40	13.6	13.6
2. No	255	86.4	100.0
Total	295	100.0	

c. Give food rich in Vitamin A (mango an papaya)

	Freq	Precent %	Cum.%
1. Yes	51	17.3	17.3
2. No	244	82.7	100.0
Total	295	100.0	

d. Give food rich in iron (spinach and meat)

	Freq	Precent %	Cum.%
1. Yes	88	29.8	29.8
2. No	207	70.2	100.0
Total	295	100.0	

e. Other (specify) _____

	Freq	Precent %	Cum.%
1. Yes			
2. No			
Total			

14. Which vitamin helps you prevent "night blindness"?

	Freq	Precent %	Cum.%
1. vitamin A	111	37.8	37.8
2. doesn't know or other	183	62.2	100.0
Total	294	100.0	

15. Have you ever bottle fed your child?

	Freq	Precent %	Cum.%
1. Yes	260	88.1	88.1
2. No	35	11.9	100.0
Total	295	100.0	

16. What are the possible disadvantages of bottle feeding? (multiple answer possible; record all answers)

a. Other infant foods given by bottle do not give special protection against diarrhea	Freq	Precent %	Cum.%
1. Yes	135	45.8	45.8
2. No	160	54.2	100.0
Total	295	100.0	

b. Bottles are difficult to keep sterilized	Freq	Precent %	Cum.%
1. Yes	189	64.1	64.1
2. No	106	35.9	100.0
Total	295	100.0	

c. Watered down solution can cause poor growth	Freq	Precent %	Cum.%
1. Yes	20	6.8	6.8
2. No	275	93.2	100.0
Total	295	100.0	

d. Does not know	Freq	Precent %	Cum.%
1. Yes	38	12.9	12.9
2. No	257	87.1	100.0
Total	295	100.0	

17. Which foods contain vitamin A to prevent "night blindness"? (multiple answers possible; record all answers)

a. doesn't know or other	Freq	Precent %	Cum.%
1. Yes	154	52.2	52.2
2. No	141	47.8	100.0
Total	295	100.0	

b. green leafy vegetables	Freq	Precent %	Cum.%
1. Yes	63	21.4	21.4
2. No	231	78.6	100.0
Total	294	100.0	

c. yellow type fruits	Freq	Precent %	Cum.%
1. Yes	117	39.7	39.7
2. No	178	60.3	100.0
Total	295	100.0	

d. meat/fish	Freq	Precent %	Cum.%
1. Yes	28	9.5	9.5
2. No	267	90.5	100.0
Total	295	100.0	

e. breast milk	Freq	Precent %	Cum.%
1. Yes	30	10.2	10.2
2. No	265	89.8	100.0
Total	295	100.0	

f. egg yolks	Freq	Precent %	Cum.%
1. Yes	74	25.1	25.1
2. No	221	74.9	100.0
Total	295	100.0	

GROWTH MONITORING

18. Does (name of child) have a growth monitoring/promotion card?

	Freq	Precent %	Cum.%
1. yes (must see card)	141	48.0	48.0
2. lost card ---> go to 22	56	19.0	67.0
3. no ---> go to 22	97	33.0	100.0
Total	294	100.0	

19. Look at the growth monitoring card of the child, and record the following information: has the child been weighed in the last three months?

	Freq	Precent %	Cum.%
1. Yes	54	38.0	38.0
2. No	88	62.0	100.0
Total	142	100.0	

20. Look also at the growth monitoring card, and indicate if there is a space to record vitamin A capsules.

	Freq	Precent %	Cum.%
1. Yes	84	59.2	59.2
2. No---> go to 22	58	40.8	100.0
Total	142	100.0	

21. If yes, record the dates of all vitamin A capsules given to this child in the space below (dd/mm/yy).

1st / /
 2nd / /
 3rd / /
 4th / /

DIARRHEAL DISEASES

22. Has (name of child) had diarrhea during the last two weeks?

	Freq	Precent %	Cum.%
1. yes	146	49.7	49.7
2. no ---> go to	147	50.0	99.7
3. doesn't know--->go to 29	1	0.3	100.0
Total	294	100.0	

23. During (name of child)'s diarrhea did you breast-feed (read the choices to the mother)

	Freq	Precent %	Cum.%
1. more than usual?	50	34.2	34.2
2. same as usual?	45	30.8	65.1
3. less than usual?	5	3.4	68.5
4. stopped completely?	9	6.2	74.7
5. child not breastfed	37	25.3	100.0
Total	146	100.0	

24. During (name of child)'s diarrhea, did you provide (name of child) with fluids other than breast-milk (read the choices to the mother)

	Freq	Precent %	Cum.%
1. more than usual?	48	33.3	33.3
2. same as usual?	32	22.2	55.6
3. less than usual?	26	18.1	73.6
4. stopped completely?	12	8.3	81.9
5. exclusively breastfeeding	26	18.1	100.0
Total	144	100.0	

25. During (name of child)'s diarrhea, did you continue to provide (name of child) with solid/semisolid foods(read the choices to the mother)

	Freq	Precent %	Cum.%
1. more than usual?	25	17.1	17.1
2. same as usual?	35	24.0	41.1
3. less than usual?	31	21.2	62.3
4. stopped completely?	29	19.9	82.2
5. exclusively breastfeeding	26	17.8	100.0
Total	146	100.0	

26. When (name of child) had diarrhea, what treatments, if any, did you use? (multiple answers possible; record all answers)

a. nothing	Freq	Percent %	Cum.%
1. Yes	27	18.5	18.5
2. No	119	81.5	100.0
Total	146	100.0	

b. ORS sachet	Freq	Percent %	Cum.%
1. Yes	66	45.2	45.2
2. No	80	54.8	100.0
Total	146	100.0	

c. sugar-salt solution	Freq	Percent %	Cum.%
1. Yes	17	11.6	11.6
2. No	129	88.4	100.0
Total	146	100.0	

d. cereal based ORT	Freq	Percent %	Cum.%
1. Yes	14	9.6	9.6
2. No	132	90.4	100.0
Total	146	100.0	

e. infusions or other fluids	Freq	Percent %	Cum.%
1. Yes	15	10.3	10.3
2. No	131	89.0	100.0
Total	146	100.0	

f. anti-diarrhea medicine or antibiotics	Freq	Percent %	Cum.%
1. Yes	16	11.0	11.0
2. No	129	89.0	100.0
Total	146	100.0	

Total

27. When (name of child) had diarrhea, did you seek advice or treatment for the diarrhea?

	Freq	Precent %	Cum.%
1. Yes	57	39.3	39.3
2. No---> go to 29	88	60.7	100.0
Total	145	100.0	

