

CLUSTER ID:

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HOUSEHOLD ID:

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**Structured Observation of Household (1 of 2)**

Observation of the **youngest child under 5** and the **primary caregiver of the youngest child under 5 years old** (the youngest of all children in the household that have not reached yet their fifth birthday). The primary caregiver is the child person who spends more time with the child, usually the mother.

PLEASE FILL IN THE INFORMATION BELOW BEFORE VISITING THE HOUSEHOLD TO CONDUCT THE OBSERVATION

Location information	Code	Survey staff	Name	Code	Ngày/tháng/năm
Province Name: _____	___	Interviewer	.....	___	___/___/___
District Name : _____	___	Supervisor	.....	___	___/___/___
Commune Name: _____	___	Data editor	.....	___	___/___/___
Household ID Code (from Enumeration List)	___	Data entry	.....	___	___/___/___
Name of household head _____	___				
Name of youngest Child < 5 Years _____	___	Data entry	.....	___	___/___/___
Name of Primary Caregiver _____	___				
Household Address:					
Description of how to find household:					
Telephone/Other contact information:					

	Visit 1	Visit 2	Visit 3
Date of Interview	___/___/___	___/___/___	___/___/___
Time begun	___:___	___:___	___:___
Time ended	___:___	___:___	___:___
Duration	___:___	___:___	___:___
Result	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9

**Codes for Result of Visit**

Completed Interview.....1  
 Incomplete Interview (Explain below.).....2  
 Necessary Respondent Not Available (Make appointment.).....3

Rescheduled Interview (Note next appointment below.)..... 4  
 Nobody Home..... 5  
 Temporarily Away..... 6

Refused to Participate.....7  
 Dwelling Vacated (Nobody lives here.).....8  
 Household Not Found.....9

**OBSERVATIONS:**

# Structured Observation of Household (2 of 2)

Time observation started (hh : mm, 24 hrs time): :

Number of exposure page \_\_\_\_\_ of \_\_\_\_\_

1	2	3	4	5	6	7	8	9
Exposure Number (CIRCLE EXPOSURE NUMBER)	Household member:	Exposure:	Time of exposure	Did [CARETAKER] wash his/her hands OR were [CHILD's] hands washed by [CARETAKER]?	Were both hands washed?	Hand washing materials:	How were hands dried?	Comments:
	Primary caregiver..1 Child < 2 .....2 Child 2 to 5 .....3	Before obtaining water from a wide-mouthed storage container ..... 1 Before cutting or preparing food..... 2 Before serving food ..... 3 Before eating .....4 After eating.....5 Before feeding child < 5 years old.....6 Before breastfeeding child.....7 After defecation.....8 After toileting.....9 After cleaning child post-toileting.....10 Bathing.....11	24 hours time (hh : mm)	Yes.....1 No .....2 [>>Next exposure] Could not observe.....-99 [>>Next exposure]	Yes.....1 No.....2 Could not observe... ..-99	Beauty / Toilet Bar soap.....1 Other bar soap.....2 Powder soap.....3 Liquid soap.....4 None, only water.....7 Other .....-96 Could not observe .....-99  IF -96 INDICATE HANDWASHING MATERIAL IN COMMENTS	Air dried.....1 Clean towel .... ..2 Dirty towel .....3 Clothing.....4 Other:.....-96 Could not observe.....-99  IF -96 INDICATE DRYING METHOD IN COMMENTS	
01	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
02	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
03	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
04	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
05	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
06	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
07	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
08	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
09	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	
10	1 2 3	1 2 3 4 5 6 7 8 9 10 11 -96	<input type="text"/> : <input type="text"/>	1 2 -99	1 2 -99	1 2 3 4 5 6 7 -96 -99	1 2 3 4 -96 -99	

Time observation ended (hh:mm, 24 hrs time): :