

NO.	QUESTIONS, OBSERVATION AND FILTER	CODING CATEGORIES	SKIP
	UNDER FIVE CHILD QUESTIONNAIRE ABOUT FECES DISPOSAL, FEEDING PRACTICE, DISEASES SUCH AS DIARRHEA, MALARIA AND PNEUMONIA (Additional copies of this questionnaire have to be prepared for households having more than 1 child under five of the same caretaker, print additional copies and complete the information above that identifies the household)		
	Now, I would like to ask you about [NAME OF CHILD]	CHILD 1	
1	ID NUMBER FROM THE LIST NAME FROM COLUMN 2	ID NUMBER..... ከቤተሰብ አባል መለያ ቁጥር NAME	
2	Now I would like to ask you some question about the health of [NAME] In what month and year was [NAME] born? PROBE: WHAT IS HIS/HER BIRTHDAY? ልጁ /ጅቷ የተወለደው/ችው መቼ ነው? IF THE MOTHER/CARETAKER KNOWS THE EXACT BIRTH DATE, ALSO ENTER THE DAY; OTHERWISE, RECORD 98 FOR THE DAY ወላጅ አናት የልጁን የልደት ቀን በትክክል የምታስታውስ ከሆነ ቀኑ ይሞላ። ቀኑ ካልታወቀ 'ቀን' በሚለው ቦታ '98' መዝግቡ። ይህ መልስ ከቤተሰብ ዝርዝር ውስጥ ከተመዘገበው እድሜ ጋር ይመሳከር። ሁለቱ ካልተጣጣሙ ይስተካከል	DATE OF BIRTH [ETHIOPIAN CALANDER] DAY..... MONTH..... YEAR..... 2 0	
3	How old is [NAME]? እድሜው/ዋ ስንት ነው? COMPARE AND CORRECT FROM THE ABOVE IF INCONSISTENT	AGE (IN COMPLETED YEARS)..... እድሜው/ዋ በአመት	
4	Does [NAME] have a birth certificate? የልደት ካርድ አለው? IF YES, ASK: MAY I SEE IT? አዎ ከሆነ -ላየው እችላለሁ?	YES, SEEN አዎ ታይቷል..... 1 YES, NOT SEEN አዎ ግን አልታየም 2 NO የለም..... 3 DON'T KNOW አያውቅም..... 8	
5	What was [NAME] his/her birth weight (kg.)? (ስም) ሲወለድ/ስትወለድ ክብደቱ/ቷ ስንት ነበር?	WEIGHT IN KG..... ክብደት በኪሎ ግራም DON'T KNOW አያውቅም..... 98	
6	Who helped you when you deliver [NAME]? (ስም)ን ስትወልጁ ማን አዋለደሽ?	DOCTOR ዶክተር 11 NURSE ነርስ/አዋላጅ ነርስ..... 12 HEALTH EXTENSION WORKER የጤና ኤክስቴንሽን ሰራተኛ..... 13 TRADITIONAL DELIVERY የልምድ አዋላጅ..... 14 RELATIVE/FRIENDS ዘመድ/ጓደኛ..... 15 NO ONE ማንም አልረዳኝም..... 16 OTHER (SPECIFY) 96	
7	Where did you deliver [NAME OF CHILD]? (ስም)ን የወለድሽው (የተገለገለሽው) የት ነበር?	AT HOME ራሳቸው ቤት ውስጥ 11 OTHER HOME ሌላ ሰው ቤት 12 HOSPITAL ሆስፒታል..... 13 HEALTH CENTER ጤና ጣቢያ 14 HEALTH POST ጤና ኪላ..... 15 CLINIC ክሊኒክ..... 16 OTHER (SPECIFY) 96	
8	How many Antenatal visits did the mother go before [NAME] birth? የልጁ ወላጅ አናት በእርግዝና ወቅት ለምን ያህል ጊዜ የቅድመ ወለድ ክትትል አገኘች? ምንም ክትትል ካላገኘች '0' ይሞላ	NUMBER OF TIMES..... ክትትል ያገኘበት ጊዜ ብዛት DON'T KNOW አያውቅም..... 98	
9	Have you ever received a PAB vaccination during his/her pregnancy to prevent him getting tetanus? በዚህ እርግዝና ሀፃኑ ከተወለደ በኋላ የመጋጋ ቆልፍ/ፒታኒስ/በሽታ እንዳይዘወ/ዛት ለመከላከል በክንድ የሚሰጠውን የቴታኒስ ክትባት ወስደሽል? ምርጫዎችን አታገብብ/ቢ ሌሎች ምልክቶችን እያልክ/ሽ ጠይቅ/ፂ? የተጠቀሱትን ሁሉም አክብብ/ቢ	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW..... 8	
10	When is it important for a young child (3 years or older) to wash his/her hands or have his/her mother wash them for him/her? (DO NOT READ THE ANSWERS, ENCOURAGE BY ASKING IF THERE IS ANYTHING ELSE UNTIL S/HE SAYS THERE IS NOTHING ELSE & CHECK ALL MENTIONED) የ3 አመትና ከዚያ በላይ ለሆኑ ልጆች እጃቸውን አንዲታጠቡ ወይም ሰው አንዲያጥባቸው የሚያስፈልግበት ጊዜ መቼ ነው? ምርጫዎችን አታገብብ/ቢ ሌሎች ምልክቶችን እያልክ/ሽ ጠይቅ/ፂ? የተጠቀሱትን ሁሉም አክብብ/ቢ	BEFORE EATING ከመመገባቸው በፊት..... 1 AFTER DEFECATING አይነ-ምድር ከተጸዳዱ በኋላ 2 AFTER EATING ከተመገቡ በኋላ 3 OTHER 6 (SPECIFY) DON'T KNOW..... 8	
