



**QUESTIONNAIRE FOR CHILDREN UNDER FIVE**  
**SAMOA DHS-MICS SURVEY 2019-20**



**UNDER-FIVE CHILD INFORMATION PANEL**

**UF**

<b>UF1.</b> Cluster number:	_____			<b>UF2.</b> Household number:	_____		
<b>UF3.</b> Child's name and line number:				<b>UF4.</b> Mother's / Caretaker's name and line number:			
NAME _____				NAME _____			
<b>UF5.</b> Interviewer's name and number:				<b>UF6.</b> Supervisor's name and number:			
NAME _____				NAME _____			
<b>UF7.</b> Day / Month / Year of interview:	_____/_____/	<u>2</u>	<u>0</u>	<u>1</u>	<u>9</u>	<b>UF8.</b> Record the time:	HOURS : MINUTES _____:_____ _____
<p>Check respondent's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE:          If age 15-17, verify that adult consent for interview is obtained (HH33 or HH39) or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in UF17. The respondent must be at least 15 years old.</p>							
<b>UF9.</b> Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?				YES, INTERVIEWED ALREADY ..... 1	1 ⇔ UF10B	NO, FIRST INTERVIEW ..... 2	2 ⇔ UF10A
<b>UF10A.</b> Hello, my name is ( <i>your name</i> ). We are from Samoa Bureau of Statistics. We are conducting a survey to better understand the health, well-being, and overall situation of children, families and households. I would like to talk to you about ( <i>child's name from UF3</i> )'s health and well-being. This interview will take about <b>30</b> minutes. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?  <b>Talofa, o lo'u igoa o (<i>your name</i>).</b> Matou te omai i le Ofisa o Fuainumera Fa'amauina. O loo faatinoina le matou suesuega ina ia maua se malamalamaaga tele i le tulaga o le soifua maloloina o tamaiti ma aiga faapea mataupu lautele o le soifuaga nei o loo aafia ai aiga o le tatou atunu. E fia faatalanoaina lau susuga i le soifua maloloina ma le ola tuputupu a'e o ( <i>child's name from UF3</i> ). E na o le 30 minute le umi o le faatalatalanoaga ae o faamatalaga fo'i o le a tuuina mai e malu puipuia i le tulafono a le Ofisa o Fuainumera Faamauina. Afai e iai se fesili ete le fia taliina, ona faailoa mai lea. E te finagalo o le a amata loa le ta faatalatalanoaga?	<b>UF10B.</b> Now I would like to talk to you about ( <i>child's name from UF3</i> )'s health and well-being in more detail. This interview will take about <b>30</b> minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?  <b>Ia o lea oute fia talanoa atu i le soifua maloloina o (<i>child's name from UF3</i>) ia ma isi mataupu. E na le 30 minute le umi o le faatalatalanoaga. O faamatalaga fo'i o le a tuuina mai e malu puipuia i le tulafono a le Ofisa o Fuainumera Faamauina. Afai e iai se fesili ete le fia taliina, ona faailoa mai lea. E te malie o le a amata loa le ta faatalatalanoaga?</b>						
YES..... 1				1 ⇔ <b>UNDER FIVE'S BACKGROUND Module</b>			
NO / NOT ASKED..... 2				2 ⇔ UF17			

<b>UF17.</b> Result of interview for children under 5  Codes refer to mother/caretaker. Discuss any result not completed with Supervisor.	COMPLETED..... 01
	NOT AT HOME ..... 02
	REFUSED ..... 03
	PARTLY COMPLETED ..... 04
	INCAPACITATED (specify) ..... 05
	NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17 ..... 06
	OTHER (specify) ..... 96

UNDER-FIVE'S BACKGROUND		UB
<b>UB0.</b> Before I begin the interview, could you please bring ( <i>name</i> )'s Birth Certificate, Child Health Book, and any immunisation record from any health provider? We will need to refer to those documents. <i>A'o lei amataina le ta faatalatalanoaga, pe mafai ona aumai le Pepa Fanau ma le Pepa Tui a (<i>name</i>) faatasi ai ma nisi faamaumauga mai nisi o Foma'i sa ave iai? Ona e tatāu ona fai ma vaai ai i faamatalaga nei.</i>		
<b>UB1.</b> On what day, month and year was ( <i>name</i> ) born? <i>O le a le Aso, masina ma le tausaga sa fanau ai (<i>name</i>)?</i>  <i>Probe:</i> What is (his/her) birthday? <i>Toefesili:</i> O le a lona aso fanau?  <i>If the mother/caretaker knows the exact date of birth, also record the day; otherwise, record '98' for day.</i>  <i>Month and year must be recorded.</i>	<p>DATE OF BIRTH          DAY ..... ____</p> <p>DK DAY ..... 98</p> <p>MONTH ..... ____</p> <p>YEAR ..... 2 0 1</p>	
<b>UB2.</b> How old is ( <i>name</i> )? <i>Ua fia nei tausaga o (<i>name</i>)?</i>  <i>Probe:</i> How old was ( <i>name</i> ) at (his/her) last birthday? <i>Ua fia nei tausaga o (<i>name</i>) i lona aso fanau mulimuli?</i>  <i>Record age in completed years.</i>  <i>Record '0' if less than 1 year.</i>  <i>If responses to UB1 and UB2 are inconsistent, probe further and correct.</i>	AGE (IN COMPLETED YEARS) .....	
<b>UB3.</b> Check UB2: Child's age?	AGE 0, 1, OR 2 ..... 1 AGE 3 OR 4 ..... 2	1⇒UB9
<b>UB4.</b> Check the respondent's line number (UF4) in UNDER-FIVE CHILD INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the Household Questionnaire?	YES, RESPONDENT IS THE SAME, UF4=HH47 ..... 1 NO, RESPONDENT IS NOT THE SAME, UF4≠HH47 ..... 2	2⇒UB6
<b>UB5.</b> Check ED10 in the EDUCATION MODULE in the HOUSEHOLD QUESTIONNAIRE: Is the child attending ECE in the current school year?	YES, ED10=0 ..... 1 NO, ED10≠0 OR BLANK ..... 2	1⇒UB8B 2⇒UB9
<b>UB6.</b> Has ( <i>name</i> ) ever attended any early childhood education (ECE)? <i>Sa auai (<i>name</i>) i se aoga amata poo aoga faata'ita'i?</i>	YES ..... 1 NO ..... 2	2⇒UB9
<b>UB7.</b> At any time since February 2019, did (he/she) attend early childhood education (ECE)? <i>Mai ia Fepuari 2019, sa iai se taimi sa ave ai o (ia) i se aoga amata poo aoga faata'ita'i?</i>	YES ..... 1 NO ..... 2	1⇒UB8A 2⇒UB9

<p><b>UB8A.</b> Does (he/she) currently attend (<i>programmes mentioned in UB6</i>)?</p> <p>O ave i le (<i>programmes mentioned in UB6</i>) i le taimi nei?</p> <p><b>UB8B.</b> You have mentioned that (<i>name</i>) has attended an early childhood education programme this school year. Does (he/she) currently attend this programme?</p> <p>O lea sa e taua sa alu ia (<i>name</i>) i le Aoga Amata poo se aoga faataitai i le tausaga nei. O alu a la (<i>name</i>) le aoga i le taimi nei?</p>	YES ..... 1 NO ..... 2	
<p><b>UB9.</b> Is (<i>name</i>) covered by any health insurance?</p> <p>O iai se inisiua o le soifua maloloina a (<i>name</i>)?</p> <p><b>UB10.</b> What type of health insurance is (<i>name</i>) covered by?</p> <p>O le a le ituaiga inisiua o le soifua maloloina o lo'o faaaogaina e (<i>name</i>)?</p> <p><i>Record all mentioned.</i></p>	YES ..... 1 NO ..... 2	2 $\Rightarrow$ End
	HEALTH INSURANCE THROUGH EMPLOYER ..... B OTHER PRIVATELY PURCHASED COMMERCIAL HEALTH INSURANCE..... D	
	OTHER (specify) _____ X	

BIRTH REGISTRATION		BR
<p><b>BR1.</b> Does (<i>name</i>) have a birth certificate?</p> <p>E iai se Pepa Fanau a (<i>name</i>)?</p> <p>If yes, ask: May I see it? E mafai na ou vaai i le pepa fanau?</p>	YES, SEEN ..... 1 YES, NOT SEEN ..... 2 NO ..... 3 DK ..... 8	1 $\Rightarrow$ End 2 $\Rightarrow$ End
<p><b>BR2.</b> Has (<i>name</i>)'s birth been registered with <i>the Birth, Death and Marriages Office (BDM)</i>?</p> <p>Ua uma ona resitara (<i>name</i>) i le Ofisa fai pepa fanau?</p>	YES ..... 1 NO ..... 2 DK ..... 8	1 $\Rightarrow$ End
<p><b>BR3.</b> Do you know how to register (<i>name</i>)'s birth?</p> <p>O e silafia pe faapefea ona resitara (<i>name</i>)?</p>	YES ..... 1 NO ..... 2	

