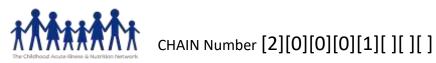


Date of visit	// DD/MM/	<u> </u>	Time arrived at household		:	Accompanied ch home from hosp		ПΥ	□N
Is this the same homestead the child was admitted from?		stay at t	Do the caregiver and child intend to stay at this homestead until the next follow-up visit?				n		
How long did it		How die		id you ☐ Car/ Taxi ☐ Bus ☐ Motorbike ☐ Walking					
take to get to th household?	Hrs	_Min	_Min travel to		□ Tuk-tuk □ (	Cycle 🗖 Train	☐ Other rickshaw		
			GPS LC	CATION	OF HOUSEHO	DLD			
Tick + or – to ind	icate N/S and W/	/E							
Latitude: ☐ +	П-								
		_					_		
Longitude 🗌	+ 🗌 –	_		• _			_		
NOTE: GPS must	be set to decima	ıl degrees DD	DD.DDDDL	DD (NOT a	degrees, minute	s and seconds).			
				<u> </u>		· ·			
			Hous	sehold	Informatio	on			
Number of adu (over 18y) living this household NOW	ng in	518y	iber of che in the interior in	l		Number of under 5 line	ving in	en	
Who lives in th	nis household?	Select all t	hat appl	у					
□Biological Mo	_	cal father $\square$	]Brother			er □Grandfathe other / stepfathe		□ Other	

**Homestead visit** 



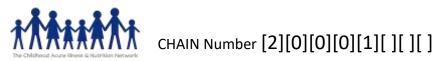


# **Primary Caregiver Information**

This is the person who has responsibility for day to day care of the child, but is not a substitute carer such as childminder or grandparent who cares for child whilst, for example, mother is at work.

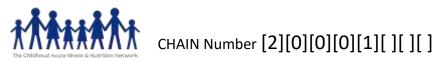
Who is the Primary		☐Biological Parent ☐Grandparent ☐Sibling					□Aunt / Uncle / Cousin		
Caregiver? Select one		l Stepmothe	r / father 🗖 C	Care hon	ne /orphana	ge	□Other/ Und	lear	
Is the child's biological fath		ΙΥ	□ N □ Unkr	nown	Is the ch mother al	ild's biologi ive?	cal	□ N [	□ Unknown
Primary Care Giver Age Select one		l <18years	□>=1	8 years		□ >50years	□ N/A	(care hon	ne or unclear)
Primary Care Giver Sex Select one		l Male □ Fe	male □ N/A	Pri	mary careg	iver present a	at admission?	Υ	□N
Has the primary caregiver li	Has the primary caregiver lived in the same household as the child for the last 2 months?								
Marital status of prima caregiver Select one									
If not present at admission,	whe	ere is the pri	imary caregiv	er? Seled	ct one				
□ Home □ W	/ork		☐ Sch	nool	□ Unl	known □ Oth	er		N/A
If the primary caregiver is p Use locally available adult scale		_	=	-	provided by	CHAIN.			
☐ Primary caregiver not p	rese	ent during a	dmission or	care ho	me				
Weight	_ kg		MUAC		cm		Heigh	nt:	cm
Education: Select highest leve education achieved	l of	□ None	☐ Primary [	⊐ Secon	dary 🗖 Abo	ve secondary	□ Un	:nown E	N/A care home
Able to read?		□ Y □ N [	J∪nknown	-		river primarily ad providing fo	-	·	I Y 🗆 N
Primary caregiver HIV statu last 6 months Select one	s in	☐ Tested Po	ositive		☐ Teste	d Negative	□N	ot tested o	r unknown





Have there been changes to the chi	ild's so	cial situa	ation in th	ne last 2 MONTHS? Select any			
				Relocation from rural to urban setting	Υ		N
Child moved to a different household Y		Υ	N	Relocation from urban to rural setting	Y		N
			Relocation to live with different caregiver	r Y		N	
Mother sick		Υ	N	Mother Died	Y		N
Father sick		Υ	N	Father Died	Y		N
Other primary caregiver sick	`	/ N	N/A	Other primary caregiver died	Y	N	N/A
Primary caregiver changed		Υ	N	Child went into care home	Y		N
Primary caregiver started employm	nent /	Y	N	Person providing for the child has lost income	Y		N
Primary caregiver divorced / separa	ated	Υ	N	Primary caregiver in new relationship	Y		N
Mother is pregnant		Υ	N	Mother gave birth	Y		N
Other primary caregiver pregnant?	1	/ N	N/A	Other primary caregiver gave birth	Y	N	N/A
If primary caregiver has changed in Select one	the la	st 2 mor	nths, who	was the child's previous primary caregiver	?		
☐Biologic Mother ☐Biolog	gic Fatl	her		☐Sibling ≥18 years old	□Sibling •	<18 ye	ears old
□Grandparent □Aunt/	/Uncle	/Cousin		□Other	□ N/A		
Primary caregiver earns an inco	me nov	w? Ask t	he person (	accompanying the child and select one			
☐ Employed full time by someone			-				
☐ Works for self ☐ No work inco		·		·			
☐ Works casually/irregularly for s	omeor	ne 🗆 Do	n't know				
If works casually, Occupation:				□ N/A care home			
How many days worked a week?	Select o	one		□ N/A, does			
				□ <3 □ 3-5 □ >5 not work for			
						inc	ome