28. From whom did you seek advice or treatment for the diarrhea of (name of child)?
(multiple answers possible; record each answer)

a. general hospital

	Freq	Precent %	Cum.%
1. Yes	15	24.6	24.6
2. No	46	75.4	100.0
Total	61	100.0	

b. health center/clinic/post

	Freq	Precent %	Cum.%
1. Yes	13	21.7	21.7
2. No	47	78.3	100.0
Total	60	100.0	

c. private clinic/doctor

	Freq	Precent %	Cum.%
1. Yes	11	18.3	18.3
2. No	49	81.7	100.0
Total	60	100.0	

d. pharmacy

	Freq	Precent %	Cum.%
1. Yes	3	5.0	5.0
2. No	57	95.0	100.0
Total	60	100.0	

e. village health worker

	Freq	Precent %	Cum.%
1. Yes	0	0.0	0.0
2. No	60	100.0	100.0

Total	Freq	Precent %	Cum.%
Total	60	100.0	
f. traditional healer			
1. Yes	6	10.0	10.0
2. No	54	90.0	100.0
Total	60	100.0	

g. traditional birth attendant	Freq	Precent %	Cum.%
1. Yes	0	0.0	0.0
2. No	60	100.0	100.0
Total	60	100.0	

h. relatives & friends	Freq	Precent %	Cum.%
1. Yes	26	43.3	43.3
2. No	34	56.7	100.0
Total	30	100.0	

i. other (specify) _____	Freq	Precent %	Cum.%
1. Yes	7	11.3	11.3
2. No	55	88.7	100.0
Total			

29. What signs/symptoms would cause you to seek advice or treatment for (name of the child)'s diarrhea? (multiple answers possible; record all answers)

a. doesn't know	Freq	Precent %	Cum.%
1. Yes	49	16.6	16.6
2. No	246	83.4	100.0
Total	295	100.0	

b. vomiting	Freq	Precent %	Cum.%
1. Yes	68	23.1	23.1
2. No	227	76.9	100.0
Total	295	100.0	

c. fever	Freq	Precent %	Cum.%
1. Yes	98	33.2	33.2
2. No	197	66.8	100.0
Total	295	100.0	

d. dry mouth, sunken eyes, decreased urine output (dehydration)	Freq	Precent %	Cum.%
1. Yes	43	14.6	14.6
2. No	252	85.4	100.0
Total	295	100.0	

e. diarrhea of prolonged duration (at least 14 days)	Freq	Precent %	Cum.%
1. Yes	84	28.5	28.5
2. No	211	71.5	100.0
Total	295	100.0	

f. blood in stool	Freq	Precent %	Cum.%
1. Yes	23	7.8	7.8
2. No	272	92.2	100.0
Total	295	100.0	

g. loss of appetite	Freq	Precent %	Cum.%
1. Yes	55	18.6	18.6
2. No	240	81.6	100.0
Total	295	100.0	

h. weakness or tiredness	Freq	Precent %	Cum.%
1. Yes	49	16.7	16.7
2. No	245	83.3	100.0
Total	294	100.0	

i. other (specify) _____	Freq	Precent %	Cum.%
1. Yes			
2. No			
Total			

30. What are important actions you should take if (name of child) has diarrhea? (multiple answers possible; record all answers)

a. doesn't know	Freq	Precent %	Cum.%
1. Yes	17	5.8	5.8
2. No	278	94.2	100.0
Total	295	100.0	

b. initiate fluids rapidly	Freq	Precent %	Cum.%
1. Yes	35	11.9	11.9
2. No	260	88.1	100.0
Total	295	100.0	

c. give the child more to drink than usual	Freq	Precent %	Cum.%
1. Yes	55	18.6	18.6
2. No	240	81.4	100.0
Total	295	100.0	

d. give the child smaller more frequent feeds	Freq	Precent %	Cum.%
1. Yes	5	1.7	1.7
2. No	290	98.3	100.0
Total	295	100.0	

e. proper mixing and administration of ORS	Freq	Precent %	Cum.%
1. Yes	220	74.6	74.6
2. No	75	25.4	100.0
Total	295	100.0	

f. take child to the hospital/health center	Freq	Precent %	Cum.%
1. Yes	100	33.9	33.9
2. No	195	66.1	100.0
Total	295	100.0	

g. feed more after diarrhea episode so that child can re-gain weight

- 1. Yes
- 2. No

Total

h. withhold fluids	Freq	Precent %	Cum.%
1. Yes	15	5.1	5.1
2. No	280	94.9	100.0
Total	295	100.0	

i. withhold foods	Freq	Precent %	Cum.%
1. Yes	12	4.1	5.1
2. No	283	94.9	100.0
Total	295	100.0	

j. other (specify) _____	Freq	Precent %	Cum.%
1. Yes			
2. No			
Total			

31. What are important actions a mother should take when a child is recovering from diarrhea? (multiple answers possible; record all answers).

a. doesn't know	Freq	Precent %	Cum.%
1. Yes	47	15.9	15.9
2. No	248	84.1	100.0
Total	295	100.0	

b. give the child smaller more frequent feeds	Freq	Precent %	Cum.%
1. Yes	52	17.6	17.6
2. No	243	82.4	100.0
Total	295	100.0	

c. more foods than usual	Freq	Precent %	Cum.%
1. Yes	78	26.4	26.4
2. No	217	73.6	100.0
Total	295	100.0	

d. give foods with high caloric content	Freq	Precent %	Cum.%
1. Yes	120	40.7	40.7
2. No	175	59.3	100.0
Total	295	100.0	

e. other (specify) _____	Freq	Precent %	Cum.%
1. Yes			
2. No			
Total			

IMMUNIZATIONS

32. Has (name of child) ever received any immunizations?

	Freq	Precent %	Cum.%
1. yes	203	68.8	68.8
2. no	92	31.2	100.0
3. doesn't know			
Total	295	100.0	

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33. At what age should (name of child) receive measles vaccine?

Age in months	Freq	Precent %	Cum.%
0	7	2.4	2.4
1	29	9.8	12.2
2	20	6.8	19.0
3	7	2.4	21.4
4	2	0.7	22.0
5	1	0.3	22.4
6	4	1.4	23.7
7	3	1.0	24.7
8	1	0.3	25.1
9	26	8.8	33.9
10	1	0.3	34.2
11	1	0.3	34.6
12	18	6.1	40.7
13	2	0.7	41.4
14	1	0.3	41.7
15	1	0.3	42.0
18	2	0.7	42.7
19	1	0.3	43.1
23	2	0.7	43.7
24	4	1.4	45.1
36	2	0.7	45.8
60	1	0.3	46.1
72	1	0.3	46.4
84	1	0.3	46.8
99	157	53.2	100.0
Total	295	100.0	

34. Can you tell me the main reason why pregnant women need to be vaccinated with tetanus toxoid vaccine?

	Freq	Precent %	Cum.%
1. to protect both mother/newborn against tetanus	174	59.2	59.2
2. to protect only the woman against tetanus	10	3.4	62.6
3. to protect only the newborn against tetanus	60	20.4	83.0
4. doesn't know or other	50	17.0	100.0
Total	294	100.0	