EARLY CHILDHOOD DEVELOPMENT			EC
EC1. How many children's books or picture books do you have for ( <i>name</i> )?  E fia ni tusi faiat po'o ni tusi ata mo tamaiti o loo iai mo ( <i>name</i> )?	NONE .....00  NUMBER OF CHILDREN'S BOOKS..... 0 ____  TEN OR MORE BOOKS .....10		
EC2. I am interested in learning about the things that ( <i>name</i> ) plays with when (he/she) is at home.  Ou te fia iloa poo a meataalo o lo'o ta'alo ai ( <i>name</i> ) i le fale  Does (he/she) play with:  E ta'alo ia ( <i>name</i> ) i mea nei:  [A] Homemade toys, such as dolls, cars, or other toys made at home?  Mea taalo e fau/gaosia i le fale e pei o le, taavale atigiapa, va'a laau, ma isi?  [B] Toys from a shop or manufactured toys?  Mea ta'alo e faatau mai i le faleoloa?  [C] Household objects, such as bowls or pots, or objects found outside, such as sticks, rocks, animal shells or leaves?  Mea fale e pei o, tipoti, faapea ma'a, la'au, atigi popo/figota po'o lau laau?	Y    N    DK  HOMEMADE TOYS .....1    2    8  TOYS FROM A SHOP .....1    2    8  HOUSEHOLD OBJECTS OR OUTSIDE OBJECTS .....1    2    8		
EC3. Sometimes adults taking care of children have to leave the house to go shopping, wash clothes, or for other reasons and have to leave young children.  E iai taimi e tuua ai e tagata matutua poo tagata o loo vaaia tamaiti aua le faia o se faatauga, tagamea, alu i le bingo poo nisi foi mafuaaga ae tuu ai na o tamaiti i le fale  On how many days in the past week was ( <i>name</i> ):  E fia aso o le vaaioso lea na te'a nei sa :  [A] Left alone for more than an hour?  Tuu ai na o ( <i>name</i> ) i le fale e sili atu ma le itula?  [B] Left in the care of another child, that is, someone less than 10 years old, for more than an hour?  Sa tuua ai ( <i>name</i> ) e vaai e se isi tamaititi e lalo ifo o le 10 tausaga e sili atu ma le itula?  If 'None' record '0'. If 'Don't know' record '8'.	NUMBER OF DAYS LEFT ALONE FOR MORE THAN AN HOUR .....____  NUMBER OF DAYS LEFT WITH ANOTHER CHILD FOR MORE THAN AN HOUR .....____		
EC4. Check UB2: Child's age?	AGE 0 OR 1 .....1 AGE 2, 3 OR 4 .....2	1 ⇔ End	

<p><b>EC5.</b> In the past 3 days, did you or any household member age 15 or over engage in any of the following activities with (<i>name</i>)?</p> <p>I le 3 aso ua tuanai sa faatinoina e oe poo se isi tagata o le tou aiga e 15 tausaga ma luga atu vaega nei ma (<i>name</i>)?  <i>If 'Yes', ask:</i>  Who engaged in this activity with (<i>name</i>)?  O ai sa faatinoina ma (<i>name</i>) ia vaega nei?</p> <p><i>A foster/step mother or father living in the household who engaged with the child should be coded as mother or father.</i></p> <p><i>Record all that apply.</i></p> <p><i>'No one' cannot be recorded if any household member age 15 and above engaged in activity with child.</i></p>																																					
<p>[A] Read books or looked at picture books with (<i>name</i>)?  Faitau tusi ma matamata i tusi ata ma (<i>name</i>)?</p> <p>[B] Told stories to (<i>name</i>)?  Faamatala tala/fagogo ia (<i>name</i>)?</p> <p>[C] Sang songs to or with (<i>name</i>), including lullabies?  Ususu pese ma (<i>name</i>)?</p> <p>[D] Took (<i>name</i>) outside the home?  Sa ave (<i>name</i>) i fafo ma le fale (ave faatafao i fafo ma le fale)?</p> <p>[E] Played with (<i>name</i>)?  Ta'aalo ma (<i>name</i>)?</p> <p>[F] Named, counted, or drew things for or with (<i>name</i>)?  Faigoa ata, faitau le aofa'i/fuainumera, tusi ata pe tusi mata'itusi ma (<i>name</i>)?</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; padding-bottom: 5px;"></th> <th style="text-align: center; padding-bottom: 5px;">MOTH ER</th> <th style="text-align: center; padding-bottom: 5px;">FATH ER</th> <th style="text-align: center; padding-bottom: 5px;">OTH ER</th> <th style="text-align: center; padding-bottom: 5px;">NO ON E</th> </tr> </thead> <tbody> <tr> <td style="padding-top: 5px;">READ BOOKS</td> <td style="text-align: center; padding-top: 5px;">A</td> <td style="text-align: center; padding-top: 5px;">B</td> <td style="text-align: center; padding-top: 5px;">X</td> <td style="text-align: center; padding-top: 5px;">Y</td> </tr> <tr> <td style="padding-top: 5px;">TOLD STORIES</td> <td style="text-align: center; padding-top: 5px;">A</td> <td style="text-align: center; padding-top: 5px;">B</td> <td style="text-align: center; padding-top: 5px;">X</td> <td style="text-align: center; padding-top: 5px;">Y</td> </tr> <tr> <td style="padding-top: 5px;">SANG SONGS</td> <td style="text-align: center; padding-top: 5px;">A</td> <td style="text-align: center; padding-top: 5px;">B</td> <td style="text-align: center; padding-top: 5px;">X</td> <td style="text-align: center; padding-top: 5px;">Y</td> </tr> <tr> <td style="padding-top: 5px;">TOOK OUTSIDE</td> <td style="text-align: center; padding-top: 5px;">A</td> <td style="text-align: center; padding-top: 5px;">B</td> <td style="text-align: center; padding-top: 5px;">X</td> <td style="text-align: center; padding-top: 5px;">Y</td> </tr> <tr> <td style="padding-top: 5px;">PLAYED WITH</td> <td style="text-align: center; padding-top: 5px;">A</td> <td style="text-align: center; padding-top: 5px;">B</td> <td style="text-align: center; padding-top: 5px;">X</td> <td style="text-align: center; padding-top: 5px;">Y</td> </tr> <tr> <td style="padding-top: 5px;">NAMED</td> <td style="text-align: center; padding-top: 5px;">A</td> <td style="text-align: center; padding-top: 5px;">B</td> <td style="text-align: center; padding-top: 5px;">X</td> <td style="text-align: center; padding-top: 5px;">Y</td> </tr> </tbody> </table>		MOTH ER	FATH ER	OTH ER	NO ON E	READ BOOKS	A	B	X	Y	TOLD STORIES	A	B	X	Y	SANG SONGS	A	B	X	Y	TOOK OUTSIDE	A	B	X	Y	PLAYED WITH	A	B	X	Y	NAMED	A	B	X	Y	
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<b>EC5G. Check UB2: Child's age?</b>	AGE 2 ..... 1 AGE 3 OR 4 ..... 2	1 ⇔ End																																			
<p><b>EC6.</b> I would like to ask you some questions about the health and development of (<i>name</i>). Children do not all develop and learn at the same rate. For example, some walk earlier than others. These questions are related to several aspects of (<i>name</i>)'s development.</p> <p>Ou te fia fesili atu i le tulaga o loo iai le soifua maloloina ma le ola tuputupu a'e o (<i>name</i>). E le tutusa uma tamaiti i le ola a'oa'oina ma le tuputupu a'e. Faataitaiga, e iai le tamaititi e mafai ona vave savali nai lo isi tamaiti. O fesili nei e fesooota'i i nisi vaega mo le ola tuputupu a'e o (<i>name</i>).</p> <p>Can (<i>name</i>) identify or name at least ten letters of the alphabet?  E mafai e (<i>name</i>) ona faailoa pe faitau ni mata'itusi se 10 o le Pi faitau?</p>	YES ..... 1 NO ..... 2 DK ..... 8																																				