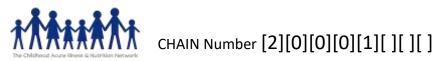


If the primary caregiver earns, main sour	ce of income? Select one					
☐ Farmer ☐ Business/trader	☐ Labourer ☐ Domestic					
☐ Other private sector employment	☐ Public sector employment ☐ Retired with pension inco	work me				
	□ N/A					
	· · · · · · · · · · · · · · · · · · ·					
	non-earning), main place of work? Select one					
□In/around home (where child lives)	☐ Away for <4 hours per day ☐ Awa home o	ay >4 hours but comes daily				
1	□Away >1 day, comes home weekly □ Away comes home	<del>-</del>				
☐Primary caregiver lives and works away	☐ Don't know ☐ N/A	`				
The person primarily providing financial support to this child is this child's: Select one						
☐ Biologic Mother ☐ Biologic Fath	er					
☐ Grandparent ☐ Sibling ≥18 years	s old ☐ Sibling <18 years old ☐ Aunt/Uncle/Cousin					
☐ More than one person responsib	le, □ Unsupported / care home □ Other -specify	unclear				
Person responsible for providing financial s	support to child, place of usual residence? Select one					
☐ Always sleeps at home ☐ Sleeps away b	out returns weekly					
☐ Sleeps away for > two months per year [	$\ \square$ Works and lives abroad, contact with child once a year or	less				
☐ Sleeps away but return monthly or less o	ften 🗖 Don't know					
□ Other	☐ N/A (e.g. care home, unsupported)					
	for providing financial support to child source of income? ling financial support do not complete this section.	Select				
☐ Farmer ☐ Business/trader	☐ Labourer ☐ Domestic work					
☐ Other private sector employment	$\square$ Public sector employment $\square$ Retired with pension incor	ne				
☐ Begging ☐ None ☐ Unknown	□ Other □ N/A					

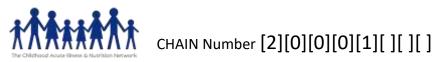
# **Substitute Care:**

Who usually looks after child when primary caretaker is working or away? Select all that apply



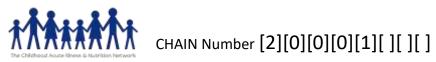


☐ Not applicable, caregiver looks after child full time	☐ Not applicable, caregiver looks after child full time ☐ Not applicable, child accompanies caregiver to work								
☐ No substitute care, child left alone	☐ No subs	$\square$ No substitute care / unclear $\square$ Child in care home							
☐ Biological Mother ☐ Biological Father ☐ Sibling <	<18 years old	☐ Sibling	≥18 years old						
☐ Grandparent ☐ Aunt/Uncle/Cousin ☐ Childcare	facility outsic	le home 🏻	Childminder/	day care at hor	me				
How many days a week is the child in day care?	□ N/A	□ 1-2	□ 3-4	□ 5-6	□ >6				
How many hours per day is the child in day care?	□ N/A	□ 1-4h	□ 5-8h	□ 9-12h	□ >12h				
How many children are looked after at this day care?	□<3	□ 4-6	□ 7-10	□ >10	□Unknowi	n □ N/A			
How many of these are under 2y?	□<3	□ 4-6	□ 7-10	□ >10	□Unknow	n □ N/A			
How many adults look after these children?	□1	□2-4	□5-10	□ >10	□ N/A				
Do you feel the day care is good?	ПΥ	□N	□ N/A						
Who provides food for the child at day care? Select one									
<ul> <li>□ Caregiver provides □ Day care provides □ S</li> <li>□ N/A food for the child food for the child</li> </ul>		provides <b>[</b> I for the ch		ow					
Is feeding supervised / assisted at day care? □ Y □ N □ Unkn	own □ N/A								
How is food USUALLY given to the child? Select one				□ Child fee	Fed ds self, unsu	by adult pervised			
self, supervised by adult ☐ Fed from common plate	or bowl			[	□ Ch	ild feeds			
self, supervised by older children □ Child exclusively	/ breastfed			[	□ Ch	ild feeds			