35. How many tetanus toxoid injections does a pregnant woman need to protect the newborn infant from tetanus?

	Freq	Precent %	Cum.%
1. one	7	2.4	2.4
2. two	30	10.2	12.6
3. more than two	181	61.8	74.4
4. none	2	0.7	75.1
5. doesn't know	73	24.9	100.0
Total	293	100.0	

36. Do you have an immunization card for (name of child)?

	Freq	Precent %	Cum.%
1. yes (must see card)	144	50.3	50.3
2. lost it ---> go to 3	50	17.5	67.8
3. never had one[]---> go to 38	92	32.2	100.0
Total	286	100.0	

37. Look at the vaccination card and record the dates of all the immunizations in the space below (dd/mm/yy)

BCG		120 / 295 * 100 = 41%
OPV	1st	118 / 295 * 100 = 40%
	2nd	93 / 295 * 100 = 32%
	3rd	53 / 295 * 100 = 18%
DPT	1st	133 / 295 * 100 = 45%
	2nd	98 / 295 * 100 = 33%
	3rd	63 / 295 * 100 = 21%
Measles		50 / 295 * 100 = 17%
		6 / 295 * 100 = 1%

Look at the immunization card, and indicate if there is a space to record vitamin A capsules If yes,---> go to 21 and record the dates of all vitamin A capsules given to this child in boxes 18 and 19.

FAMILY PLANNING

38. Do you have a maternal health card?

	Freq	Precent %	Cum.%
1. yes (must see card)	35	11.9	11.9
2. lost it ---> go to 40	115	39.1	51.0
3. no ---> go to 40	144	49.0	100.0
Total	294	100.0	

39. Look at the maternal health card and record the number of TT vaccinations in the space below:

	Freq	Precent %	Cum.%
1. one	9	22.5	22.5
2. two or more	29	72.5	95.0
3. none	2	5.0	100.0
Total	40	100.0	

40. Are you pregnant now?

	Freq	Precent %	Cum.%
1. yes ---> stop the interview here.	14	4.8	4.8
2. no	279	95.2	100.0
Total	293	100.0	

41. Do you want to have another child in the next two years?

	Freq	Precent %	Cum.%
1. yes	18	6.5	6.5
2. no	240	86.6	93.1
3. doesn't know	19	6.9	100.0
Total	277	100.0	

42. Are you currently using any method to avoid/postpone getting pregnant?

	Freq	Precent %	Cum.%
1. yes	54	19.3	19.3
2. no []--->stop the interview here.	226	80.7	100.0
Total	280	100.0	

43. What is the main method you or your husband are using now to avoid/postpone getting pregnant?

	Freq	Precent %	Cum.%
1. tubal ligation	3	5.5	5.5
2. vasectomy	-	-	-
3. Norplant.	5	9.1	14.5
4. injections	20	36.4	50.9
5. pill	17	30.9	81.8
6. IUD	-	-	-
7. barrier method/diaphragm	-	-	-
8. condom	4	7.3	89.1
9 foam/gel	-	-	-
10. lactational amenorrhea (exclusive breastfeeding)	1	1.8	90.9
11. rhythm	1	1.8	92.7
12. abstinence	-	-	-
13. coitus interruptus	4	7.3	100.0
14. other	-	-	-
Total	55	100.0	

Sub-Appendix B: English Questionnaire

**PVO CHILD SURVIVAL, RAPID KNOWLEDGE, PRACTICE &
COVERAGE (KPC) QUESTIONS**

Haiti CS Base Line Survey January 30-31, 1997

Supervisor Name _____

Community Name _____

Cluster Number _____ House Number _____

Interview Date --/--/--

Number of people in the household []

IDENTIFICATION

1. Mother's Age []

2. Child's Birth date --/--/-- Age in months []

MOTHER'S EDUCATION/OCCUPATION

3. What was the highest educational level you attained? []

- 1. none
- 2. primary does not read
- 3. primary reads
- 4. secondary & higher

4. Do you work away from home? []

- 1. yes
- 2. no

5. Do you do any "income generating work"? (multiple answers possible; record all answers)

- a. nothing []
- b. handicraft, weaving, rugs, etc []
- c. selling agricultural products []
- d. selling foods, dairy products []
- e. servant/service []
- f. shop keeper, street vendor []

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- g. salaried worker []
- h. other (specify) _____ []

6. Who takes care of (name of child) while you are away from home? (multiple answers possible; record each one)
- a. mother takes child with her []
 - b. husband/partner []
 - c. older children []
 - d. relatives []
 - e. neighbors/friends []
 - f. maid []
 - g. nursery school []

BREASTFEEDING/NUTRITION

7. Are you breastfeeding (name of child)? []
- 1. yes [] ---> go to 9
 - 2. no []

8. Have you ever breast-fed (name of child)? []
- 1. yes []
 - 2. no [] ---> go to 10

9. After the delivery, when did you breast-feed (name of child) for the first time? []
- 1. during the first hour after delivery
 - 2. from 1 to 8 hours after delivery
 - 3. more than 8 hours after delivery
 - 4. do not remember

10. a. Are you giving (name of child) water (or herbal teas)? []
- 1. yes
 - 2. no
 - 3. doesn't know
- b. Are you giving (name of child) cow milk, goat milk, or formula? []
- 1. yes
 - 2. no
 - 3. doesn't know
- c. Are you giving (name of child) semisolid foods such as gruels, porridge or [] semolina?
- 1. yes
 - 2. no
 - 3. doesn't know

- d. Are you giving (name of child) fruits? []
1. yes
2. no
3. doesn't know
- e. Are you giving (name of child) carrot, squash, mango or papaya? []
1. yes
2. no
3. doesn't know
- f. Are you giving (name of child) dark green leafy vegetables, such as spinach? []
1. yes
2. no
3. doesn't know
- g. Are you giving (name of child) meat or fish? []
1. yes
2. no
3. doesn't know
- h. Are you giving (name of child) lentils, peanuts, or beans? []
1. yes
2. no
3. doesn't know
- i. Are you giving (name of child) eggs? []
1. yes
2. no
3. doesn't know
- j. Are you adding dark green leafy vegetables, such as spinach, to (name of child)'s food? []
1. yes
2. no
3. doesn't know
- k. Are you adding honey or sugar to (name of child)'s meals? []
1. yes
2. no
3. doesn't know
- l. Are you adding fat (lard) or oil to (name of child)'s meals? []
1. yes
2. no
3. doesn't know

Health workers believe that it is very important to breastfeed during the first two years of the baby's life.