<b>EC7.</b> Can ( <i>name</i> ) read at least four simple, popular words? <i>E mafai e (name) ona faitau ni upu faigofie se 4?</i>	YES.....1 NO .....2 DK .....8	
<b>EC8.</b> Does ( <i>name</i> ) know the name and recognize the symbol of all numbers from 1 to 10? <i>E iloa e (name) faailoga\foliga ma maitau numera mai le 1-10?</i>	YES.....1 NO .....2 DK .....8	
<b>EC9.</b> Can ( <i>name</i> ) pick up a small object with two fingers, like a stick or a rock from the ground? <i>E mafai e (name) ona piki i luga ni mea faitino laiti i ona tamatama'i lima e lua, pei o fasilaau poo se maa mai le foloa?</i>	YES.....1 NO .....2 DK .....8	
<b>EC10.</b> Is ( <i>name</i> ) sometimes too sick to play? <i>E iai se taimi e le fia ta'alo ai (name)?</i>	YES.....1 NO .....2 DK .....8	
<b>EC11.</b> Does ( <i>name</i> ) follow simple directions on how to do something correctly? <i>E faigofie ona mulimulita'i (name) ini faatonuga faigofie ma sa'o lona faatinoga?</i>	YES.....1 NO .....2 DK .....8	
<b>EC12.</b> When given something to do, is ( <i>name</i> ) able to do it independently? <i>E mafai e (name) ona faatino ni faatonuga na o ia?</i>	YES.....1 NO .....2 DK .....8	
<b>EC13.</b> Does ( <i>name</i> ) get along well with other children? <i>E faigofie ia (name) ona faa masani atu i nisi tamaiti?</i>	YES.....1 NO .....2 DK .....8	
<b>EC14.</b> Does ( <i>name</i> ) kick, bite, or hit other children or adults? <i>Faamata e kiki, u pe fasi e (name) isi tamaiti poo tagata matutua?</i>	YES.....1 NO .....2 DK .....8	
<b>EC15.</b> Does ( <i>name</i> ) get distracted easily? <i>E iai se taimi e faigofie ai ona le alu le mafaufau o (name) mai le faatinoina o se faatonuga?</i>	YES.....1 NO .....2 DK .....8	

CHILD DISCIPLINE			UCD
UCD1. Check UB2: Child's age?	AGE 0 ..... AGE 1, 2, 3 OR 4 .....	1 2	1 ⇔ End
<b>UCD2.</b> Adults use certain ways to teach children the right behavior or to address a behavior problem. I will read various methods that are used. Please tell me if <u>you or any other adult in your household</u> has used this method with <b>(name)</b> <u>in the past month</u> .  E eseese auala e a'oa'oina ai e matua/tagata matutua a latou fanau i amioga e tatau ona fai, ma auala e faatalatalanoa ai le faafitauli pe a alia'e mai. O lea o le a ou tolauauina atu metotia eseese e masani ona faaaoga ae faailoa mai pe na e faaaogaina poo se isi tagata o le tou aiga metotia nei mo <b>(name)</b> i le <u>masina talu ai</u> ?			
[A] Took away privileges, forbade something <b>(name)</b> liked or did not allow (him/her) to leave the house.  Faasāina pe taofia mai mea o loo (ia) fiafia ai pe faasā ona alu ese ma le fale.	TOOK AWAY PRIVILEGES.....	1 2	YES NO
[B] Explained why <b>(name)</b> 's behavior was wrong.  Faamatala le sese o le amioga na fai e <b>(name)</b> .	EXPLAINED WRONG BEHAVIOR.....	1 2	
[C] Shook (him/her).  U'u ma lūlū o ia.	SHOOK HIM/HER .....	1 2	
[D] Shouted, yelled at or screamed at (him/her).  E'ē ma otegia o ia	SHOUTED, YELLED, SCREAMED .....	1 2	
[E] Gave (him/her) something else to do.  Tuu iai se isi mea/galuega e fai	GAVE SOMETHING ELSE TO DO .....	1 2	
[F] Spanked hit or slapped (him/her) on the bottom with bare hand.  Po pe sasa lona noo\nofoaga.	SPANKED, HIT, SLAPPED ON BOTTOM WITH BARE HAND .....	1 2	
[G] Hit (him/her) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.  Sasaina ia te (ia) i se fusipa'u, selu, salu, laau poo se isi mea malō.	HIT WITH BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT .....	1 2	
[H] Called (him/her) dumb, lazy or another name like that.  Faaitoga ia te (ia) i isi igoa/upu e pei o le valea, paīē poo le augata	CALLED DUMB, LAZY OR ANOTHER NAME .....	1 2	
[I] Hit or slapped (him/her) on the face, head or ears.	HIT / SLAPPED ON THE FACE, HEAD OR EARS .....	1 2	

Po pe tu'i (ona) foliga, ulu poo taliga		
[J] Hit or slapped (him/her) on the hand, arm, or leg. Po, tu'i pe kiki (ona) lima, tauau poo vae.	HIT / SLAPPED ON HAND, ARM OR LEG ..... 1      2	
[K] Beat (him/her) up, that is hit (him/her) over and over as hard as one could. Fasi pe fue ia te (ia) i le mea e gata ai	BEAT UP, HIT OVER AND OVER AS HARD AS ONE COULD..... 1      2	
<b>UCD3.</b> Check UF4: Is this respondent the mother or caretaker of any other children under age 5 or a child age 5-14 selected for the questionnaire for children age 5-17?	YES..... 1 NO ..... 2	2 $\Rightarrow$ UCD5
<b>UCD4.</b> Check UF4: Has this respondent already responded to the following question (UCD5 or FCD5) for another child?	YES..... 1 NO..... 2	1 $\Rightarrow$ End
<b>UCD5.</b> Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished? I lou talitonuga mo le a'oa'oina o le ola tuputupua'e o le tamaititi, e tatau ona sasa?	YES..... 1 NO..... 2 DK / NO OPINION ..... 8	

CHILD FUNCTIONING		UCF
<b>UCF1.</b> Check UCF2: Child's age?	AGE 0 OR 1.....1 AGE 2, 3 OR 4.....2	1⇒End
<b>UCF2.</b> I would like to ask you some questions about difficulties ( <b>name</b> ) may have. <i>Oute fia fesili atu ia te oe i se faafaigata o feagai ma (<b>name</b>) i le faatinoga o nisi o tulaga nei:</i> Does ( <b>name</b> ) wear glasses? <i>E fai se vaaiga a (<b>name</b>)?</i>	YES .....1 NO.....2	
<b>UCF3.</b> Does ( <b>name</b> ) use a hearing aid? <i>E faaaoga e (<b>name</b>) se mea faalogo?</i>	YES .....1 NO.....2	
<b>UCF4.</b> Does ( <b>name</b> ) use any equipment or receive assistance for walking? <i>E faaaoga e (<b>name</b>) se tootoo/walker pe fesoasoani foi se isi ia te ia pe a savali?</i>	YES .....1 NO.....2	
<b>UCF5.</b> In the following questions, I will ask you to answer by selecting one of four possible answers. For each question, would you say that ( <b>name</b> ) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all. <i>I fesili o le a ta faasolo atu i ai, e manaomia ai lou tali mai i se tasi o tali nei e fa. Mo fesili taitasi, e mafai ona e faapea mai o (<b>name</b>) e: 1) E leai se faigata, 2) E i ai nai faigata laiti, 3) Faigata tele, 4) Matuā le mafai ona faatino.</i>	<i>Repeat the categories during the individual questions whenever the respondent does not use an answer category:</i> Remember the four possible answers: Would you say that ( <b>name</b> ) has: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that (he/she) cannot at all? <i>Manatua, o tali nei e fa e tatau ona e tali mai ai: 1) Leai se faigata, 2) E i ai nai faigata laiti, 3) Faigata tele, 4) Matuā le mafai ona faatino.</i>	
<b>UCF6.</b> Check UCF2: Child wears glasses?	YES, UCF2=1 .....1 NO, UCF2=2.....2	1⇒UCF7A 2⇒UCF7B
<b>UCF7A.</b> When wearing (his/her) glasses, does ( <b>name</b> ) have difficulty seeing? <i>Pe a fai le vaaiga a (<b>name</b>), e iai se faafaigata i lana vaai?</i>	NO DIFFICULTY .....1 SOME DIFFICULTY .....2 A LOT OF DIFFICULTY .....3 CANNOT SEE AT ALL.....4	
<b>UCF7B.</b> Does ( <b>name</b> ) have difficulty seeing? <i>E iai se faafaigata i le vaaia a (<b>name</b>)?</i>		
<b>UCF8.</b> Check UCF3: Child uses a hearing aid?	YES, UCF3=1 .....1 NO, UCF3=2.....2	1⇒UCF9A 2⇒UCF9B
<b>UCF9A.</b> When using (his/her) hearing aid(s), does ( <b>name</b> ) have difficulty hearing sounds like peoples' voices or music? <i>Pe a faaaoga lana mea faalogo, e iai se faafaigata i le faalogo a (<b>name</b>), pei o le lagonaina o leo o tagata ma musika?</i>	NO DIFFICULTY .....1 SOME DIFFICULTY .....2 A LOT OF DIFFICULTY .....3 CANNOT HEAR AT ALL.....4	
<b>UCF9B.</b> Does ( <b>name</b> ) have difficulty hearing sounds like peoples' voices or music? <i>E i ai se faafaigata i le faalogo a (<b>name</b>), pei o le lagonaina o leo o tagata poo musika?</i>		