11	The last time [NAME OF CHILD] passed stools, where did he/she defecate? ሀጻኑ/ልጁ ለመጨረሻ ጊዜ ሲፀዳዳ የት ነበር የተፀዳዳው?	USED SANITATION FACILITY ሽንት ቤት..... 1 USED POTTY ፖፖ..... 2 WENT IN HOUSE/YARD ቤት/ግቢ ውስጥ..... 3 WENT OUTSIDE THE PREMISES ከግቢ ውጭ..... 4 WENT IN HIS/HER CLOTHS ልብሱ ላይ..... 5 OTHER (SPECIFY) 6 DON'T KNOW..... 8	
12	The last time [NAME OF CHILD] passed stools, where were the feces disposed of? (IF "WASHED OR RINSED AWAY", PROBE WHERE THE WASTE WATER WAS DISPOSED OF. IF " DISPOSED", PROBE WHERE IT WAS DISPOSED OF SPECIFICALLY) ለመጨረሻ ጊዜ ልጁ ተጸዳድቶ ሳለ፣ አይነ-ምድሩን የት ነበር የተጣለው?	DROPPED INTO TOILET FACILITY ሽንት ቤት..... 11 RINSED/WASHED AWAY WATER DISCHARGED INTO TOILET ውሃው ወደ ሽንት ቤት መድፋት..... 21 WATER DISCARDED OUTSIDE ውሃው ከግቢ ውጭ ተደፍቷል..... 22 DISPOSED INTO SOLD WASTE/TRASH ቆሻሻ ጋር ተጨምሯል..... 31	

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		SOME WHERE IN YARD ግቢ ዉስጥ..... 32 OUTSIDE PREMISES ከግቢ ዉጭ..... 33 BURIED ተቀብሯል..... 42 DID NOTHING/LEFT IT THERE ምንም አላደረግንም/ባለበት ተትቷል..... 43 OTHER (SPECIFY)..... 96 DON'T KNOW..... 98																																	
FEEDING PRACTICE																																			
13	Has [NAME] ever been breastfed? (ስም) ጡት ጠብቷል/ታለች?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 16 → 16																																
14	Till how many months was [NAME] given only breast milk? (SPECIFY) ለምን ያህል ወራት (ስም) ጡት ብቻ አንዲጠባ/አንድትጠባ ተደርጓል/ለች?	NUMBER OF MONTHS የእናት ጡት ብቻ የጠባባቸዉ/ቸባቸዉ ወራት ብዛት DON'T KNOW አያውቁም..... 98																																	
15	Is [NAME] currently being breastfed? (ስም)ን እስከአሁን ጡት ታጠብዋለሽ/ታጠቢያታለሽ?	YES አዎ..... 1 NO የለም..... 2																																	
16	Is [NAME] currently being given any supplementary foods? (ስም) በአሁኑ ወቅት ተጨማሪ ምግብ ይወስዳል/ትወስዳለች?	YES አዎ..... 1 NO የለም..... 2	→ 19																																
17	Now I would like to ask you about (other) LIQUIDS that [NAME] may have had yesterday during the day or night. Did [NAME] drink [NAME OF ITEM] yesterday during the day or the night: ትናንት ቀንም ሆነ ማታ (ስም) የተጠቀሱትን ፈሳሾች/መጠጦች ጠጥቷል/ታለች? እያንዳንዱን የመጠጥ አይነት ድምጻችሁን ከፍ አድርጋችሁ በማንበብ መልሱ ላይ ካከበባችሁ በኋላ ወደ ቀጣዩ የምግብ አይነት እለፉ [A] Plain water? ንፁህ ዉሃ. [B] Any Juice? ማንኛዉም ጅዉስ [C] Soups? ሹሩብ [D] Milk (Not breast milk)? ወተት (ከእናት ጡት ወተት ዉጭ) [E] Formula (e.g. Plan; S-26)? ለህፃናጽ በፋብሪካ የተዘጋጁ ፎርሙላ እንደ ፕላን፣ S-26 [F] ORS (Oral Rehydration Solution)? ነፍስ አድን /ኢ.አር.ኤስ./ለምሳም ዉህድ [G] Any other liquids? ማንኛዉም ፈሳሽ	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>[A] Plain water</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[B] Any Juice.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[C] Soups.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[D] Milk.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[E] Formula.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[F] ORS (Oral Rehydration Solution).....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[G] Any other liquids?.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	[A] Plain water	1	2	8	[B] Any Juice.....	1	2	8	[C] Soups.....	1	2	8	[D] Milk.....	1	2	8	[E] Formula.....	1	2	8	[F] ORS (Oral Rehydration Solution).....	1	2	8	[G] Any other liquids?.....	1	2	8	