11. What can a mother do in the baby's first four days of life to keep on breastfeeding? (multiple answers possible; record all answers)
- a. doesn't know []
 - b. breastfeed as soon as possible after delivery (don't discard colostrum) []
 - c. care of breasts, nipples []
 - d. frequent sucking to stimulate production []
 - e. exclusive breastfeeding during the first four months []
 - f. avoid bottle feeding of baby []
 - g. relactation (if had to stop, mother can resume breastfeeding again) []
 - h. other (specify) _____ []
12. When should a mother start adding foods to breastfeeding? []
- 1. start adding between 4 and 6 months
 - 2. start adding earlier than 4 months
 - 3. start adding 6 months or later
 - 4. doesn't know
13. What should those additional foods to breastfeeding be? (multiple answers possible; record all answers)
- a. doesn't know []
 - b. add oil to food (butter) []
 - c. give food rich in Vitamin A (mango and papaya) []
 - d. give food rich in iron (spinach and meat) []
 - e. other (specify) _____ []
14. Which vitamin helps you prevent "night blindness"? []
- 1. vitamin A
 - 2. doesn't know or other
15. Have you ever bottle fed your child? []
- 1. yes
 - 2. no
16. What are the possible disadvantages of bottle feeding? (multiple answer possible; record all answers)
- a. Other infant foods given by bottle do not give special protection against diarrhea []
 - b. Bottles are difficult to keep sterilized. []
 - c. Watered down solution can cause poor growth. []
 - d. Does not know []

17. Which foods contain vitamin A to prevent "night blindness"?
(multiple answers possible; record all answers)
- a. doesn't know or other []
 - b. green leafy vegetables []
 - c. yellow type fruits []
 - d. meat/fish []
 - e. breast milk []
 - f. egg yolks []

GROWTH MONITORING

18. Does (name of child) have a growth monitoring/promotion card? []
- 1. yes (must see card)
 - 2. lost card ---> go to 22
 - 3. no ---> go to 22
19. Look at the growth monitoring card of the child, and record the following information has the child been weighed in the last three months? []
- 1. yes
 - 2. no
20. Look also at the growth monitoring card, and indicate if there is a space to record vitamin A capsules []
- 1. yes
 - 2. no---> go to 22
21. If yes, record the dates of all vitamin A capsules given to this child in the space below (dd/mm/yy)
- 1st / /
- 2nd / /
- 3rd / /
- 4th / /

DIARRHEAL DISEASES

22. Has (name of child) had diarrhea during the last two weeks? []
- 1. yes
 - 2. no ---> go to 29
 - 3. doesn't know---> go to 29
23. During (name of child)'s diarrhea did you breast-feed []
(read the choices to the mother)
- 1. more than usual?
 - 2. same as usual?
 - 3. less than usual?

4. stopped completely?
5. child not breastfed
24. During (name of child)'s diarrhea, did you provide (name of child) with fluids other than breast-milk (read the choices to the mother) []
1. more than usual?
 2. same as usual?
 3. less than usual?
 4. stopped completely?
 5. exclusively breastfeeding
25. During (name of child)'s diarrhea, did you continue to provide (name of child) with solid/semisolid foods(read the choices to the mother) []
1. more than usual?
 2. same as usual?
 3. less than usual?
 4. stopped completely?
 5. exclusively breastfeeding
26. When (name of child) had diarrhea, what treatments, if any, did you use? (multiple answers possible; record all answers)
- a. nothing []
 - b. ORS sachet []
 - c. sugar-salt solution []
 - d. cereal based ORT []
 - e. infusions or other fluids []
 - f. anti-diarrhea medicine or antibiotics []
 - g. other specify _____ []
27. When (name of child) had diarrhea, did you seek advice or treatment for the diarrhea?[]
1. yes []
 2. no [] ---> go to 29
28. From whom did you seek advice or treatment for the diarrhea of (name of child)? (multiple answers possible; record each answer)
- a. general hospital []
 - b. health center/clinic/post []
 - c. private clinic/doctor []
 - d. pharmacy []
 - e. village health worker []
 - f. traditional healer []
 - g. traditional birth attendant []
 - h. relatives & friends []
 - i. other (specify) _____ []

29. What signs/symptoms would cause you to seek advice or treatment for (name of the child)'s diarrhea? (multiple answers possible; record all answers)
- a. doesn't know []
 - b. vomiting []
 - c. fever []
 - d. dry mouth, sunken eyes, decreased urine output (dehydration) []
 - e. diarrhea of prolonged duration (at least 14 days) []
 - f. blood in stool []
 - g. loss of appetite []
 - h. weakness or tiredness []
 - i. other (specify) _____ []
30. What are important actions you should take if (name of child) has diarrhea? (multiple answers possible; record all answers)
- a. doesn't know []
 - b. initiate fluids rapidly []
 - c. give the child more to drink than usual []
 - d. give the child smaller more frequent feeds []
 - e. proper mixing and administration of ORS []
 - f. take child to the hospital/health center []
 - g. feed more after diarrhea episode so that child can re-gain weight []
 - h. withhold fluids []
 - i. withhold foods []
 - j. other (specify) _____ []
31. What are important actions a mother should take when a child is recovering from diarrhea? (multiple answers possible; record all answers)
- a. doesn't know. []
 - b. give the child smaller more frequent feeds []
 - c. more foods than usual []
 - d. give foods with high caloric content []
 - e. other (specify) _____ []

IMMUNIZATIONS

32. Has (name of child) ever received any immunizations? []
- 1. yes
 - 2. no
 - 3. doesn't know
33. At what age should (name of child) receive measles vaccine? []
- 1. specify in months
 - 2. doesn't know (99)

34. Can you tell me the main reason why pregnant women need to be vaccinated with tetanus toxoid vaccine? []
1. to protect both mother/newborn against tetanus
 2. to protect only the woman against tetanus
 3. to protect only the newborn against tetanus
 4. doesn't know or other
35. How many tetanus toxoid injections does a pregnant woman need to protect the newborn infant from tetanus? []
1. one
 2. two
 3. more than two
 4. none
 5. doesn't know
36. Do you have an immunization card for (name of child)? []
1. yes (must see card)
 2. lost it ---> go to 38
 3. never had one [] ---> go to 38
37. Look at the vaccination card and record the dates of all the immunizations in the space below (dd/mm/yy)

BCG		-- / -- / --
OPV	0	-- / -- / --
	1 st	-- / -- / --
	2 nd	-- / -- / --
	3 rd	-- / -- / --
DPT	1 st	-- / -- / --
	2 nd	-- / -- / --
	3 rd	-- / -- / --
Measles		-- / -- / --
		-- / -- / --

Look at the immunization card, and indicate if there is a space to record vitamin A capsules. If yes, ---> go to 21 and record the dates of all vitamin A capsules given to this child in boxes 18 and 19.