<b>UCF10.</b> Check UCF4: Child uses equipment or receives assistance for walking?	YES, UCF4=1 ..... NO, UCF4=2.....	1⇒UCF11 2⇒UCF13
<b>UCF11.</b> Without (his/her) equipment or assistance, does ( <i>name</i> ) have difficulty walking?  E iai se faafaigata ia ( <i>name</i> ) ona savali e aunoa ma le faaaogaina o lana walker poo se isi e fesoasoani ia te ia?	SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT WALK AT ALL.....	2 3 4
<b>UCF12.</b> With (his/her) equipment or assistance, does ( <i>name</i> ) have difficulty walking?  E iai se faafaigata ia ( <i>name</i> ) ona savali tusa lava pe a faaaoga lana walker pe fesoasoani ai foi se isi?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT WALK AT ALL.....	1 2 3 4⇒UCF14
<b>UCF13.</b> Compared with children of the same age, does ( <i>name</i> ) have difficulty walking?  Pe a faatusatua ( <i>name</i> ) i tamaiti o le vaitausaga lava lea, e i ai se faafaigata o lana savali?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT WALK AT ALL.....	1 2 3 4
<b>UCF14.</b> Compared with children of the same age, does ( <i>name</i> ) have difficulty picking up small objects with (his/her) hand?  Pe a faatusatua ( <i>name</i> ) i tamaiti o le vaitausaga lava lea, e iai se faafaigata i le taumafai lea e piki i luga ni meafaitino laiti i lona lima?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT PICK UP AT ALL .....	1 2 3 4
<b>UCF15.</b> Does ( <i>name</i> ) have difficulty understanding you?  E faafaigata ia ( <i>name</i> ) ona malamalama ia te oe?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT UNDERSTAND AT ALL.....	1 2 3 4
<b>UCF16.</b> When ( <i>name</i> ) speaks, do you have difficulty understanding (him/her)?  A tautala ( <i>name</i> ), e faafaigata ia te oe ona e malamalama ai?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT BE UNDERSTOOD AT ALL .....	1 2 3 4
<b>UCF17.</b> Compared with children of the same age , does ( <i>name</i> ) have difficulty learning things?  Pe a faatusatua ( <i>name</i> ) i tamaiti o le vaitausaga lava lea, e faafaigata ia te ia ona iloa/aoaoina ni upu?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT LEARN THINGS AT ALL.....	1 2 3 4
<b>UCF18.</b> Compared with children of the same age, does ( <i>name</i> ) have difficulty playing?  Pe a faatusatua ( <i>name</i> ) i tamaiti o le vaitausaga lava lea, e faafaigata ia te ia ona ta’alo?	NO DIFFICULTY ..... SOME DIFFICULTY ..... A LOT OF DIFFICULTY ..... CANNOT PLAY AT ALL .....	1 2 3 4

<p><b>UCF19.</b> The next question has five different options for answers. I am going to read these to you after the question.</p> <p>I fesili o le a ta faasolo atu i ai, e lima ituaiga tali e tatāu ona e tali mai ai. O le a tolaulauina atu tali nei pe a maea ona lauina atu le fesili.</p> <p>Compared with children of the same age, how much does (<i>name</i>) kick, bite or hit other children or adults?</p> <p>Pe a faatususa (<i>name</i>) i tamaiti o le vaitausaga lava, e iai ni ona uiga e pei o le taufeū, kiki o isi tamaiti poo le fasiina o isi tamaiti/tagata?</p> <p>Would you say: not at all, less, the same, more or a lot more?</p> <p>Faamata, e leai ni ona uiga faapea, e itiiti ifo, e tutusa, sili atu pe matua sili atu?</p>	<p>NOT AT ALL ..... 1      LESS ..... 2      THE SAME ..... 3      MORE ..... 4      A LOT MORE ..... 5</p>	
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BREASTFEEDING AND DIETARY INTAKE		BD
<b>BD1.</b> Check UB2: Child's age?	AGE 0, 1, OR 2 ..... 1 AGE 3 OR 4 ..... 2	2 $\Rightarrow$ End
<b>BD2.</b> Has ( <i>name</i> ) ever been breastfed? Sa faasusuina ( <i>name</i> ) ia te oe?	YES ..... 1 NO ..... 2 DK ..... 8	2 $\Rightarrow$ BD3A 8 $\Rightarrow$ BD3A
<b>BD3.</b> Is ( <i>name</i> ) still being breastfed? O faasusuina pea ( <i>name</i> ) ia te oe?	YES ..... 1 NO ..... 2 DK ..... 8	
<b>BD3A.</b> Check UB2: Child's age?	AGE 0 OR 1 ..... 1 AGE 2 ..... 2	2 $\Rightarrow$ End
<b>BD4A.</b> Yesterday, during the day or night, did ( <i>name</i> ) drink anything from a bottle or cup with a nipple, spout, or reusable straw? Sa faaaoga e ( <i>name</i> ) se fagu poo se ipu e iai se gutu poo se straw foi e inu ai ananafi i le ao poo le po?	YES ..... 1 NO ..... 2 DK ..... 8	
<b>BD4B.</b> Specifically, did ( <i>name</i> ) drink anything from a bottle with a nipple? Sa faaaoga e ( <i>name</i> ) se fagu e iai se matāsusu (fagususu) e inu ai ananafi i le ao poo le po?	YES ..... 1 NO ..... 2 DK ..... 8	
<b>BD5.</b> Did ( <i>name</i> ) drink Oral Rehydration Salt solution (ORS) yesterday, during the day or night? Sa faainu ( <i>name</i> ) ise vai pauta (ORS) ananafi i le ao poo le po?	YES ..... 1 NO ..... 2 DK ..... 8	
<b>BD6.</b> Did ( <i>name</i> ) drink or eat vitamin or mineral supplements or any medicines yesterday, during the day or night? Sa faainu ( <i>name</i> ) ise vai e aofia ai ma vai mai le falemai pe fafaga foi i ni meaai e maua ai le vaitamini ma le minerale ananafi i le ao poo le po?	YES ..... 1 NO ..... 2 DK ..... 8	

<p><b>BD7.</b> Now I would like to ask you about all other liquids that (<i>name</i>) may have had yesterday during the day or the night.</p> <p>Ou te fia fesili atu i isi ituaiga vaiinu na ave ia (<i>name</i>) ananafi i le taimi o le aso ma anapo.</p> <p>Please include liquids consumed outside of your home.</p> <p>Faamolemole faailoa uma mai vaiinu sa faainu ai (<i>name</i>) i fafo atu ma le fale.</p> <p>Did (<i>name</i>) drink (<i>name of item</i>) yesterday during the day or the night:</p> <p>Sa faainu (<i>name</i>) i se (<i>name of item</i>) ananafi i le taimi o le ao poo le po:</p>		
	YES      NO      DK	
<p>[A] Plain water? Vaiauli/Vaipuna?</p>	PLAIN WATER      1      2      8	
<p>[B] Juice or juice drinks? Vai suamalie mai fualau aina?</p>	JUICE OR JUICE DRINKS      1      2      8	
<p>[C] Clear broth (suavai supo)/clear soup? Suavai supo?</p>	CLEAR BROTH      1      2      8	
<p>[D] Infant formula, such as Golden, S26 or Enfamil? Susu fua e pei o le Apa Susu pauta o le Golden, S26 poo le Enfamil?</p>	INFANT FORMULA      1      2 ☲      8 ☲ <i>BD7[E] BD7[E]</i>	
<p>[D1] How many times did (<i>name</i>) drink infant formula? E faafia ona faainu/faasusu (<i>name</i>) i le apa susu? <i>If 7 or more times, record '7'.</i></p>	NUMBER OF TIMES DRANK INFANT FORMULA ..... DK ..... 8	
<p>[E] Milk from animals, such as fresh, tinned, or powdered milk? Susu mai manu (<i>povi</i>), e pei o susu felesi, apa susu poo isi susu pauta?</p>	MILK      1      2 ☲      8 ☲ <i>BD7[X] BD7[X]</i>	
<p>[E1] How many times did (<i>name</i>) drink milk? E faafia ona faainu (<i>name</i>) i susu mai manu (<i>povi</i>), apa susu poo isi susu pauta? <i>If 7 or more times, record '7'. If unknown, record '8'.</i></p>	NUMBER OF TIMES DRANK MILK ..... —	
<p>[X] Any other liquids? E iai nisi vaiinu?</p>	OTHER LIQUIDS      1      2 ☲      8 ☲ <i>BD8 BD8</i>	
<p>[X1] Record all other liquids mentioned. Faamau uma vaiinu o loo taua.</p>	(Specify) _____	

**BD8.** Now I would like to ask you about everything that (*name*) ate yesterday during the day or the night. Please include foods consumed outside of your home  
 Ou te fia fesili atu i isi ituaiga meaai na ai ai e (*name*) ananafi i le taimi o le ao ma le po. Faamolemole faailoa uma mai meaai e aofia ai ma meaai na ai i isi nofoaga e ese mai ma le aiga.

- Think about when (*name*) woke up yesterday. Did (he/she) eat anything at that time?
- Mafaufau i le taimi na ala mai ai (*name*) ananafi. Sa ai sana meaai i lea taimi?