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18	Now I would like to ask you about (other) FOODS that [NAME] may have had yesterday during the day or night. አሁን (ስም) ባለፈዉ 24 ሰዓታት ዉስጥ ከትላንት ፀሀይ መዉጫ እስከ ዛሬ ፀሀይ መዉጫ ድረስ በቀንም ሆነ በማታ የሚከተሉትን ምግቦች/መጠጦች መመገቡ/ብ/ቧን መጠጣቱን/ቷን አጠይቅሻለሁ Did [NAME] eat [NAME OF ITEM] yesterday during the day or the night: ትናንት ቀንም ሆነ ማታ ላይ የተጠቀሱትን ምግቦች ተመግቧልን? እያንዳንዱን የምግብ/የመጠጥ አይነት አንድ በአንድ እንበቡ [A] Yogurt ኦርት [B] Breads, Noodles, Porridge, other grains ዳቦ፣ ኑድል፣ ገንፎ ወይም ሌላ ከጥራጥፊ የተዘጋጁ [C] Any dark green leafy vegetables ማንኛዉንም ደብዛዛ አረንጓዴ፣ ቅጠላማ አትክልቶች [D] Any other fruits vegetables ማንኛዉም ሌላ አትክልትና ፍራፍሬ [E] Any meat ማንኛዉም አይነት ስጋ [F] Eggs እንቁላሎች [G] Any other foods ማንኛዉም የምግብ አይነት	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>[A] Yogurt.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[B] Breads, Noodles, Porridge, other grains.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[C] Any dark green leafy vegetables.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[D] any other fruits vegetables.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[E] Any meat.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[F] Eggs.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>[G] Any other foods.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	[A] Yogurt.....	1	2	8	[B] Breads, Noodles, Porridge, other grains.....	1	2	8	[C] Any dark green leafy vegetables.....	1	2	8	[D] any other fruits vegetables.....	1	2	8	[E] Any meat.....	1	2	8	[F] Eggs.....	1	2	8	[G] Any other foods.....	1	2	8	
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19	Has [NAME OF CHILD] had diarrhea during the past 24 hours? DIARRHEA: THREE OR MORE LOOSE STOOLS IN 24 HOURS (ስም) ባለፉት 24 ሰዓታት ዉስጥ ተቅማጥ ይዞት/ዋት ነበር? ተቅማጥ:- በ24 ሰዓት ዉስጥ ከ3 ወይም ከዚያ በላይ የቀጠነ አይነት-ምድር ሲጸዳዳ ማለት ነዉ	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 21																																
20	Has the child had diarrhea during the last 2 weeks? (ስም) ባለፉት 2 ሳምንታት ዉስጥ ተቅማጥ ይዞት/ዋት ነበር?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 32 → 32																																
21	Did the stools contain: CHECK ALL MENTIONED ከአይነት-ምድሩ ጋር የተጠቀሱት ነገሮች ታይተዋል የተጠቀሱት በሙሉ መዝግቡ	BLOOD ደም..... 1 MUCUS ንፍጥ/ለሃጭ መሳይ..... 2 DON'T KNOW አያውቁም..... 8																																	
22	Now, I would like to know how much breastfeeding [NAME OF CHILD] was offered to drink during the diarrhea. Was he/she offered the breast less than usual, about the same, or more breast milk than usual? IF LESS, PROBE: Was he/she offered the breast much less than usual or somewhat less (ስም) በተቅማጥ በተያዘበት/ችበት ጊዜ ይጠጣ/ትጠጣ ስለነበረዉ የፈሳሽ መጠን (የእናት ጡት ጨምሮ) ልጠይቅሽ አፈልጋለሁ:- (ስም) ተቅማጥ በያዘዉ/ዛት ጊዜ አንዲጠጣ/ድትጠጣ የተሰጠዉ/ጣት ፈሳሽ ወትሮ (ተቅማጥ ሳይዘዉ/ዛት) ከሚጠጣዉ/ከምትጠጣዉ መጠን ጋር ሲነጻጸር ያነሰ ነበር ተመሳሳይ ነበር ወይስ የበለጠ ነበር? ከወትሮዉ ያነሰ ከሆነ:- አንዲጠጣ/ አንድትጠጣ የተሰጠዉ/ጣት ፈሳሽ መጠን ከወትሮዉ በጣም ያነሰ ነበር ወይስ በመጠኑ ያነሰ ነበር?	MUCH LESS በጣም ያነሰ..... 1 SOMEWHAT LESS በመጠኑ ያነሰ..... 2 ABOUT THE SAME ተመሳሳይ የሆነ/አንድተለመደዉ..... 3 MORE የበለጠ..... 4 NO BREAST MILK ምንም አልጠባም..... 5 DON'T KNOW አያውቁም..... 8																																	