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FAMILY PLANNING

38. Do you have a maternal health card? []
1. yes (must see card)
2. lost it ---> go to 40
3. no ---> go to 40
39. Look at the maternal health card and record the number of TT vaccinations in the space below: []
1. one
2. two or more
3. none
40. Are you pregnant now? []
1. yes ---> stop the interview here.
2. no
41. Do you want to have another child in the next two years? []
1. yes
2. no
3. doesn't know
42. Are you currently using any method to avoid/postpone getting pregnant? []
1. yes
2. no [] ---> stop the interview here.
43. What is the main method you or your husband are using now to avoid/postpone getting pregnant? []
1. tubal ligation
2. vasectomy
3. Norplant.
4. injections
5. pill
6. IUD
7. barrier method/diaphragm
8. condom
9. foam/gel
10. lactational amenorrhea (exclusive breastfeeding)
11. rhythm
12. abstinence
13. coitus interruptus
14. other

Sub-Appendix C: Creole Questionnaire

ADRA-Haiti PWOJE CSPXII

**Kesyonne sou Konnesans e Compotman e Abitid Maman ak Timoun
Janvier 1997**

Nom Sipevize: _____

Non lokalite : _____

Nim. sit: _____ Nim kay: _____

Dat entrevi: _____

Kantite moun ki nan kay la : _____

1. Laj manman: _____

2. Laj ti moun nan (mwa): _____

Mwa/ane li fet: _____

NIVO EDIKASYON E AKTIVITE MANMAN AN

3. Nivo edikasyon manman:

- 1. Anyen []
- 2. Klas prime, pa kapab li ou ekri []
- 3. Klas prime, kapab li e ekri []
- 4. Klas segonn ou plis []

4. Eske wap travay?

- 1. Wi []
- 2. non []

5. Eske ou genyen ti aktivite ki rapote lajan?

(Plisye repons posib. Endike tout repons li bay.)

- a. Ayen []
- b. Mawogani []
- c. Pwodui jaden []
- d. Manje, let []
- e. Travay kay moun []

- f. Boutik, machan []
- g. Employe []
- h. Lot (di ki sa) _____ []

6. Ki moun ki okipe (ti moun nan) le ou pa la?
(Plisyè repons posib. Endike tout repons li bay.)

- a. Manman ti moun nan []
- b. Papa / Bopè []
- c. Lot ti moun nan kay la []
- d. Fanmi []
- e. Vwazen / zanmi []
- f. Sèvant lan []
- g. Gadri []

BEBE NAN TETE / NITRISYON

7. Eske [*timoun nan*] nan tete selman?

- 1. Wi \implies **pase nan kesyon 9** []
- 2. Non..... []

8. Eske ou te konn bay [*timoun nan*] tete?

- 1. Wi []
- 2. Non [] **pase nan kesyon 10**

9. Ki le ou te bay [*timoun nan*] premye let ou?

- 1. Jis apre akouchman []
- 2. 8 tè 'd tan Apre akouchman []
- 3. Plis ke 8 tè'd tan apre akouchman []
- 4. Pa songe []

10. a. Eske ou konn bay [*timoun nan*] dlo, te fey?

- 1. Wi []
- 2. Non []
- 3. Pa konnen []

b. Eske ou konn bay [*timoun nan*] bwe lot let ki pa let manman?

- 1. Wi []
- 2. Non []
- 3. Pa konnen []

c. Eske ou konn bay [*timoun nan*] manje lot bagay tankou labouyi, akamil oswa soup?

- 1. Wi []
- 2. Non []

3. Pa konnen []
- d. Eske ou konn bay [*timoun nan*] manje fwi tankou mang, seriz, kachiman, korosol, zoranj, sitwon ou bwe ji fwi?
1. Wi []
2. Non []
3. Pa konnen []
- e. Eske ou konn bay [*timoun nan*] manje kawot, joumon, mango ou papay?
1. Wi []
2. Non []
3. Pa konnen []
- f. Eske ou konn bay [*timoun nan*] manje legim fey vet tankou epina, lyann panye?
1. Wi []
2. Non []
3. Pa konnen []
- g. Eske ou konn bay [*timoun nan*] manje vyann tankou bef, kochon, kabrit, poul, kodend ou pwason?
1. Wi []
2. Non []
3. Pa konnen []
- h. Eske ou konn bay [*timoun nan*] manje nenpot kalite pwa, pistach ou mamba?
1. Wi []
2. Non []
3. Pa konnen []
- i. Eske ou konn bay [*timoun nan*] manje ze?
1. Wi []
2. Non []
3. Pa konnen []
- j. Eske ou konn ajoute nan mange [*timoun nan*] fey vet tankou epina, kreson, lyan panye, eks.
1. []
2. Non []
3. Pa konnen []
- k. Eske ou konn mete siwo ou sik nan manje ou fe pou [*timoun nan*]?
1. Wi. []

- 2. Non []
- 3. Pa konnen []

I. Eske ou konn mete grès ou lwil nan manje ou fe pou [*timoun nan*]?

- 1. Wi []
- 2. Non []
- 3. Pa konnen []

Ajan sante yo kwè ke li enpòtan pou manman bay tete 2 premye ane lavi timoun nan.

11. Ki sa yon fanm ki fek akouche ka fe pou let li monte? (*Plizye repons posib. Endike tout reponse li bay.*)

- a. Pa konnen []
- b. Konmanse bay li tete jist apre akouchman-an []
- c. Byen swen (okipe) tete a e pwen tete a []
- d. Tete souvan pou fose tete li fe plis let []
- e. Bay tete selman pandan 4 premye mwa yo []
- f. Evite bay timoun nan bwe nan bibwon []
- g. Fè let la monte []
- h. Lot (*presize*): _____ []

12. Ki le yon manman ta dwe konmanse bay timoun-li lot manje (pandan timoun-nan toujou nan tete)?

- 1. Kat (4) a sis (6) mwa []
- 2. Anvan kat (4) mwa []
- 3. Apre sis (6) mwa ou anko pita []
- 4. Pa konnen []

13. Ki lot kalite manje sa yo ta dwe ye?

(*plizyè repons posib; mete tout repons yo*)

- a. Pa konnen []
- b. Ajoute lwil ou byen bè nan manje ya []
- c. Bay manje ki gen vitamin A (mango,papay) []
- d. Bay manje ki gen fè (epina e vyan) []
- e. Lot *presize* _____ []

14. Ki manje ki bon pou pwoteje zye timoun nan?

- 1. Vitamin A []
- 2. Pa konnen ou byen (lot, *presize*.) []

15. Eske ou pa janm bay ti moun nan bibwon?

- 1. Wi []
- 2. Non []

16. Ki danje bay bidwon an genyen? (Plizye repons posib; pran tout repons yo)
- a. Ti moun kap pren bibwon pa proteje kont djare []
 - b. Li difisil pou kenbe bibwon prop []
 - c. Manje ki gen twòp dlo pa bon pou ti moun []
 - d. Pas konnen []
17. Ki manje ki gen vitamin A ki anpeche ti moun malad nan zye?
(Plizye repons posib; pran tout repons yo)
- a. Pa konnen ou byen lot []
 - b. Fèy vèt []
 - c. Fwi jon []
 - d. Vyan / pwason []
 - e. Let tete []
 - f. Jon ze []