If 'Yes' ask: Please tell me everything (*name*) ate at that time. Probe: Anything else? Faailoa uma mai poo a uma meaai sa ai/fafaga ai (*name*) i lea taimi.

Record answers using the food groups below

What did (*name*) do after that? Did (he/she) eat anything at that time?

O le a le mea a (*name*) na fai ina ua uma ona fafaga? Sa toe fafaga i se isi meaai?

Repeat this string of questions, recording in the food groups, until the respondent tells you that the child went to sleep until the next morning.

For each food group not mentioned after completing the above ask:

Just to make sure, did (*name*) eat (*food group items*) yesterday during the day or the night

Na ona toe fia faamautu lava pe sa ai (*name*) i (*food group items*) ananafi i le taimi o le ao poo le po

YES      NO      DK

[A] Yogurt made from animal milk?

Yogurt gaosia mai susu o manu?

YOGURT

1      2 ♂      8 ♀  
*BD8[B]*      *BD8[B]*

Note that liquid/drinking yogurt should be captured in BD7 [E] or BD7[X], depending on milk content.

[A1] How many times did (*name*) eat yogurt?

E faafia ona fafaga (*name*) i le yogurt?

If 7 or more times, record '7'.

NUMBER OF TIMES ATE

YOGURT .....—

DK .....—8

[B] Any baby food, such as Cerelac, Gerber, Hero or Nestum?

Ae a ni meaai faapitoa mo pepe pei o le fagu ai, sirio ma isi.

FORTIFIED BABY FOOD

1      2      8

[C] Bread, rice, noodles, porridge, or other foods made from grains?

Falaoa, araisa, saimini, polesi poo nisi meaai e gaosi mai le saito?

FOODS MADE FROM GRAINS

1      2      8

[D] Pumpkin, carrots, squash, or sweet potatoes that are yellow or orange inside?

Maukeni, karoti, umala (samasama pe lanumoli totonu)?

PUMPKIN, CARROTS, SQUASH, ETC.

1      2      8

[E] White potatoes, white yams, cassava, or any other foods made from roots?

Pateta paepae, taamu, manioka, talo, ufi poo nisi meaai e maua mai i a'a o laau?

FOODS MADE FROM ROOTS

1      2      8

[F] Any dark green, leafy vegetables, such as laupele, kapisi saina, pumpkin baby leaves, lau polo, kang kong? <i>Nisi lau laau faisua pei o le laupele, kapisi saina, tumutumu maukeni, laupolo, kang kong.</i>	DARK GREEN, LEAFY VEGETABLES 1      2      8
[G] Ripe mangoes, ripe papayas, guava, or passion fruit? <i>Mago pula poo esi pula, fa'i pula, guava ma isi?</i>	RIPE MANGO, RIPE PAPAYA 1      2      8
[H] Any other fruits or vegetables, such as vi, sasalapa, apiu, cucumber, tomatos, soko, egg plant and long and short beans? <i>Isi fualau aina poo ni fualau faisua e pei o le vi, sasalapa, apiu, kukama, tamato, soko, israelu, pi uumi ma pi pupu'u ?</i>	OTHER FRUITS OR VEGETABLES 1      2      8
[I] Liver, kidney, heart or other organ meats? <i>Totoga o manu pei o fatu moa, ma isi</i>	ORGAN MEATS 1      2      8
[J] Any other meat, such as beef, pork, lamb, goat, chicken, duck or sausages made from these meats? <i>Aano o manu fasi e pei o povi, puua, mamoe, oti, moa, pato poo sosisi?</i>	OTHER MEATS 1      2      8
[K] Eggs? <i>Fuamoa</i>	EGGS 1      2      8
[L] Fish or shellfish, either fresh or dried? <i>I'a poo ni faisua fou pe faamago?</i>	FRESH OR DRIED FISH 1      2      8
[M] Beans, peas, lentils or nuts, including any foods made from these? <i>Meaai e maua mai fatu laau, pi, lopa, pinati ma isi?</i>	FOODS MADE FROM BEANS, PEAS, NUTS, ETC. 1      2      8
[N] Cheese or other food made from animal milk? <i>Sisi poo nisi meaai e gaosi mai le susu?</i>	CHEESE OR OTHER FOOD MADE FROM MILK 1      2      8
[X] Other solid, semi-solid, or soft food? <i>Nisi lava meaai malo pe palu?</i>	OTHER SOLID, SEMI-SOLID, OR SOFT FOOD 1      2 $\Delta$ 8 $\Delta$ BD9      BD9
[X1] Record all other solid, semi-solid, or soft food that do not fit food groups above.	(Specify) _____
<b>BD9.</b> How many times did ( <i>name</i> ) eat any solid, semi-solid or soft foods yesterday during the day or night? <i>E faafia onafafaga (<i>name</i>) i meaai malo, po ni meaai palu i le aso ananafi i le taeao ma le po?</i>  <i>If BD8 [A] is 'Yes', ensure that the response here includes the number of times recorded for yogurt in BD8 [A1].</i>  <i>If 7 or more times, record '7'.</i>	NUMBER OF TIMES..... DK ..... 8

IMMUNISATION								IM			
<b>IM1.</b> Check UB2: Child's age?	AGE 0, 1 OR 2.....1 AGE 3 OR 4.....2						2 ⇔ End				
<b>IM2.</b> Do you have a Child Health Book, immunisation records from any health provider or any other document where ( <i>name</i> )'s vaccinations are written down?  O ia te oe se pepa mo tuiga o ( <i>name</i> ) o loo faamauina ai ona tui puipui?	YES, HAS ONLY CARD(S).....1 YES, HAS ONLY OTHER DOCUMENT.....2 YES, HAS CARD(S) AND OTHER DOCUMENT.....3 NO, HAS NO CARDS AND NO OTHER DOCUMENT.....4						1 ⇔ IM5 3 ⇔ IM5				
<b>IM3.</b> Did you ever have a Child Health Book or immunisation records from a any health provider for ( <i>name</i> )?  Sa iai muamua se Pepa Tui a ( <i>name</i> ) poo ni faamaumauga o tuiga mai se auauanga faasoifua maloloiga tumaoti?	YES.....1 NO .....2										
<b>IM4.</b> Check IM2:	HAS ONLY OTHER DOCUMENT, IM2=2 .....1 HAS NO CARDS AND NO OTHER DOCUMENT AVAILABLE, IM2=4.....2						2 ⇔ IM11				
<b>IM5.</b> May I see the card(s) (and/or) other document?  E mafai ona ou vaai i le Pepa Tui (ma/poo) isi faamaumauga?	YES, ONLY CARD(S) SEEN.....1 YES, ONLY OTHER DOCUMENT SEEN.....2 YES, CARD(S) AND OTHER DOCUMENT SEEN .....3 NO CARDS AND NO OTHER DOCUMENT SEEN.....4						4 ⇔ IM11				
<b>IM6.</b> (a) Copy dates for each vaccination from the documents. (b) Write '44' in day column if documents show that vaccination was given but no date recorded.	<b>DATE OF IMMUNISATION</b> <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>DAY</th> <th>MONTH</th> <th>YEAR</th> </tr> </thead> </table>							DAY	MONTH	YEAR	
DAY	MONTH	YEAR									
BCG (at birth)	BCG			2	0	1					
HepB (at birth)	HepB0			2	0	1					
Pentavalent 1(DTPh HepB Hib1) (6weeks)	Penta1			2	0	1					
Polio (OPV) 1 (6weeks)	OPV1			2	0	1					
Pentavalent 2 (DPTHepB Hib2) (10 weeks)	Penta2			2	0	1					
Polio (OPV) 2 (10 weeks)	OPV2			2	0	1					
Pentavalent 3 (DPTHepB Hib3) (14 weeks)	Penta3			2	0	1					
Polio (OPV) 3 (14 weeks)	OPV3			2	0	1					
Polio (IPV) (14 weeks)	IPV			2	0	1					
MMR 1 (12 months)	MMR 1			2	0	1					