NO.	QUESTIONS, OBSERVATION AND FILTER	CODING CATEGORIES	SKIP
23	Was he/she given any of the following to drink during the diarrhea? (ለም) ተቅማጥ በያዘው/ዛት ወቅት ከዚህ በታች የተዘረዘሩትን ፈሳሾች አንዱ/ጠጣ/ድትጠጣ ተደርጎ ነበር? [A] ORS Solution ከነፍስ አድን ንጥረ ነገር ከኢ.አር.ኤስ የተዘጋጀ ፈሳሽ? [B] Homemade fluids made of salt and sugar በቤት ውስጥ ከስኳርና ከጨው የተዘጋጀ ፈሳሽ? [C] Other homemade fluids ሌሎች በቤት ውስጥ የተዘጋጁ ፈሳሾች?	YES NO DK [A] ORS..... 1 2 8 [B] HOMEMADE FLUID FROM SALT AND SUGAR..... 1 2 8 [C] OTHER HOMEMADE FLUIDS..... 1 2 8	
24	Was anything (else) given to treat the diarrhea? ተቅማጥን ለማከም ከዚህ የተለየ ነገር ምን ተሰጥቶታል?	PILL OR SYRUP ክንን/ሹፋፕ..... 1 INJECTION መርፌ..... 2 HOME OR TRADITIONAL MEDICINE ቤት የተዘጋጀ/ባህላዊ መድሀኒት..... 3 NOTHING ELSE WAS GIVEN ሌላ ነገር አልተሰጠውም..... 4 OTHER (SPECIFY)..... 6 DONT KNOW አያውቁም..... 8	
25	Did you seek medical advice or treatment for the diarrhea? ለተቅማጥ ምክር ወይም ህክምና ከማንኛውም ቦታ አግኝቶ/ታ ነበር?	YES አዎ..... 1 NO የለም..... 2 DONT KNOW አያውቁም..... 8	→ 31 → 31
26	Where did you seek advice or treatment? ከየት ነበር ምክሩን ወይም ህክምናውን ያገኘሽዋል?	HOSPITAL ሆስፒታል..... 11 HEALTH CENTER ጤና ጣቢያ/ማዕከል..... 12 HEALTH POST ጤና ኬሊ/የጤና ኤክ. ሰራ..... 13 CLINICS ክሊኒክ..... 14 PHARMACY ፋርማሲ/መድሀኒት ቤት..... 15 TRADITIONAL HEALER የባህል መድኃኒት አዋቂ..... 16 OTHER (SPECIFY)..... 96 DONT KNOW አያውቁም..... 98	
27	Types of institution for treatment የህክምና አገልግሎት የሰጠው ተቋም	GOVERNMENT የመንግስት..... 1 PRIVATE የግል..... 2 NGOs መንግስታዊ ካልሆነ ድርጅት..... 3 TRADITIONAL SITE ባህላዊ ህኪም ቤት/ቦታ..... 4	
28	How far did you had to travel to seek treatment? የህክምና አገልግሎት ለማግኘት ምን ያህል ርቀት ተገዝዋል?	KILLOMETER..... ርቀት በኪሎ ሜትር DONT KNOW አያውቁም..... 998	
29	How long did you wait for to get the treatment? ህክምናውን ለማግኘት ምን ያህል ጊዜ ጠብቀዋል?	HOURS..... የጠበቁበት ጊዜ በሰዓታት DONT REMEMBER አያስታውሱም..... 998	
30	How much did you pay in total for all treatments you sought for this diarrhea? በአጠቃላይ ይህንን ተቋማጥ በሽታ ለመታከም ምን ያህል ወጪ አድርገዋል?	TRANSPORTATION ለመጓጓዣ..... DOCTOR'S FEE, MEDICINE & DIAGNOSTICS..... ለምርመራ፣ ለመድኃኒትና ለላብራቶሪ NOTHING ምንም አለውጠም..... 0000 DONT KNOW አያውቁም..... 9998	BIRR BIRR
31	If not, why did you not seek treatment? (DO NOT READ THE ANSWERS, ENCOURAGE BY ASKING IF THERE IS ANYTHING ELSE UNTIL HE/SHE SAYS THERE IS NOTHING ELSE AND CHECK ALL MENTIONED) የህክምና አገልግሎት ያልፈለጉበት/ያልተየቁበት ምክንያት ምንድን ነው? ምርጫዎቹን አታንብብ/ቢ ሌሎች ምልክቶችስ እያልክ/ሽ ጠይቅ/ቂ? የተጠቀሱትን በሙሉ አክብብ/ቢ	NOT ILL ስላልታመመ..... 11 LACK OF MONEY የገንዘብ አጥረት..... 12 FACILITY TOO FAR ቦታው በጣም ሩቅ ስለሆነ..... 13 NO ONE AVAILABLE TO ESCORT PATIENT ህመምተኛውን የሚወስድ ሰው ስለሌለ..... 14 LOW QUALITY OF FACILITY OR SERVICE 15 COULD NOT SPARE TIME AWAY FROM WORK በሰራ ብዛት ምክንያት..... 16 ILLNESS UNLIKELY TO BE TREATED በሽታው መታከም ስለማይችል..... 17 DID NOT REQUIRE MEDICAL ASSISTANCE የህክምና አርዳታ ስለማያስፈልገው..... 18 OTHER (SPECIFY) 96	