SWIVI KWASANS TIMOUN

18. Eske [*timoun nan*] genyen yon kat chemen sante ?
- 1. Wi (*Fok ou we kat-la*) []
 - 2. Kat la pedi ==> *Pase nan kesyon 22* []
 - 3 Non. ==> *Pase nan kesyon 22* []
19. *Gade kat chemin sante timoun-nan, epi ekri ranseyman sa yo: eske timoun-an te pese nan denye twa (3) mwa (setadi, eske yo te pran pwa-li nan denye twa (3) mwa)?*
- 1. Wi []
 - 2. Non []
20. *Eske sou kat la, yo te ekri dat timoun-an te resevwa yon grenn vitamin A?*
- 1. Wi []
 - 2. Non [] ==> *Pase nan kesyon 22*
21. *Si wi, ekri tout dat yo timoun an te resevwa yon grenn Vitamin A:*
jou mwa ane
- 1e _____ / _____ / _____
- 2em _____ / _____ / _____
- 3em _____ / _____ / _____
- 4em _____ / _____ / _____

MALADI DYARE

22. Eske [*timoun-nan*] te genyen dyare nan 2 denye semen ki sot pase-yo?
1. Wi ==> []
 2. Non *Pase nan kesyon 29* []
 3. Pa konnen ou pa songe *Pase nan kesyon 29*[]

23. Pandan [*timoun-nan*] te genyen dyare Eske ou te bal tete?
(Li pou manman repons ki anba-yo, e pwi, cheke repons la manman bay la):
1. Plis tete ke abitid []
 2. Kom dabitid []
 3. Mwens ke dabitid []
 4. Te canpe tete ya net []
 5. Ti moun nan pat nan tete []

24. Pandan [*timoun-nan*] te genyen dyare, eske ou *(Li pou manman repons ki anba-yo, e pwi, cheke repons la manman bay la):*
1. Te bay li bwe lot bagay pliske dabitid? []
 2. Te bay li bwe lot bagay kom dabitid? []
 3. Te bay li bwe lot bagay mwens ke dabitid? []
 4. Te sispann ba li bwe lot bagay? []
 5. Timoun-nan konn tete selman []

25. Pandan [*timoun-nan*] te genyen dyare, eske ou *(Li pou manman repons ki anba-yo, e pwi, cheke repons la manman bay la):*
1. Te bay li manje lot bagay pliske dabitid? []
 2. Te bay li manje lot bagay kom dabitid? []
 3. Te bay li manje lot bagay mwens ke dabitid? []
 4. Te sispann ba li manje lot bagay? []
 5. Timoun-nan konn tete selman []

26. Le [*timoun-nan*] te genyen dyare, ki sa ou te fe pou li?
- a. Anyen, okenn []
 - b. Sewom oral ak sache []
 - c. Sewom lakay []
 - d. Diri ak karot, dlo diri, ou bouwi lanmidon []
 - e. Te, rafrechi []
 - f. Medikaman pou dyare []
 - g. Lot (*presize*): []

27. Le [*timoun-nan*] te genyen dyare, eske ou te cheche konsey ou tretman nan men yon lot moun?

1. Wi []
2. Non [] *Pase nan kesyon 29*
28. Si wi, ki moun? (*Plisye repons posib. Endike tout repons li bay.*)
- a. Lopital []
- b. Sant sante/dispanse/Miss []
- c. Dokte prive []
- d. Famasi []
- e. Ajan sante kominote []
- f. Dokte fey []
- g. Matron (fanm saj) []
- h. Paran, fanmi, zanmi []
- i. Lot moun (*presize*): _____ []
29. Si [*timoun-nan*] ta genyen dyare-a, ki lot bagay (siy) ki ta fe ou al cheche konsey ou tretman/remed nan men yon lot moun? (*Plisye repons posib. Endike tout repons li bay.*)
- a. Pa konnen []
- b. Vomisman []
- c. Lafyev []
- d. Bouch sech, je antre, pa pipi) []
- e. Dyare ki dire lontan (14 jou ou plis) []
- f. San nan wate timoun-nan []
- g. Pa vle manje []
- h. Febles, fatig []
- i. Lot (*presize*) []
30. Ki sa ki enpotan ou ta dwe fe le (*timoun nan*) gen dyare?
(*Plisye repons posib. Endike tout repons li bay.*)
- a. Pa konnen []
- b. Bali likid tou swit []
- c. Bali bwe plis dlo []
- d. Pi piti dlo, manje pi souvan []
- e. Serum oral []
- f. Mennen li lopital, sant sante []
- g. Bali manje lel fin pou pou dlo, poul ka rebran pwa []
- h. Pa bal likid. []
- I. Pa bal manje []
- j. Lot (*presize*) []
31. Dapre ou, ki sa ki enpotan pou yon manman fe le dyare-a fin pase? (*Plisye repons posib. Endike tout repons li bay.*)
- a. Pa konnen []
- b. Bay timoun nan manje ki pi piti men plizye fwa pa jou []

- c. Bay timoun nan manje pliske dabitid []
- d. Bay timoun nan manje ki chaje ak eneji []
- e. Lot (*presize*): _____ []

Vaksinasyon

32. Eske (timoun nan) pat jam vaksinen?

- 1. Wi []
- 2. Non []
- 3. Pa konnen []

33. A ki laj (non timoun nan) ta dwe resevwa vaksen la roujol?

- 1. Presize en mwa []
- 2. Pa konnen [] (99)

34. Eske ou ka di mwen poukisa youn fanm ansent ta dwe pran vaksen tetanos?

- 1. Pou proteje ni manman ni pitit []
- 2. Pou proteje manman an selman. []
- 3. Pou proteje timoun ki fek fet la selman []
- 4. Pa konnen oubyen lot []

35. Kombyen dòz vaksen tetanos yon fanm ansent dwe pran pou proteje pitit li pral fe ya kont tetanos?

- 1. Yon []
- 2. []
- 3. Plis ke de []
- 4. Okenn []
- 5. a konnen []

36. Eske ou gen kat vaksinasyon (non timoun nan)?

- 1. Wi [] (Dwe we kat la)
- 2. Kat pedi [] **Pase nan 38**
- 3. Pat gen kat [] **Pase nan 38**

37. Gade kat vaksinasyon an e remete tout dat vaksinasyon nan espas en ba?

j/m/a

BCG _ _ / _ _ / _ _

Polio 0 _ _ / _ _ / _ _
 1e _ _ / _ _ / _ _
 2e _ _ / _ _ / _ _
 3e _ _ / _ _ / _ _

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Di te per 1e -- / -- / --
 2e -- / -- / --
 3e -- / -- / --

La roujol -- / -- / --
 -- / -- / --

Gake kat vaksinasyon an si li gen kote pou enrejistre vitamin A. Si wi pase nan 21 e mete dat li te pran vitamin A epi mete dat la nan kat chemen sante nan bwat la .