MMR 2 (15 months)	MMR 2					2	0	1		
<b>IM7.</b> Check IM6: Are all vaccines (BCG to MMR2) recorded?		YES.....	1	NO .....	2				1⇒End	
<b>IM8.</b> Did ( <i>name</i> ) participate in the Measles Mass Campaign in October 2017?  Sa auai ( <i>name</i> ) i le polokalame faalauiloa mo tuiga o le Misela lea sa faatinoina ia Oketopa 2017?		YES.....	1	NO .....	2				1⇒IM9A 2⇒IM9B	
		DK .....	8						8⇒IM9B	
<b>IM9A.</b> In addition to what is recorded on the document(s) you have shown me, did ( <i>name</i> ) receive any other vaccinations including vaccinations received during the Measles Mass Campaign in October 2017 just mentioned?  Ese mai tuiga o loo faamauina i totonu o le pepa tui, e iai nisi tuiga sa faatinoina mo ( <i>name</i> ) e aofia ai ma tui sa fai i le taimi o le polokalame o lo'o taua i luga?		YES.....	1	NO .....	2				2⇒End	
<b>IM9B.</b> In addition to what is recorded on the document(s) you have shown me, did ( <i>name</i> ) receive any other vaccinations?  Ese mai tuiga o loo faamauina i totonu o le pepa tui, e iai nisi tuiga sa faatinoina mo ( <i>name</i> )?		DK .....	8						8⇒End	
<b>IM10.</b> Go back to IM6 and probe for these vaccinations.  Record '66' in the corresponding day column for each vaccine received. For each vaccination <u>not</u> received record '00' in day column.  When <u>finished</u> , go to End of module.									⇒End	
<b>IM11.</b> Has ( <i>name</i> ) ever received any vaccinations to prevent (him/her) from getting diseases, including vaccinations received in the Measles Mass Campaign in October 2017?  Sa faia ni tui puipui o ( <i>name</i> ) e puipua mai ai i faamai e aofia ai ma ni tui puipui sa faia i taimi o polokalame faalauiloa faa-le-soifua maloloina?		YES.....	1	NO .....	2					
		DK .....	8							
<b>IM12.</b> . Did ( <i>name</i> ) participate in the Measles Mass Campaign in October 2017?  Sa auai ( <i>name</i> ) i le polokalame faalauiloa mo tuiga o le Misela lea sa faatinoina ia Oketopa 2017?		YES.....	1	NO .....	2					
		DK.....	8							
<b>IM13.</b> Check IM11 and IM12:		ALL NO OR DK .....	1	AT LEAST ONE YES.....	2				1⇒End	
<b>IM14.</b> Has ( <i>name</i> ) ever received a BCG vaccination against tuberculosis – that is, an injection in the arm or shoulder that usually causes a scar?		YES.....	1	NO .....	2					
		DK .....	8							

Sa fai se tui puipui o le BCG a ( <i>name</i> ) mo le fatafata vaivai - o le tui lea e masani ona ta'ua o le tui faagata lea e i ai le maila i le tauau.		
<b>IM15.</b> Did ( <i>name</i> ) receive a Hepatitis B vaccination – that is an injection on the outside of the thigh to prevent Hepatitis B disease – within the first 24 hours after birth?  Sa fai se tui puipui o le ma'i ate o ( <i>name</i> ), lea e fai i le ogave poo le ogalima i totonu o le 24 itula talu ona uma na fanau?	YES, WITHIN 24 HOURS .....1 YES, BUT NOT WITHIN 24 HOURS .....2 NO .....3 DK .....8	
<b>IM16.</b> Has ( <i>name</i> ) ever received any vaccination drops in the mouth to protect (him/her) from polio?  Sa iai se taimi na faatulutulu ai se vai polio i le gutu o ( <i>name</i> ) e puipui mai ai o ia mai le faama'i pipili? <i>Probe by indicating that the first drop is usually given later at the same time as injections to prevent other diseases.</i>	YES.....1 NO .....2 DK .....8	2⇒IM20 8⇒IM20
<b>IM17.</b> Were the first polio drops received in the first six weeks after birth?  O le vai polio lea, sa faatulutulu i le ono vайaso muamua talu ona fanau mai?	YES.....1 NO .....2 DK .....8	
<b>IM18.</b> How many times were the polio drops received?  Na faafia ona faainu le vai polio?	NUMBER OF TIMES ..... DK .....8	
<b>IM20.</b> Has ( <i>name</i> ) ever received a Pentavalent vaccination – that is, an injection in the thigh to prevent (him/her) from getting tetanus, whooping cough, diphtheria, Hepatitis B disease, and Haemophilus influenzae type b?  Sa fai se tui puipui o ( <i>name</i> ) i le ogavae e puipui mai faama'i nei, 'ona, tale vivini, lipi, ma'i ate, Haemophilus influenza type b (HIB) – tua'ula, nimonia, fiva faiai ma tiga soona o ponaivi?  <i>Probe by indicating that Pentavalent vaccination is given at the same time as the polio drops.</i>	YES.....1 NO .....2 DK .....8	2⇒IM26 8⇒IM26
<b>IM21.</b> How many times was the Pentavalent vaccine received?  Na faafia ona fai le tuiga lea o le Pentavalent?	NUMBER OF TIMES ..... DK .....8	
<b>IM26.</b> Has ( <i>name</i> ) ever received a MMR vaccine – that is, a shot in the arm at the age of 12 months or older - to prevent (him/her) from getting measles, mumps and rubella?  Sa fai ni tui ma e puipui mai le mami, misela ma le rupela pe'a atoa le 12 masina po'o le 15 masina o le pepe.	YES.....1 NO .....2 DK .....8	2⇒End 8⇒End
<b>IM26A.</b> How many times was the MMR vaccine received?  Na faafia ona faia tui o le MMR?	NUMBER OF TIMES ..... DK .....8	

CARE OF ILLNESS			CA
<b>CA1.</b> In the last two weeks, has ( <i>name</i> ) had diarrhoea? <i>Sa aafia (<i>name</i>) i le manava tatā i le lua vaiaso talu ai?</i>	YES.....1 NO .....2 DK .....8	2⇒CA14 8⇒CA14	
<b>CA2.</b> Check BD3: Is child still breastfeeding? <i>Ou te fia fesili atu pe o le a le tele o le vaiinu na faainu ai (<i>name</i>) i le taimi na maua ai i le manava tatā e aofia ai le suasusu, vaipauta (ORS) ma nisi vai mo le manava tatā.</i>	YES OR BLANK, BD3=1 OR BLANK .....1 NO OR DK, BD3=2 OR 8.....2	1⇒CA3A 2⇒CA3B	
<b>CA3A.</b> I would like to know how much ( <i>name</i> ) was given to drink during the diarrhoea. This includes breastmilk, Oral Rehydration Salt solution (ORS) and other liquids given with medicine. <i>Ina ua manava tatā (<i>name</i>) o le a le tele o le vaiinu/suasusu sa faainu ai: sa faaititia tele, faaititia feololo, tele masani, faateleina pe e le'i toe avea ai se vaiinu/suasusu?</i>  <i>If 'less', probe:</i> Was (he/she) given much less than usual to drink, or somewhat less? <i>A faaititia: fesilisili pe na faaititia tele pe na faaititia feololo?</i>	MUCH LESS.....1 SOMEWHAT LESS.....2 ABOUT THE SAME .....3 MORE.....4 NOTHING TO DRINK.....5  DK .....8		
<b>CA3B.</b> I would like to know how much ( <i>name</i> ) was given to drink during the diarrhoea. This includes Oral Rehydration Salt solution (ORS) and other liquids given with medicine. <i>Ou te fia fesili atu pe o le a le tele o le vaiinu e aofia ai le vaipauta (ORS) ma nisi vai mo le manava tatā na faainu ai (<i>name</i>) ile taimi na aafia ai.</i>  During the time ( <i>name</i> ) had diarrhoea, was (he/she) given less than usual to drink, about the same amount, or more than usual? <i>Ina ua manava tatā (<i>name</i>) o le a le tele o le vaiinu sa faainu ai: sa faaititia tele, faaititia feololo, tele masani, faateleina pe e le'i toe avea ai se vaiinu?</i> <i>If 'less', probe:</i> Was (he/she) given much less than usual to drink, or somewhat less? <i>A faaititia: fesilisili pe na faaititia tele pe na faaititia feololo?</i>			