32	Can you tell me the danger signs when a child is seriously ill and should be taken to a health facility? (DO NOT READ THE ANSWERS, ENCOURAGE BY ASKING IF THERE IS ANYTHING ELSE UNTIL HE/SHE SAYS THERE IS NOTHING ELSE AND CHECK ALL MENTIONED) አንድ ህፃን በታመመ ጊዜ ምን ምን አይነት ምልክቶች ስታዩ ነው ህፃኑን ወደ ጤና ተቋም እንድትወስጃው/ያት የሚያደርጉሽ? ምርጫዎቹን አታንብብ/ቢ ሌሎች ምልክቶችስ እያልክ/ሽ ጠይቅ/ቂ? የተጠቀሱትን በሙሉ አክብብ/ቢ	VOMITING ማስታወክ..... 1 DIARRHEA ተቅማጥ..... 2 BLOOD IN STOOL አይነምድር ውስጥ ደም ሲኖር..... 3 COUGH ሳል..... 4 BREATHING PROBLEM የመተንፈስ ችግር/ቶሎ ቶሎ መተንፈስ..... 5 HIGH FEVER ከፍተኛ ትኩሳት..... 6 CONVULSION መዝለፍለፍ..... 7 SLEEPY OR UNCONSCIOUS አራሳን መሳት..... 8 NOT ABLE TO DRINK (BREASTFEED) መጠጣት ወይም ጡት መጥባት ያለመቻል..... 9 NOT ABLE TO DRINK & EAT PROPERLY በደንብ መጠጣት ወይም መመዝገብ ያለመቻል..... 10 OTHER (SPECIFY) 96	
MALARIA AND FEVER ወሳኝ ትኩሳት			
33	In the last two weeks, has [NAME OF CHILD] been ill with a fever at any time? ባለፈው 2 ሳምንታት ውስጥ (ስም) በማንኛውም ስዓት ትኩሳት አሞት ነበር?	YES አዎ..... 1 NO የለም..... 2 DONT KNOW አያውቁም..... 8	→ 43 → 43
34	Did you seek any advice or treatment for the illness from any source? ለህመሙ የምክር ወይም የህክምና አገልግሎት ከማንኛውም ቦታ ለማግኘት ሞክረው ነበር?	YES አዎ..... 1 NO የለም..... 2 DONT KNOW አያውቁም..... 8	→ 40 → 40

NO.	QUESTIONS, OBSERVATION AND FILTER	CODING CATEGORIES	SKIP
35	Where did you seek advice or treatment? የምክር ወይም የህክምና አገልግሎት የጠየቁት የት ነው?	HOSPITAL ሆስፒታል..... 11 HEALTH CENTER ጤና ጣቢያ/ማዕከል..... 12 HEALTH POST ጤና ኬላ..... 13 CLINICS ክሊኒክ..... 14 PHARMACY ፋርማሲ/መድኃኒት ቤት..... 15 TRADITIONAL HEALER ከባህላዊ ሀኪም..... 16 RELIGIOUS SPIRITUAL ከሃይማኖት መሪ/አባት..... 17 OTHER (SPECIFY) 96 DON'T KNOW አያውቁም..... 98	
36	Types of institution for treatment የህክምና አገልግሎት የሰጠው ተቋም	GOVERNMENT የመንግስት..... 1 PRIVATE የግል..... 2 NGOs መንግስታዊ ያልሆነ ድርጅት..... 3 TRADITIONAL SITE ቤት ወስጥ/ባህላዊ..... 4	
37	How far did you had to travel to seek advice? የምክር ወይም የህክምና አገልግሎት ለማግኘት ምን ያህል ተገዝዋል?	KILOMETER..... ርቀት በኪሎ ሜትር DON'T KNOW 998	
38	How long did you wait for to get the treatment? ህክምናውን ለማግኘት ምን ያህል ጊዜ ጠብቀዋል?	HOURS..... የጠበቁበት ጊዜ በሰዓታት DON'T REMEMBER አያስታውሱም..... 998	
39	How much did you pay in total for all treatments you sought for this malaria/fever? በአጠቃላይ ይህንን የወጣ/ትኩሳት በሽታ ለመታከም ምን ያህል ወጭ አድርገዋል?	TRANSPORTATION ለመጓጓዣ..... DOCTOR'S FEE, MEDICINE & DIAGNOSTICS..... ለምርመራ፣ለመድኃኒትና ለላብራቶሪ NOTHING ምንም ወጭ አላወጠም..... 0000 DON'T KNOW አያውቁም..... 9998	BIRR BIRR
40	If not, why did you not seek treatment? (DO NOT READ THE ANSWERS, ENCOURAGE BY ASKING IF THERE IS ANYTHING ELSE UNTIL HE/SHE SAYS THERE IS NOTHING ELSE AND CHECK ALL MENTIONED) የህክምና አገልግሎት ያልፈለግብኩት/ያልተዋቀብኩት ምክንያት ምንድን ነው? ምርጫዎቼን አታንብብ/ቢ ሌሎች ምልክቶችስ እያልኩ/ሽ ጠይቅ/ዩ? የተጠቀሱትን በሙሉ አክብብብ/ቢ	NOT ILL ስላልታመመ 11 LACK OF MONEY የገንዘብ አጥረት..... 12 FACILITY TOO FAR ቦታው በጣም ሩቅ ስለሆነ..... 13 NO ONE AVAILABLE TO ESCORT PATIENT ህመምተኛውን የሚወስድ ሰው ስለሌለ..... 14 LOW QUALITY OF FACILITY OR SERVICE 15 COULD NOT SPARE TIME AWAY FROM WORK በስራ ብዛት ምክንያት..... 16 ILLNESS UNLIKELY TO BE TREATED በሽታው መታከም ስለማይችል..... 17 DID NOT REQUIRE MEDICAL ASSISTANCE የህክምና አርዳታ ስለማያስፈልገው..... 18 OTHER (SPECIFY) 96	→ 43
41	Was [NAME] given any medicine for the fever or malaria before being taken to the health facility? ልጁ ወይ ጤና ጣቢያ ከመወሰዱ በፊት ማንኛውንም አይነት የትኩሳት/የወጣ መድኃኒት ወስዶ/ዳ ነበር?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 43 → 43
42	How long after the fever started did [NAME] get medical advice or treatment? (ስም) ትኩሳት/ላሉ ከጀመረው ከምን ያህል ቀናት በኋላ ነበር ለመጀመሪያ ጊዜ ምክር ወይም ህክምና አርዳታ ያገኘው? በተመሳሳይ ቀን ከሆነ '00' ይመዝገብ	DAYS / ቀናት.....	