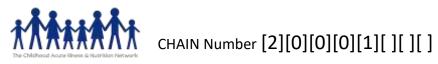
Household Food Security						
If the child is in a case home, this should be asked regarding the other children in the case home, not members of staff						
During the past 7 DAYS has ANY member of the household missed a meal due to food shortage? ☐ Y ☐ N ☐ Unknown						
During the past 4 WEEKS						
Unknown						
Were any of your household unable to eat the kinds of food preferred because of a lack of						
Unknown resources?		YDND				
Have any of your household had to eat a limited variety of food due to lack of resources?						
Unknown		Y 🗆 N 🗆				
Have any of your household eaten some foods that you really didn't want to eat because of lack of		Y □ N □				
Unknown resources?						
Have any of your household eaten fewer meals in a day because there was not enough food?						
Unknown		Y 🗆 N 🗆				
Did household members go to sleep at night hungry because there was not enough food?						
		Y 🗆 N 🗆				
Unknown						
Did you or your household members go a whole day and night without eating anything because						
		Y 🗆 N 🗆				
Unknown there was not enough food?						
Child Dietary Diversity						
What does the child eat on a typical day?						
Ask this as an open question and select all that the caregiver mentions.						
<ul> <li>Do not present the caregiver with this list.</li> <li>You may prompt the caregiver with open questions, e.g. What does your child usually eat for breakfast</li> </ul>						
☐ Milk and Milk Products: Fresh/fermented milk, cheese, yogurt, or other milk products						
☐ Breast milk						





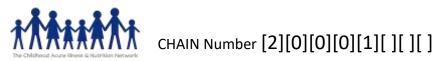
☐ Cereals and Cereal Products: Maize, rice	e, pasta, porridge, bread, biscuits, millet, sorghum, wheat, locally available grains
☐ Fish and Sea Foods: fresh or dried fish o	r shellfish
☐ Roots and Tubers: potatoes, sweet pota	atoes, yams, cassava, or foods made from roots or wild roots and tubers
☐ <b>Vegetables</b> : Cabbages, carrots, spinach, a	and any other locally available vegetables including wild vegetables
☐ Fruits: Oranges, bananas, mangoes, avoo	cados, apples, grapes etc
☐ <b>Meats and Poultry</b> : Camel, beef, lamb, g or blood-based foods	oat, rabbit, wild game, chicken or other birds, liver, kidney, heart or other organ meats
☐ Eggs: Hen or other bird eggs	
☐ Pulses / Legumes / Nuts and Seeds: Bea	ns, peas, lentils, nuts, seeds or foods made from these
☐ Fats and Oils: Oil, fats, ghee, margarine o	or butter added to food or used for cooking
☐ Sugars / Honey and Commercial Juices:	Sugar in tea, honey, sweetened soda, juices, chocolates, sweets or candies
☐ <b>Miscellaneous</b> : Spices, unsweetened bev	verages
	oold wealth (DHS 7 questionnaire. Please answer all questions) This completed for all children, including those in care homes
What is the main source of drinking water	for members of your household? Choose one
☐ Piped water to dwelling	☐ Cart with small tank ☐ Bought from vendor
☐ Piped water to yard / plot☐ Piped to neighbour	☐ Tanker truck ☐ Rainwater ☐ Bottled water ☐ Stream/river/lake/pond/dam
☐ Public tap/ Standpipe ☐ Prote	ected spring  Unknown
☐ Protected well / borehole	☐ Unprotected spring





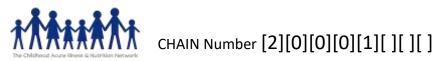
☐ Unprotected well ☐ Other						
What is the MAIN source of water used by SELECT ONE ONLY	y your household for other purpo	ses such as cooking and ha	ndwashing?			
☐ Piped water to dwelling	☐ Cart with small tank ☐ Boug	ht from vendor				
☐ Piped water to yard / plot☐ Piped to neighbour	☐ Tanker truck ☐ Rainwater ☐ Stee	ream/river/lake/pond/dam				
☐ Public tap/ Standpipe ☐ Prote	ected spring   Unknown					
☐ Protected well / borehole	☐ Unprotected spring					
☐ Unprotected well ☐ Other						
How long does it take to get water and co (State 0 if water supplied within home or		minutes 🗆 D	on't know			
In the past 2 weeks was the water from the for at least one full day?	nis source not available	□Y□N	□ Unknown			
Do you usually do anything to the water to make it safer to drink? Select all that apply						
□ None □ Bleach/ chlorine □ Str	ain through a cloth 🛮 Let it stand	and settle				
☐ Use water filter ☐ Solar disinfec	☐ Use water filter ☐ Solar disinfection ☐ Boil ☐ Other (ceramic/sand/composite etc)					
What kind of toilet facility do members of your household usually use? Select one						