<p><b>CA4.</b> During the time (<i>name</i>) had diarrhoea, was (he/she) given less than usual to eat, about the same amount, more than usual, or nothing to eat?</p> <p>Ina ua manava tatā (<i>name</i>) o le a le tele o le meaai sa fafaga ai: sa faaititia tele, faaititia feololo, tele masani, faateleina pe e le'i toe avea ai se mea e ai?</p> <p>If ‘less’, probe: Was (he/she) given much less than usual to eat or somewhat less?</p> <p>A faaititia: fesilisili pe na faaititia tele pe na faaititia feololo tele o le meaai sa fafaga ai (<i>name</i>)?</p>	<p>MUCH LESS.....1 SOMEWHAT LESS.....2 ABOUT THE SAME .....3 MORE.....4 STOPPED FOOD.....5 NEVER GAVE FOOD.....7  DK ..8</p>	
<p><b>CA5.</b> Did you seek any advice or treatment for the diarrhoea from any source?</p> <p>Sa saili se fautuaga/togafitiga o le manava tatā?</p>	<p>YES.....1 NO .....2  DK ..8</p>	<p>2⇒CA7  8⇒CA7</p>
<p><b>CA6.</b> Where did you seek advice or treatment?</p> <p>O fea sa e saili fautuaga/togafiti iai?</p> <p> Probe: Anywhere else? Toe fesili: E iai se isi nofoaga?</p> <p>Record all providers mentioned, but do <u>not</u> prompt with any suggestions.</p> <p>Probe to identify each type of provider.</p>	<p><b>PUBLIC MEDICAL SECTOR</b> GOVERNMENT HOSPITAL.....A GOVERNMENT HEALTH CENTRE.....B</p> <p><b>PRIVATE MEDICAL SECTOR</b> PRIVATE PHYSICIAN.....J PRIVATE PHARMACY .....K</p> <p><b>OTHER SOURCE</b> RELATIVE / FRIEND .....P SHOP .....Q TRADITIONAL PRACTITIONER .....R</p> <p>OTHER (<i>specify</i>) .....X DK / DON'T REMEMBER .....Z</p>	
<p><b>CA7.</b> During the time (<i>name</i>) had diarrhoea, was (he/she) given:</p> <p>I le taimi na manava tatā ai (<i>name</i>) sa ave iai:</p> <p>[A] A fluid made from a special packet called ORS? Vai e fai mai i le pepa pauta o le ORS?</p> <p>[B] A pre-packaged ORS fluid called for pre-packaged ORS fluid? Vai ua maea ona sui i le pauta o le ORS.</p> <p>[C] Zinc tablets or syrup? Fualaau ma vai mo le manava tatā.</p> <p>[D] The hospital recommended home-made sugar and salt are solution. Vai e faatonu mai le falemai: vaimasima ma le suka e mafai ona fai i le fale.</p> <p>[E] Coconut Juice Sua o le niu</p>	<p>Y N DK</p> <p>FLUID FROM ORS PACKET.....1 2 8</p> <p>PRE-PACKAGED ORS FLUID .....1 2 8</p> <p>ZINC TABLETS OR SYRUP .....1 2 8</p> <p>SALT AND SUGAR SOLUTION.....1 2 8</p> <p>COCONUT JUICE.....1 2 8</p>	
<p><b>CA8.</b> Check CA7 [A] and CA7 [B]: Was child given any ORS?</p>	<p>YES, YES IN CA7[A] OR CA7[B] .....1  NO, ‘NO’ OR ‘DK’ IN BOTH CA7[A] AND CA7[B] .....2</p>	<p>2⇒CA10</p>

<p><b>CA9.</b> Where did you get the (ORS mentioned in CA7 [A] and/or CA7 [B])?</p> <p><i>Fea sa aumai ai le (ORS mentioned in CA7 [A] and/or CA7 [B])?</i></p> <p><i>Probe to identify the type of source.</i></p> <p><i>If 'Already had at home', probe to learn if the source is known.</i></p>	<p><b>PUBLIC MEDICAL SECTOR</b></p> <p>GOVERNMENT HOSPITAL ..... A GOVERNMENT HEALTH CENTRE ..... B</p> <p><b>PRIVATE MEDICAL SECTOR</b></p> <p>PRIVATE PHYSICIAN ..... J PRIVATE PHARMACY ..... K</p> <p><b>OTHER SOURCE</b></p> <p>RELATIVE / FRIEND ..... P SHOP ..... Q TRADITIONAL PRACTITIONER ..... R</p> <p>OTHER (specify) _____ X DK / DON'T REMEMBER ..... Z</p>	
<p><b>CA10.</b> Check CA7[C]: Was child given any zinc?</p>	<p>YES, CA7[C]=1 ..... 1 NO, CA7[C] ≠1 ..... 2</p>	2⇒CA12
<p><b>CA11.</b> Where did you get the zinc?</p> <p><i>O fea sa aumai ai le fualau ma mai lea e faapēpē ai le siama o le manava?</i></p> <p><i>Probe to identify the type of source.</i></p> <p><i>If 'Already had at home', probe to learn if the source is known.</i></p>	<p><b>PUBLIC MEDICAL SECTOR</b></p> <p>GOVERNMENT HOSPITAL ..... A GOVERNMENT HEALTH CENTRE ..... B</p> <p><b>PRIVATE MEDICAL SECTOR</b></p> <p>PRIVATE PHYSICIAN ..... J PRIVATE PHARMACY ..... K</p> <p><b>OTHER SOURCE</b></p> <p>RELATIVE / FRIEND ..... P SHOP ..... Q TRADITIONAL PRACTITIONER ..... R</p> <p>OTHER (specify) _____ X DK / DON'T REMEMBER ..... Z</p>	
<p><b>CA12.</b> Was anything else given to treat the diarrhoea?</p> <p><i>E iai se isi mea na faia e foia ai le manava tata?</i></p>	<p>YES.....1 NO ..... 2 DK ..... 8</p>	2⇒CA14 8⇒CA14

<p><b>CA13.</b> What else was given to treat the diarrhoea?  <b>O le a le isi mea na fai e foia ai le manava tatā?</b></p> <p><i>Probe:</i>  Anything else? <b>E iai se isi mea?</b></p> <p><i>Record all treatments given. Write brand name(s) of all medicines mentioned.</i></p> <hr/> <p>(Name of brand)</p> <hr/> <p>(Name of brand)</p>	<p><b>PILL OR SYRUP</b></p> <table> <tr><td>ANTIBIOTIC .....</td><td>A</td></tr> <tr><td>ANTIMOTILITY (ANTI-DIARRHOEA) .....</td><td>B</td></tr> <tr><td>OTHER PILL OR SYRUP .....</td><td>G</td></tr> <tr><td>UNKNOWN PILL OR SYRUP .....</td><td>H</td></tr> </table> <p><b>INJECTION</b></p> <table> <tr><td>ANTIBIOTIC .....</td><td>L</td></tr> <tr><td>NON-ANTIBIOTIC .....</td><td>M</td></tr> <tr><td>UNKNOWN INJECTION.....</td><td>N</td></tr> </table> <p>INTRAVENOUS (IV).....O</p> <p>HOME REMEDY / HERBAL MEDICINE.....Q</p> <p>OTHER (<i>specify</i>) .....X</p>	ANTIBIOTIC .....	A	ANTIMOTILITY (ANTI-DIARRHOEA) .....	B	OTHER PILL OR SYRUP .....	G	UNKNOWN PILL OR SYRUP .....	H	ANTIBIOTIC .....	L	NON-ANTIBIOTIC .....	M	UNKNOWN INJECTION.....	N	
ANTIBIOTIC .....	A															
ANTIMOTILITY (ANTI-DIARRHOEA) .....	B															
OTHER PILL OR SYRUP .....	G															
UNKNOWN PILL OR SYRUP .....	H															
ANTIBIOTIC .....	L															
NON-ANTIBIOTIC .....	M															
UNKNOWN INJECTION.....	N															
<p><b>CA14.</b> At any time in the last two weeks, has (<i>name</i>) been ill with a fever?  <b>Sa maua ia (<i>name</i>) i se fiva i se taimi o le lua vaiaso ua te'a?</b></p>	YES.....1 NO .....2 DK .....8															
<p><b>CA16.</b> At any time in the last two weeks, has (<i>name</i>) had an illness with a cough?  <b>Sa maua (<i>name</i>) i se ma'i e aofia ai ma le tale i se taimi o le lua vaiaso ua te'a?</b></p>	YES.....1 NO .....2 DK .....8															
<p><b>CA17.</b> At any time in the last two weeks, has (<i>name</i>) had fast, short, rapid breaths or difficulty breathing?  <b>Sa faatopetope ma pupuu le manava/ga'e pe faa faigata foi ona manava ia (<i>name</i>) i se taimi o le lua vaiaso ua te'a?</b></p>	YES.....1 NO .....2 DK .....8	2⇒CA19 8⇒CA19														
<p><b>CA18.</b> Was the fast or difficult breathing due to a problem in the chest or a blocked or runny nose?  <b>Sa faa faigata ona manava ona o le faafitauli i lona fatafata pe o le mamafa fo'i o le isu?</b></p>	PROBLEM IN CHEST ONLY .....1 BLOCKED OR RUNNY NOSE ONLY .....2 BOTH .....3 OTHER ( <i>specify</i> ) .....6 DK .....8	1⇒CA20 2⇒CA20 3⇒CA20 6⇒CA20 8⇒CA20														
<p><b>CA19.</b> Check CA14: Did child have fever?</p>	YES, CA14=1.....1 NO OR DK, CA14=2 OR 8.....2	2⇒CA30														
<p><b>CA20.</b> Did you seek any advice or treatment for the illness from any source?  <b>Sa e saili ni fautuaga poo ni togafitiga o le ma'i fiva?</b></p>	YES.....1 NO .....2 DK .....8	2⇒CA22 8⇒CA22														