43	Does your household have any bed nets that can be used while sleeping? ቤተሰብዎ በምንታ ጊዜ የሚጠቀሙበት አንበር አለው?	YES አዎ..... 1 NO የለም..... 2	→ 48
44	When you got the net, was it already treated with an insecticide to kill or repel mosquitoes? አንበሩን ባገኘበት ወቅት አንበሩ የወጣ ትንኞችን አንዲገድል ወይም እንዲያባርር መድሀኒት ተነክሮ/ተረጭቶ ነበር?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	
45	Did [NAME OF CHILD] sleep under the net last night? (ስም) ትላንት ሊሊት በወጣ መከላከያ አንበር ውስጥ ነበር ያደረገው/ችው?	YES አዎ..... 1 NO የለም..... 2	
46	Where did you get the net? ይህንን የወጣ አንበር ከየት አገኛችሁ?	HEALTH POST ጤና ኬላ..... 1 HEALTH CENTER ጤና ጣቢያ..... 2 KEBELE ADMISISTRATION ከቀበሌ መስተዳድር..... 3 MARKET/SHOP ገበያ/ ሱቅ..... 4 OTHER (SPECIFY) 6 DON'T KNOW አያውቅም..... 8	
47	How long did the household get this net? ቤተሰቡ ይህንን የወጣ አንበር ካገኘ ስንት ጊዜ ሆነው? ከአንድ ወር በታች ከሆነ '00' ይመዝገቡ መልሱ 12 ወራት ወይም 1 አመት ከሆነ ትክክለኛውን ወራት ከ 12 ወራት በፊት ወይም በኋላ መሆኑን አረጋግጥ::	MONTHS AGO..... ወራት በፊት THREE YEARS AGO ከሶስት አመታት በፊት..... 95 DON'T KNOW አያውቅም..... 98	
Pneumonia and Cough የሳንባ ምች እና ሳል			
48	Has [NAME OF CHILD] had pneumonia in the last 2 weeks? ባለፉት 2 ሳምንታት ልጁ/ህጻኑ የሳንባ ምች አዳግ ነበር?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	
49	Has [NAME OF CHILD] had cough in the last 2 weeks? ባለፉት 2 ሳምንታት ውስጥ (ስም) ሳል የተቀላቀለበት ህመም ነበረው/ራት?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 52 → 52

NO.	QUESTIONS, OBSERVATION AND FILTER	CODING CATEGORIES	SKIP																																																												
50	When (NAME) had an illness with a cough, did he/she breath faster than usual with short, rapid breaths or have difficulty breathing? (ስም) ነበር ወይም ለመተንፈስ ይቸግር ነበር? (አይ) ነበር ወይም ለመተንፈስ ይቸግር ነበር?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8																																																													
51	Was the fast or difficult breathing due to a problem in the chest or a blocked or runny nose? (ስም) ይህ ፈጣን የአተነፋፈስ ችግር የመጣው በደረት አካባቢ በተፈጠረው ችግር ነው ወይስ አፍንጫው በመዘጋቱ ምክንያት ነበር ችግር ወይስ ንፍቱ በመብዛቱ ምክንያት ነበር?	PROBLEM IN CHEST ONLY የደረት ችግር ብቻ..... 1 BLOCKED OR RUNNY NOSE ONLY በአፍንጫ መዘጋት ብቻ..... 2 BOTH ሁሉም..... 3 OTHER (SPECIFY)..... 6 DON'T KNOW አያውቁም..... 8																																																													
IMMUNIZATION ክትባት																																																															
If an immunization card is available, copy dates in question 53 for each type of immunization recorded on the card. የክትባት ካርድ ካለ፣ ለሁሉም የክትባት አይነቶች ቀናት ጥያቄ 53 ገልጧ																																																															
52	Do you have a card where [NAME]'s vaccination are written down? (IF YES) MAY I SEE IT PLEASE? (ስም) ክትባት ዝርዝር የተጻፈበት ካርድ/ወረቀት አለው/ላት? አዎ ካለ፤ -አባከም ማየት አቸላለሁ- በግልጽ ካርዱን ይመልከቱ?	YES, SEEN አዎ ታይቷል..... 1 YES, NOT SEEN አዎ አልታየም..... 2 NO CARD ካርድ የለውም..... 3	→ 53 → 56 → 56																																																												
53	a). Copy dates for each vaccination from the card -ክትባቶቹ የተሰጡበትን ቀን ከካርዱ ላይ በማየት በሚከተለው ሰንጠረዥ ይገልጡ b). Write '44' in day column if card shows that vaccination was given but no dates recorded -በካርዱ ላይ ክትባቱን መወሰዱ ተመልክቶ ነገር ግን ቀን ያልተሞላ ከሆነ ቀን በሚለው ዓምድ ስር «44» ይመዝገብ																																																														