SWEN MATENEL

- 38. Eske ou gen kat fanm ensant?**
1. Wi [] **(dwe we kat la)**
 2. Kat pedi [] **(Pase nan 40)**
 3. Non [] **(Pase nan 40)**
- 39. Gade kat sante fanm ansent mete kantite vaksen TT li te pran nan espas an ba a?**
1. Youn []
 2. De ou plid []
 3. Okenn []
- 40. Eske ou ansent kounye a?**
1. Wi [] **(fini la)**
 2. Non []
- 41. Eske ou ta vle genyen lot timoun nan 2 zan kap vini yo?**
1. Wi []
 2. Non []
 3. Pa konnen.....[]
- 42. Eske ou fe planin?**
1. Wi []
 2. Non [] **(fini la)**
- 43. Ak ki metod planin ou-memn oubyen mesye-ou sevi?**
1. Ligati / Rete net pou fi []
 2. Vasektomi/rete net pou mesye []
 3. Noplan / Piki 5 an []
 4. Piki 2 mwa / Piki 3 mwa []

- 5. Grenn planin []
- 6. Filaman / esterile []
- 7. Diafram []
- 8. Kapot []
- 9. Jel, krem vajinal []
- 10. Bay tete []
- 11. Metod almanak ou gle sevical []
- 12. Pa fe bagay menm []
- 13. Mesye retire anvan li voye []
- 14. Lot presize _____ []

Remesye madam-an pou tan li te pran pou koze avek ou a.

Sub-Appendix D: Key Child Survival Indicator

KEY CHILD SURVIVAL INDICATOR FOR HAITI CHILD SURVIVAL (CS12)

January 30-31, 1997

1. **Appropriate Infant Feeding Practices: Initiation of Breastfeeding**
Percent of children (less than 24 months) who were breastfed within the first 8 hours after birth.

This indicator is assessed with the responses to question number 9 of the questionnaire. Responses #1 and #2 to Question 9 divided by total number of mothers interviewed and multiplied by 100 equals:

$177 / 277 * 100 = 64\%$ *Percent of children were breastfed within the first 8 hours after birth.*

2. **Appropriate Infant Feeding Practices: Exclusive Breastfeeding**
Percent of infants less than four months, who are being given only breast milk.

This indicator is assessed by considering the age of the infants in months, (question number two) and responses to questions number 10a - 10i of the questionnaire.

For children 0, 1, 2 and 3 months of age:

Number of mothers who respond "no" to all Questions 10a, 10b, 10c, 10d, 10e, 10f, 10g, 10h and 10i divided by the total number of infants 0, 1, 2, and 3 months of age multiplied by 100. This equals:

$5/70 * 100 = 7\%$ *Percent of infants less than 4 months are being exclusively breastfed.*

3. **Appropriate Infant Feeding Practices: Introduction of Foods**
Percent of infants between five and nine months who are being given solid or semi-solid foods.

For children 5, 6, 7 and 8 months of age:

This indicator is calculated by dividing the number of mothers who respond "yes" to at least one of questions 10c, 10d, 10e, 10f, 10g, 10h and 10i by the total number of infants 5, 6, 7, and 8 months of age multiplied by 100 equals:

$18/42 * 100 = 43\%$ *Percent of infants 5, 6, 7, or 8 months are being given solid or semi-solid food.*

4. **Appropriate Infant Feeding Practices: Persistence of Breastfeeding**
Percent of children between 20 and 24 months, who are still breastfeeding (and being given solid/semi-solid foods).

This indicator is assessed by considering the age of the child in months (question number two) and responses to question number 7 of Haiti questionnaire. If a child, age 20, 21, 22, or 23 months, is being breast-fed (a "yes" response to question number 7 on the questionnaire), then the child is still breastfeeding.

For children 20, 21, 22 and 23 months of age:

Responses "yes" to Question 7 Total number of children 20, 21, 22, and 23 months of age multiplied 100 by equals:

$$2/44 * 100 = 5\% \text{ Percent of infants 20 to 23 months are still breastfeeding.}$$

5. Management of Diarrheal Diseases: Continued Breastfeeding

Percent of infants/children (less than 24 months) with diarrhea in the past two weeks who were given the same amount or more breast-milk.

This indicator is assessed with the responses to questions number 22 and 23 of the questionnaire.

Responses #1 and #2 to Haiti Question 23 divided by the Number of "yes" responses to Question 22 minus number of #5 responses to Question 23 multiplied by 100 equals:

$$95 / (146-37) = 95/109 \quad 95 / 109 * 100 = 87\% \text{ Percent of children with diarrhea during the last 2 weeks were given the same amount or more breast milk.}$$

6. Management of Diarrheal Diseases: Continued Fluids

Percent of infants/ children (less than 24 months) with diarrhea in the past two weeks who were given the same amount or more fluids other than breast-milk.

This indicator is assessed with the responses to questions number 22 and 24 of the questionnaire.

Responses #1 and #2 to Question 24 divided by Number of "yes" responses to Question 22 minus number #5 responses to Question 24 multiplied by 100 equals:

$$80 / (146-26) = 80/120 \quad 80 / 120 * 100 = 67\% \text{ Percent of children with diarrhea during the last 2 weeks were given the same amount or more fluids other than breast milk.}$$

7. Management of Diarrheal Diseases: Continued Foods

Percent of infants/ children (less than 24 months) with diarrhea in the past two weeks who were given the same amount or more food.

This indicator is assessed with the responses to questions number 20 and 25 of the questionnaire.

Responses #1 and #2 to Question 25 divided by Number of "yes" responses to Question 22 minus number of #5 responses to Question 25 multiplied by 100 equals:

$$60 / (146-26) = 60 / 120 \quad 60 / 120 * 100 = 50\% \text{Percent of children with diarrhea during the last 2 weeks were given the same amount or more food}$$

8. Management of Diarrheal Diseases: ORT Usage

Percent of infants/children (less than 24 months) with diarrhea in the past two weeks who were treated with ORT.

This indicator is assessed with the responses to questions number 22 and 26 of the questionnaire.

Number of mothers who answer Question 26 with any of the following responses: **b, c, d** or **e.** divided by the Number of "yes" responses to Question 22 multiplied by 100 equals:

$$15 / 146 * 100 = 10\% \text{percent of children with diarrhea during the last two weeks were treated with ORT.}$$

9. Immunization Coverage (Card): EPI Access

Percent of children 12 to 23 months who received DPT1.

Question 37: DPT 1 recorded divided by the total number of children 12 to 23 months multiplied by 100 equals:

$$67 / 138 * 100 = 49\% \text{ percent of children 12 to 23 months who have received DPT 1, according to card.}$$

10. Immunization Coverage (Card): EPI Coverage

Percent of children 12 to 23 months who received OPV3.