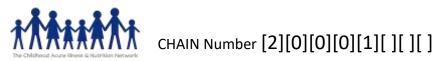
$\square$ Flush or pour flush toilet to piped sewer $\square$ Flush to septic tal	nk 🛮 Ventilated imp	proved pit latrine						
☐ Flush to pit latrine ☐ Flush to somewhere else ☐ Open pit / Pit latrine without slab								
☐ Flush don't know where ☐ Composting toilet ☐ Bucket toilet								
☐ Pit latrine with slab ☐ Hanging toilet / hanging latrine ☐ No facility / bush/ field								
□ Unknown								
Do you share this toilet facility with other households?	□ Υ	□N	☐ Unknown					
If Yes, including your own household, how many households use this toilet facility?	Number if <10	□ >10 households	□ Unknown □ N/A					
Where is this toilet facility located?	ility located? □ In own dwelling □ In own yard / plot □ Elsewher							
How many rooms are there in the household for SLEEPING? ☐ 1 ☐ 2			□ >2					
What is the MAIN FLOOR material of the rooms in this househ	old? Select one only							
☐ Cement ☐ Earth/sand ☐ Wood								
☐ Dung ☐ Lives on boat ☐ Tiles								
☐ Carpet ☐ Other (specify)	□ Unknown							
What is the MAIN WALL material of the rooms in this househo	Id? Select one only							
☐ Grass/straw/makuti ☐ Stone ☐ Wood ☐ Unknow	vn							
☐ Corrugated iron sheet/ Tin ☐ Mud/wood ☐ Brick/block								
☐ Planks/shingles ☐ No wall ☐ Other (specify)	·							
What is the MAIN ROOF material of the house in this househo	ld? Select one only							
☐ Grass/Thatch ☐ Tiles/Asbestos sheets ☐ Corrugated iron/ 1	- Fins							
☐ Mud ☐ Nylon papers/clothes ☐ Concrete								
☐ Other (specify)		☐ Unknow	vn					
What is the MAIN cooking fuel used in this household? Select of	one only							





☐ Electricity ☐ LPG /Natural gas/Biogas ☐ Paraffin								
□ Coal / Lignite □ Charcoal □ Firewood								
☐ Straw/shrubs/grass ☐ Agricultural crop ☐ Animal Dung								
□ No food cooked in household □ Other (specify) □ Unknown								
Do you have a separate room which is used as a kitchen? ☐ Y ☐ N ☐ Unknown								
Where is this household's cooking area located?								
☐ In the house ☐ Outdoors ☐ In a separate building ☐ Other ☐ Unknown								
Does this household own any livestock, herds, other farm animals or poultry				☐ Unknown				
If yes, how many of the following animals does this hous	ehold own?	1		1				
Cows/bulls Sheep								
Horses/Donkeys/Mules Goats								
Horses/Donkeys/Mules Goats								
	number			□ N/A				
	number	— □ Y	□N	□ N/A				
Chickens or Ducks Other			□ N	T				
Chickens or Ducks Other  Does any member of this this household own land?		ПΥ		Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household o		☐ Y	Unknown	□ Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household o  Does this household have a bank account?			☐ Unknown	Unknown  N/A  Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household o  Does this household have a bank account?  Does this household have electricity			□ Unknown □ N □ N	□ Unknown □ N/A □ Unknown □ Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household o  Does this household have a bank account?  Does this household have electricity  Does this household own a radio?		□ Y Acres □ Y □ Y □ Y	Unknown  N  N  N	Unknown  N/A  Unknown  Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household o  Does this household have a bank account?  Does this household have electricity  Does this household own a radio?  Does this household own a television?		□ Y          Acres           □ Y           □ Y           □ Y           □ Y	Unknown  N N N N N	Unknown Unknown Unknown Unknown Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household o  Does this household have a bank account?  Does this household have electricity  Does this household own a radio?  Does this household own a television?  Does this household own a computer?			Unknown  N N N N N N N N	□ Unknown □ N/A □ Unknown □ Unknown □ Unknown □ Unknown □ Unknown				
Chickens or Ducks Other  Does any member of this this household own land?  If "Yes" How many acres of land does this household of Does this household have a bank account?  Does this household have electricity  Does this household own a radio?  Does this household own a television?  Does this household own a computer?  Does this household own a refrigerator?			Unknown  N N N N N N N N	□ Unknown □ N/A □ Unknown □ Unknown □ Unknown □ Unknown □ Unknown				





A mobile phone?	☐ Y Standard phone	5	☐ Y smartphone	□N		Inknown
An animal-drawn cart?		·	ПΥ	□N		Inknown
A bicycle?			ПΥ	□N		Inknown
A motorcycle / scooter?			ПΥ	□N		Inknown
A car or truck?			ПΥ	□N		Inknown
A boat with a motor?			ПΥ	□N	Πu	Inknown
CRF Completed by (Initials) – to be signed when complete.  Do not sign if any fields are empty	Da	ite		Time	e	