	BCG ቢሲጂ POLIO AT BIRTH (OPV0) ፖሊዮ (በወለድ ወቅት የሚሰጥ) POLIO 1 ፖሊዮ 1 POLIO 2 ፖሊዮ 2 POLIO 3 ፖሊዮ 3 PENTA 1 ፔንታ 1 PENTA 2 ፔንታ 2 PENTA 3 ፔንታ 3 PCV 1 ፒሲቪ 1 PCV 2 ፒሲቪ 2 PCV 3 ፒሲቪ 3 MEASLES የኩፍኝ ክትባት VITAMIN A ቪታሚን ኤ (በቅርብ ጊዜ የወሰደው/ችው) OTHER VACCINE ሌሎች ክትባቶች	<table border="1"> <thead> <tr> <th></th><th>DAY</th><th>MONTH</th><th>YEAR</th></tr> </thead> <tbody> <tr><td>BCG</td><td></td><td></td><td>0</td></tr> <tr><td>OPV0</td><td></td><td></td><td>0</td></tr> <tr><td>OPV1</td><td></td><td></td><td>0</td></tr> <tr><td>OPV2</td><td></td><td></td><td>0</td></tr> <tr><td>OPV3</td><td></td><td></td><td>0</td></tr> <tr><td>PEN1</td><td></td><td></td><td>0</td></tr> <tr><td>PEN2</td><td></td><td></td><td>0</td></tr> <tr><td>PEN3</td><td></td><td></td><td>0</td></tr> <tr><td>PCV1</td><td></td><td></td><td>0</td></tr> <tr><td>PCV2</td><td></td><td></td><td>0</td></tr> <tr><td>PCV3</td><td></td><td></td><td>0</td></tr> <tr><td>MEASLES</td><td></td><td></td><td>0</td></tr> <tr><td>VITA</td><td></td><td></td><td>0</td></tr> <tr><td>OTHER</td><td></td><td></td><td>0</td></tr> </tbody> </table>		DAY	MONTH	YEAR	BCG			0	OPV0			0	OPV1			0	OPV2			0	OPV3			0	PEN1			0	PEN2			0	PEN3			0	PCV1			0	PCV2			0	PCV3			0	MEASLES			0	VITA			0	OTHER			0	
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54	Check question 53. Are all vaccines (BCG to MEASLES) recorded? ጥያቄ 53 ላይ ከቢሲጂ እስከ ኩፍኝ ያሉት ክትባቶች በሙሉ ተመዝግበዋል?	YES አዎ..... 1 NO የለም..... 2	→ 58																																																												
55	In addition to what is recorded on this card, did [NAME] receive any other vaccinations -including vaccinations received in campaigns or immunization days? RECORD "YES" ONLY IF REpondents MENTIONS VACCINES SHOWN IN THE TABLE ABOVE (ስም) አዚህኛው የክትባት ካርድ ላይ ከተመዘገቡት ክትባቶች ሌላ ክትባት በብሆራዊ የክትባት ዘመቻ ቀን የሚሰጡትንም ጭምር ወስዷል/ዳለች? አዎ የሚከበበው መልስ ሰውዎ ቢሲጂ ፖሊዮ 1-3 ዲፒቲ 1-3 (DPT-HepB -HIB), PCV እና/ወይም ሚዝል ክትባት ከወሰዱ ብቻ ነው	YES አዎ..... 1 (Probe for vaccinations and writes '66' in the corresponding day column for each vaccines mentioned. Then skip to 58) የክትባቱ አይነት በጥያቄ 53 የተጠቀሰው ስለመሆኑ አወጣጡ እና በክትባቱ አኳያ ቀን በሚለው ዓምድ "66" መዝግቡና ወደ ጥያቄ "58" ይለፉ) NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 58 → 58																																																												
The next 2 questions are for registering vaccinations that are not recorded on the card and will only be asked where a card is not available -ጥያቄ 56 -57 የሚጠየቁት መልስ ሰውዎ የክትባት ካርድ ካላሳየች ብቻ ነው																																																															
56	Has [NAME] ever received any vaccinations to prevent him/her from getting diseases, including vaccinations received in a campaign immunization day? (ስም) በሽታ እንዳይዘዝ ለመከላከል ማንኛውም አይነት ክትባት በብሆራዊ የክትባት ዘመቻ ቀን የሚሰጡትን ጨምሮ ወስዶ/ዳ ያወቃል/ታወቃለች?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 59 → 59																																																												
57	Can you tell me if [NAME] takes the following vaccines please. አባከም (ስም) የሚከተሉትን ክትባቶች ማግኘቱን ገረኝ:-																																																														
57a	Has [NAME] ever received a BCG vaccination against tuberculosis - that is, an injection in the arm or shoulder that usually causes a Scar? በ ከንድ ላይ ወይም በትከሻ ላይ የሚሰጥ በአብዛኛው ጠባላ የሚፈጥርና ቢሲጂ. የሚባል የሳንባ ነቀርሳ በሽታን የሚከላከል ክትባት ወስዷል/ዳለች?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8																																																													
57b	Has [NAME] ever received any "vaccination drops in the mouth" to protect him/her from getting diseases -that is, Polio? በጡብታ መልክ በአፍ የሚሰጥ የፖሊዮ ክትባት ወስዷል/ዳለች?	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 57e → 57e																																																												
57c	Was the first polio vaccine received in the first two weeks after birth or later? የመጀመሪያዉ የፖሊዮ ክትባት የተሰጠው/ባት እንደተወለደ/ች ነው ወይስ ቆይቶ/ታ ነው?	WITHIN 24 HOURS እንደተወለደ..... 1 LATER ቆይቶ..... 2																																																													
