



names would be mentioned. You do not have to answer any question you do not want to and can stop the interview at any stage. It will take about 15 minutes.

a. Have I explained adequately the purpose of the survey? Yes  No

b. Do you understand that you do not have to answer any questions you do not wish to and that you can stop the interview at any point? Yes  No

<Proceed ONLY if the response to these two questions is "YES". If the answer to any of these questions is "NO" explain the purpose again.>

c. Do you agree to participate? Yes  No

<Proceed only if the respondent agrees to participate. If not identify some other key informant who can provide the information. In case the profile was not filled at all write reason for the same.>

**ELECTRICITY**

6. Is there electricity in this town? Yes  No  <skip to Q8>

7. How many hours of power are provided per day (average)? \_\_\_\_\_ hr/day

8. How many private generators are there in this community? None  Few  Many

**GARBAGE REMOVAL**

9. Is there a government system for removing garbage from this community? Yes  No  <skip to Q11>

10. If yes, how frequently is the garbage removed from the community? <Write the period and unit as specified by the respondent. Skip to Q12> \_\_\_\_\_  
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11. Is there another system for removing garbage from individual households in this community? Yes  No

12. How else do residents deal with their garbage?

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**WASTE WATER AND SEWAGE REMOVAL**

13. Is there a government system for removing waste water and sewage from this community? Yes  No  <skip to Q15>

14. If yes, what is the system? (Confirm the system by direct observation)  
All covered or piped drains   
Open/partly covered proper drains

- Partly proper, partly open drains
- All open drains

**DRINKING WATER SUPPLY**

15. What is the main source for drinking water in the settlement?
- A- Taps within the households
  - B- Community taps
  - C- Borehole within the households
  - D- Community borehole
  - E- Well within the household
  - F- Community well
  - G- River/Spring
  - H- Any other source (specify): \_\_\_\_\_

16. When this fails, what is the second source?
- A- Taps within the households
  - B- Community taps
  - C- Borehole within the households
  - D- Community borehole
  - E- Well within the household
  - F- Community well
  - G- River/Spring
  - H- Any other source (specify): \_\_\_\_\_

17. How would you describe the quality of underground water in this community?
- Normal       With some taste       Salty       Bitter

**ACCESS TO CHILD HEALTH CARE**

18. List all the health facilities *within the settlement* including hospitals <Include government, private, NGOs, traditional healers.>

Name	Type*	How functional is the facility?#	Facilities and Services <write yes or no>			
			Immunization	Malaria Rx	Antibiotics	ORS

\*1. Government Traditional      2. Private qualified      3. Private unqualified      4. NGO      5.

# Fully, partially, not at all

19. List the information about following government health facilities in relation to this settlement.

<Skip those already included in Q18>

Arrangement	Name and address	Distance (km)	Mode of transport	Cost on transport (Round trip)
Any nearest				
Nearest providing Immunisation				
Nearest providing Anti-malarial Rx				
Nearest providing antibiotics				
Nearest providing ORS				
Nearest general or tertiary* care hospital				

\*Specialist hospital or federal medical centre

20. Are there any churches that provide child health care such as immunization or treatment of childhood illnesses in this settlement? Yes  No  <skip to Q22>

21. List all such churches. <Ask for names and addresses to find them so they can be visited>

Name	Address

22. Are there any other organizations providing child health care such as immunization or treatment of childhood illnesses in this settlement? Yes  No  <skip to Q24>

23. List all such organizations <ask for names and where to find them so they can be interviewed>

Name	Address

24. Is there a chemist/patent medicine seller in this settlement? Yes  No

**IMMUNISATION SERVICES**

25. Where do people in this community usually take their children to be immunised? *<Write exact name and address of the facility.>*

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26. How far away is this facility from the community? *<write distance in km from centre of the community. If within community write "within community">*

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27. How do people usually travel to this facility?

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28. How much time does it take to reach the facility by this means (one way)? \_\_\_\_\_

29. How much does it cost to travel to this facility by this means (round trip)? \_\_\_\_\_ *Naira*

30. Apart from Polio Campaign/days, how frequently does any vaccination team/person visit this community to immunise children? *<Never or write the period and unit as specified by the respondent. If never go to Q32>*

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31. When was the last such visit? *<Write the period and unit as specified by the respondent>*

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32. When was the last Polio Campaign Day in this community? *<Write the period and unit as specified by the respondent>*

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33. How many polio campaign days have you had in this community in the last 12 months? \_\_\_\_\_

34. When was the last Measles vaccination Campaign in this community? *<Write the period and unit as specified by the respondent>*

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**COMMUNITY ORGANIZATION**

35. Is this settlement a member of any local area or village development committee?

Yes  No  *<skip to Q39>*

36. Is this committee active?

Yes  No

37. How frequently does this committee meet?

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38. When was the last meeting? \_\_\_\_\_

39. Is this settlement a member of any local area or village health committee?  
Yes  No  <skip to Q43>

40. If yes is this committee active? Yes  No

41. How frequently does this committee meet? \_\_\_\_\_

42. When was the last meeting? \_\_\_\_\_

43. What is the average monthly income from all sources of an average household in this community?  
\_\_\_\_\_ Naira

44. Contact name, number, and address of Community Leader, Head or Chief:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_