Question 37: OPV 3 recorded divided by the total number of children 12 to 23 months multiplied by 100 equals:

$$12 / 138 * 100 = 9\% \text{ Percent of 12 to 23 months have received OPV 3, according to card children.}$$

11. Immunization Coverage (Card): Measles Coverage

Percent of children 12 to 23 months who received measles vaccine.

Question 37: measles vaccine recorded divided by the total number of children 12 to 23 months multiplied by 100 equals:

$$43 / 138 * 100 = 31\% \text{ percent of children 12 to 23 months have received the measles vaccine, according to card.}$$

12. Immunization Coverage (Card): Drop Out Rate

Number of children who have received DPT 1 minus the number of children who have

received DPT 3 divided by the Number of children 12 to 23 months who have received DPT 1 multiplied by 100 equals:

$$(67 - 41) / 67 * 100 \quad 26 / 67 * 100 = 39\% \text{ Percent are 'dropouts' between DPT 1 and DPT 3.}$$

Overall Drop-out rate may be calculated with the following formula:

Number of children who have received BCG minus number of children who have received measles vaccine divided by the Number of children 12 to 23 months who have received BCG multiplied by 100 equals:

$$(53 - 43) / 53 = 10 / 53 \quad 10 / 53 * 100 = 18\% \text{ is the Overall dropout rate.}$$

WHO indicates there is a problem with drop-outs when any rate is greater than 10%.

- 13. Maternal Care: Maternal Card**
Percent of mothers with a maternal card.

Note that this indicator is assessed with the total number of women in the survey who answer question number 38 as the denominator. Responses "yes" to Question 38 divided by the Total number of mothers in the survey multiplied by 100 Percent of mothers equals:

$$35 / 294 * 100 = 12\% \text{ have a maternal health card.}$$

- 14. Maternal Care: Tetanus Toxoid Coverage (Card)**
Percent of mothers who received two doses of tetanus toxoid vaccine (card).

This indicator is assessed by looking at the maternal health card. Response # 2 to Question 39 divided by the total number of mothers interviewed multiplied by 100 equals:

$$29 / 295 * 100 = 10\% \text{ percent of mothers have received at least 2 doses of TT vaccine.}$$

- 15. Maternal Care: Modern Contraceptive Usage**
Percent of mothers who desire no more children in the next two years, or are not sure, who are using a modern contraceptive method.

Divide the numerator by the denominator to get the percent of mothers who desire no more children in the next two years, or are not sure, who are using a modern contraceptive method.

Responses #1 through # 9 to Question 43 divided by the responses # 2 and # 3 to Question 41 multiplied by 100 equals:

$49 / 259 * 100 = 19\%$ percent of mothers desire no more children in the next two years, or are not sure, are using a modern contraceptive method.

**RECOMMENDED KNOWLEDGE INDICATORS FROM THE
RAPID CHILD SURVIVAL KNOWLEDGE & PRACTICE
SURVEY QUESTIONNAIRE**

The following four knowledge indicators are recommended, but are not required, to be tracked at baseline and final for each PVO Child Survival project.

1. Mother's Literacy (baseline only)

Percent of mothers who are literate.

This indicator is assessed by the responses to question number three on the questionnaire. Add together the responses # 3 and # 4 of question number three ("primary reads" and "secondary & higher") to provide the percent of mothers who are literate.

Responses # 3 and # 4 to Question 3 divided by the total number of mother interviewed multiplied by 100 equals:

$$148 / 295 * 100 = 50\% \text{ percent of mothers are literate.}$$

2. Immunization Knowledge: Timeliness of Measles

Percent of mothers who know that measles vaccine should be given at nine months.

This indicator is assessed by the responses to question number 33 of the questionnaire. If a mother knows that measles vaccine should be given at nine months (a "9 months" answer to question to question number 33 on the questionnaire) then the mother can specify the correct age for a child to receive measles vaccine.

Response "9 months" to Question 33 divided by total number of mothers interviewed multiplied by 100 equals:

$$26 / 295 * 100 = 9\% \text{ Percent of mothers know that measles vaccine is at 9 months}$$

3. Immunization Knowledge: Tetanus Toxoid Protection

Percent of mothers who know that tetanus toxoid protects both the child and the mother.

This indicator is assessed by the responses to question number 34. If the mother states that tetanus toxoid protects both the child and mother (A number "1" response to question number 37 on the questionnaire), then the mother knows that TT immunization protects both mother and child.

Response # 1 to Question 34 divided by the total number of mothers interviewed multiplied by 100 equals:

$174 / 294 * 100 = 59\%$ *Percent of mothers know that tetanus toxoid protects both mother and child*

Sub-Appendix E: List of Survey Team

Trainer Dr. Solomon Wako ADRA/Headquarter

Coordinator Suzana Romilus ADRA/Haiti

The supervisors

Milord Ernst
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Job Jules
Marnette Jn-Pierre
Prévil Henry
Roseline Honorat
Quettely Celestin
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Dugué Prévilon
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Raguel Laguerre
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The Interviewers

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Judith Barthelemy
Ludwige Pierre Jerome
Tassie Cange
Peterson Romulus
Samuel Georges
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Jonel Lamur
Tocsin St-Juste
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Eritha Badin
Heston Dorno
Evelyne Mathurin
Berline Gilot
Edlène Dure
Vénol Louis
Louis Edouard Boussiquot
Maritane Theresias
Resigné Erisma
Jackson Valcourt
Marc Grégory Alexandre
Elimene Charles
Gladysse Douze
Yvon Charles
Christine Estriplet
Lambert Henry
Georges Walkinson
Fleuristin Wilson

Sub-Appendix F: The Survey Area population

Zones	Code	Maisons	Average(6)	Habitants	Clusters
Bergamoth I	BI	508	2,895	2,895	1,2
Bergamoth II	BII	428	2,439	5,334	3,4
Sous Rail	Sr	1,128	6,429	11,763	5,6,7,8
La Cour Veritable	LCV	243	1,385	13,148	9
Marceline	M	555	3,163	16,311	10,11
Bizoton 6	Bz6	265	1,510	17,821	12
Bizoton 8	Bz8	14	79	17,900	
Rue Cesar	RC	140	798	18,698	
Rue Assad	RA	202	1,151	19,849	13
Thor 10 / Rue Dupuy	T10	301	1,715	21,655	14
Ethimo	E	16	91	22,453	
Bizoton 55	Bz55	140	798	26,084	15
Bizoton 53	Bz53	637	3,631	26,500	16,17
Bas Tannerie	BT	73	416	32,331	
Thor 65	T65	1,023	5,831	35,996	18,19,20,21
Diquini 63	D63	643	3,665	40,100	22,23
Diquini 63 / Rue Tunnel	T	720	4,104	42,112	24,25,26
Mahotiere 75	M75	353	2,012	43,559	27
Mahotiere 77	M77	254	1,447	47,537	28
Cote Plage 16-28	CP16-28	698	3,978	47,543	29,30
Total		8,341	47,537		

Interv. Cluster = 1584