57d	How many times was the Polio vaccine received? ስንት ጊዜ ነበር የፖሊዮ ክትባት የተሰጠው/ባት?	NO. OF TIMES የወሰዱት ጊዜ ብዛት																																																													

NO.	QUESTIONS, OBSERVATION AND FILTER	CODING CATEGORIES	SKIP
57e	Has [NAME] ever received a DPT vaccination - that is, an injection in the thigh or buttocks - to prevent him/her from getting Tetanus, Whooping cough, or Diphtheria <i>Probe by indicating that DPT or (DPT-HepB-HIB) vaccination is sometimes given at the same time as Polio?</i> <i>የዲፕቴሪ ወይም ዲፕቴሪ ሂፕቪ ሂብ (DPT-HepB-HIB) የሚባል ክትባት ይህም ማለት በግራ ጭን ወይም ቢታፋ ላይ በመርፌ የሚሰጥ ክትባት (እንዳንድ ጊዜ ከፖሊዮ ጠብታ ጋር አብሮ የሚወሰድ) ወስዷል/ዳለች?</i>	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 57g → 57g
57f	How many times was the a DPT vaccine received? ስንት ጊዜ ነበር የዲፕቴሪ ወይም ዲፕቴሪ ሂፕቪ ሂብ ፖሊዮ ክትባት የተሰጠው/ጣት?	NO. OF TIMES የወሰዱት ጊዜ ብዛት	
57g	Has [NAME] ever been given a PCV vaccination - that is, an injection in the thigh or buttocks? <i>Probe by indicating that the PCV vaccine is sometimes given at the sometimes as Polio and DPT vaccines</i> <i>ፕሲቪ የሚባል ክትባት ይህም ማለት (እንዳንድ ጊዜ ከፖሊዮ ጠብታ ጋር አብሮ የሚሰጥ) ከዲፕቴሪ ወይም ፔንታ (ዲፕቴሪ ሂፕቪ ሂብ/DPT-HepB-HIB) ጋር በቀኝ ጭን ወይም ቢታፋ ላይ በመርፌ የሚሰጥ ክትባት ወስዷል/ዳለች?</i>	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	→ 57i → 57i
57h	How many times was the PCV vaccine received? ስንት ጊዜ ነበር የፕሲቪ ክትባት የተሰጠው/ጣት?	NO. OF TIMES የወሰዱት ጊዜ ብዛት	
57i	Has [NAME] ever received a Measles injection or an MMR injection - that is, a shot in the arm at the age of 9 months or older - to prevent him/her from getting Measles? <i>የኩፍኝ በሽታን የሚከላከል መርፌ ወይም የMMR ክትባት (ህፃናት ድሜያቸው 9 ወር ወይም ከዚያ በላይ ሲሆን በከንዳቸው ላይ የሚሰጥ) ወስዷል/ዳለች?</i>	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	
58	Has [NAME] a vaccine certificate that shows he/she finished all the required vaccines? (IF YES), MAY I SEE IT PLEASE? <i>(ስም) ክትባት ማጠናቀቁን የሚያሳይ ዲፕሎማ/ ሰርትፊኬት አለው/ላት? አዎን ካሉ እባክዎን ላየው እችላለሁ?</i>	YES, SEEN አዎ የክትባት ዲፕሎማው ታይቷል..... 1 YES, NOT SEEN አዎ የክትባት ዲፕሎማው አልታየል..... 2 NO የለም..... 8	
59	Has [NAME] ever received the yellow fever vaccination -that is, a shot in the arm at the age of 9 months or older - to prevent him/her from getting Yellow fever? <i>Probe by indicating that the yellow fever vaccine is sometimes given at the same time as the measles vaccine</i> <i>የቢጫ ወባን የሚከላከል ክትባት (ህፃናት ድሜያቸው 9 ወር ወይም ከዚያ በላይ ሲሆን በከንዳቸው ላይ የሚሰጥ) ወስዷል/ዳለች?</i>	YES የለም..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	
60	Has [NAME] received a vitamin A does like (this/any of these) within the last 6 months? <i>Show common types of ampules / capsules / syrups</i> <i>(ስም) ባለፉት 6 ወራት የቪታሚን ኤ አንክብል ወስዷል/ዳለች? እንክብሉቹን አሳዩ</i>	YES አዎ..... 1 NO የለም..... 2 DON'T KNOW አያውቁም..... 8	

ANTHROPOMETRY (WEIGHT AND HIGHT) FOR CHILDREN AGE 0-5 YEARS OLD			
After questionnaires for all children are complete, measure weights and heights of each child. Please measure length lying down for children under 2 years old.			
ከሁለት አመት በታች የሆኑ ልጆች ቁመት ተኝተው ይለኩ			
61	WEIGHT IN KILOGRAMS? ክብደት በኪሎ ግራም?	KG: NOT PRESENT አልነበረም..... 994 REFUSED ፍቃደኛ አይደለም..... 995 OTHER (SPECIFY)..... 996	
62	HIGHT IN CENTIMETER? ቁመት በሴንቲ ሜትር?	CM: NOT PRESENT አልነበረም..... 994 REFUSED ፍቃደኛ አይደለም..... 995 OTHER (SPECIFY)..... 996	
63	MEASURED LYING DOWN OR STANDING UP? የተለካዉ በምን ሁኔታ ነው?	LYING DOWN ተጋሎ/ተኝቶ..... 1 STANDING UP ቁጥጥ..... 2 NOT MEASURED አልተለካም..... 3	

USE ANOTHER COPY OF THIS QUESTIONNAIRE IF THERE IS MORE THAN ONE UNDER FIVE CHILDREN WITH THE SAME PRIMARY CARETAKER

End time ቃለ መጠይቁ የተጠናቀቀበት ሰዓት	
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Thank you very much for your participation and good bye!! መልስ ሰጧዎን አመሰግናችሁ ወደ ቀጣይ ቤተሰብ ሂዱ::