<p><b>CA21.</b> From where did you seek advice or treatment?  <b>O fea sa e saili fautuaga/togafiti iai?</b>  <i>Probe:</i> Anywhere else? <b>E iai se isi nofoaga?</b></p> <p>Record all providers mentioned, but do <u>not</u> prompt with any suggestions.</p> <p>Probe to identify each type of provider.</p>	<p><b>PUBLIC MEDICAL SECTOR</b>  GOVERNMENT HOSPITAL ..... A  GOVERNMENT HEALTH CENTRE ..... B</p> <p><b>PRIVATE MEDICAL SECTOR</b>  PRIVATE PHYSICIAN ..... J  PRIVATE PHARMACY ..... K</p> <p><b>OTHER SOURCE</b>  RELATIVE / FRIEND ..... P  SHOP ..... Q  TRADITIONAL PRACTITIONER ..... R</p> <p>OTHER (<i>specify</i>) ..... X  DK / DON'T REMEMBER ..... Z</p>	
<p><b>CA22.</b> At any time during the illness, was (<i>name</i>) given any medicine for the illness?  <b>I le taimi ao ma'i fiva (<i>name</i>), sa faainu ni vai poo ni fualaau?</b></p>	YES ..... 1 NO ..... 2 DK ..... 8	2 $\Rightarrow$ CA30 8 $\Rightarrow$ CA30
<p><b>CA23.</b> What medicine was (<i>name</i>) given?  <b>O a vai/fualaau na ave ia (<i>name</i>)?</b></p> <p><i>Probe:</i>  Any other medicine? <b>E iai se isi vai/fualaau</b></p> <p>Record all medicines given.</p> <p>If unable to determine type of medicine, write the brand name and then temporarily record 'W' until you learn the appropriate category for the response.</p> <hr/> <p>(Name of brand)</p> <hr/> <p>(Name of brand)</p>	<p><b>ANTIBIOTICS</b>  AMOXICILLIN ..... L  COTRIMOXAZOLE ..... M  OTHER ANTIBIOTIC  PILL/SYRUP ..... N  OTHER ANTIBIOTIC  INJECTION/IV ..... O</p> <p><b>OTHER MEDICATIONS</b>  PARACETAMOL/PANADOL/  ACETAMINOPHEN ..... R  ASPIRIN ..... S  IBUPROFEN ..... T</p> <p>ONLY BRAND NAME RECORDED ..... W</p> <p>OTHER (<i>specify</i>) ..... X  DK / DON'T REMEMBER ..... Z</p>	
<p><b>CA24.</b> Check CA23: Antibiotics mentioned?</p>	YES, ANTIBIOTICS MENTIONED, CA23=L-O ..... 1 NO, ANTIBIOTICS NOT MENTIONED ..... 2	2 $\Rightarrow$ CA30

<p><b>CA25.</b> Where did you get the (<i>name of medicine from CA23, codes L to O</i>)?  <b>O fea sa aumai ai</b> (<i>name of medicine from CA23, codes L to O</i>)?</p> <p><i>Probe to identify the type of source.</i></p> <p><i>If 'Already had at home', probe to learn if the source is known.</i></p>	<p><b>PUBLIC MEDICAL SECTOR</b>  GOVERNMENT HOSPITAL ..... A  GOVERNMENT HEALTH CENTRE ..... B</p> <p><b>PRIVATE MEDICAL SECTOR</b>  PRIVATE PHYSICIAN ..... J  PRIVATE PHARMACY ..... K</p> <p><b>OTHER SOURCE</b>  RELATIVE / FRIEND ..... P  SHOP ..... Q  TRADITIONAL PRACTITIONER ..... R</p> <p>OTHER (<i>specify</i>) ..... X</p>	
<p><b>CA30.</b> Check UB2: Child's age?</p>	AGE 0, 1 OR 2 ..... 1 AGE 3 OR 4 ..... 2	<i>2⇒End</i>
<p><b>CA31.</b> The last time (<i>name</i>) passed stools, what was done to dispose of the stools?  <b>I le taimi mulimuli lava na fai ai le feau mamao a</b> (<i>name</i>) <b>na faapefea ona lafoa'i le otaota</b> (feau mamao)?</p>	CHILD USED TOILET / LATRINE ..... 01 PUT / RINSED INTO TOILET OR LATRINE ..... 02 PUT / RINSED INTO DRAIN OR DITCH ..... 03 THROWN INTO GARBAGE (SOLID WASTE) ..... 04 BURIED ..... 05 LEFT IN THE OPEN ..... 06  OTHER ( <i>specify</i> ) ..... 96 DK ..... 98	

<b>UF11.</b> Record the time.	HOURS AND MINUTES ..... : ____	
<b>UF12.</b> Language of the Questionnaire.	ENGLISH ..... 1 SAMOAN ..... 2	
<b>UF13.</b> Language of the Interview.	ENGLISH ..... 1 SAMOAN ..... 2  OTHER LANGUAGE (specify) _____ 6	
<b>UF14.</b> Native language of the Respondent.	ENGLISH ..... 1 SAMOAN ..... 2 CHINESE ..... 3  OTHER LANGUAGE (specify) _____ 6	
<b>UF15.</b> Was a translator used for any parts of this questionnaire?	YES, THE ENTIRE QUESTIONNAIRE ..... 1 YES, PARTS OF THE QUESTIONNAIRE ..... 2 NO, NOT USED ..... 3	
<b>UF18.</b> Tell the respondent that you will need to measure the weight and height of the child before you leave the household and a colleague will come to lead the measurement. Issue the ANTHROPOMETRY MODULE FORM for this child and complete the Information Panel on that Form.		
Check columns HL10 and HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of <u>another</u> child age 0-4 living in this household?		
<p><input type="checkbox"/> Yes ⇔ Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then go to the next QUESTIONNAIRE FOR CHILDREN UNDER FIVE to be administered to the same respondent.</p> <p><input type="checkbox"/> No ⇔ Check HL6 and column HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of a child age 5-17 selected for Questionnaire for Children Age 5-17 in this household?</p> <p style="padding-left: 20px;"><input type="checkbox"/> Yes ⇔ Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the same respondent.</p> <p style="padding-left: 20px;"><input type="checkbox"/> No ⇔ Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking her/him for her/his cooperation. Check to see if there are other questionnaires to be administered in this household.</p>		

**INTERVIEWER'S OBSERVATIONS****SUPERVISOR'S OBSERVATIONS**

ANTHROPOMETRY MODULE INFORMATION PANEL		AN
<b>AN1.</b> Cluster number: _____	<b>AN2.</b> Household number: _____	
<b>AN3.</b> Child's name and line number: NAME _____	<b>AN4.</b> Child's age from UB2: AGE (IN COMPLETED YEARS) .....	
<b>AN5.</b> Mother's / Caretaker's name and line number: NAME _____	<b>AN6.</b> Interviewer's name and number: NAME _____	

ANTHROPOMETRY		
<b>AN7.</b> Measurer's name and number:	NAME _____	
<b>AN8.</b> Record the result of weight measurement as read out by the Measurer:  Read the record back to the Measurer and also ensure that he/she verifies your record.	KILOGRAMS (KG) ..... ____ . ____  CHILD NOT PRESENT AFTER REVISITS .... 99.3 CHILD REFUSED ..... 99.4 RESPONDENT REFUSED..... 99.5  OTHER (specify) ..... 99.6	99.3 ⇔ AN13 99.4 ⇔ AN10 99.5 ⇔ AN10  99.6 ⇔ AN10
<b>AN9.</b> Was the child undressed to the minimum?	YES ..... 1 NO, THE CHILD COULD NOT BE UNDRESSED TO THE MINIMUM..... 2	
<b>AN10.</b> Check AN4: Child's age?	AGE 0 OR 1..... 1 AGE 2, 3 OR 4..... 2	1 ⇔ AN11A 2 ⇔ AN11B
<b>AN11A.</b> The child is less than 2 years old and should be measured lying down. Record the result of length measurement as read out by the Measurer:  Read the record back to the Measurer and also ensure that he/she verifies your record.	LENGTH / HEIGHT (CM) ..... ____ ____ ____ . ____  CHILD REFUSED ..... 999.4 RESPONDENT REFUSED..... 999.5  OTHER (specify) ..... 999.6	999.4 ⇔ AN13 999.5 ⇔ AN13  999.6 ⇔ AN13
<b>AN11B.</b> The child is at least 2 years old and should be measured standing up. Record the result of height measurement as read out by the Measurer:  Read the record back to the Measurer and also ensure that he/she verifies your record.		
<b>AN12.</b> How was the child actually measured? Lying down or standing up?	LYING DOWN ..... 1 STANDING UP..... 2	
<b>AN13.</b> Today's date: Day / Month / Year:  ____ / ____ / ____		
<b>AN14.</b> Is there another child under age 5 in the household who has not yet been measured?	YES..... 1 NO ..... 2	1 ⇔ Next Child
<b>AN15.</b> Thank the respondent for his/her cooperation and inform your Supervisor that the Measurer and you have completed all the measurements in this household.		

**INTERVIEWER'S OBSERVATIONS FOR ANTHROPOMETRY MODULE****MEASURER'S OBSERVATIONS FOR ANTHROPOMETRY MODULE****SUPERVISOR'S OBSERVATIONS FOR ANTHROPOMETRY MODULE**