PERSONAL IDENTIFIER INFORMATION

1. Consent obtained? $1 = yes, 2 = no$ \ CONS
If no, do not continue
Interviewer name & code no
STICKER with participant's personal identifier information Residence code: _ VNO _ HNO STM
2. Child's full names
3. SEX $ _ $ 1 = M, 2 = F
4. DOB _ _ _ _ _ → If year of birth unknown, ask or estimate age (years) AGE dd mm yy
5. Respondent's name
6. Olina luganda ki kumwana ono? What is your relationship to this child? 1= mother, 2 = father, 3 = step-mother/father, 4 = brother/sister, 5 = grandparent, 6 = other guardian (related), 7 = other guardian (not related)
Information for survey clerks and data manager: Indicate major differences to enumeration list such as age, names etc. a. Revised NAME
Remarks
EDUCATION (all children aged 5-12 yrs)
7. Omwana ono yali asomyeko? Has this child ever been to school? 1 = yes, 2 = no, 8 = don't know If no, go to question 10-5
If yes, continue 8. Omwana ono akyasoma? Is the child currently at school? 1 = yes, 2 = no, 3 = don't know
9. Oba ye ali mu kibina ki? What level is the child at? 18 = pre-primary, 1-7 = primary P1 - P7, 10-14 = secondary S1 – S4, 19 = other (specify)

EARLY LIFE (children aged less than 3 years): **delivery and infant feeding**

Del	live	ry
Del	live:	ry

10. Omwana ono ba/wamuzaalira wa? Where was the child delivered? 1 = clinic/hospital, 2 = home with TBA, 3 = home with relative, 4 = unassisted, 5 = delivered on the way, assisted, 8 = not known/not sure	PDEL
If clinic/hospital, 11. Ddwaliro ki mwe ba muzalira? Where was this child delivered? (Use coding list 3)	CDEL
12. Omwana ba/wamuzaala otya? How was the baby delivered? 1 = vaginal, 2 = assisted vaginal, 3 = surgical, 8 = not known/not sure	TDEL
Infant feeding	
13. Omwaana ono yayonsebwako? Has the child ever been breastfed? 1 = yes, 2 = no, 3 = don't know If no, go to question 179. If yes, continue.	EVBFD
If yes, 14. Omwana ono akyayonka? Is the child still breastfeeding? 1 = yes, 2 = no, 8 = don't know If yes, go to question 168. If no, continue.	CBFD
If no, 15. Yakoma okuyonka nga wa bukulu ki? At what age (in years and months) did this child stop breastfeeding? (8.88 = don't know) y	ABFD mm
All participants: 16. Omwana yayonkera emyezi emeka nga tonnatandika kumuwa kya kunywa oba kya kulya k For how many months was the child exclusively breastfed before having any other liquids o Jjuza emyezi gy'awadde 99 = Akyayonka mabeere gokka Still exclusive breastfeeding 88 = Simanyi Don't know 66 = Teyaweza mwezi gumu Less than 1 month	
IMMUNISATIONS (all participants)	
17. Omwana ono mpiso ki ez'okugema zeyakafuna? What immunisations has the child received up to now? 1 = received, 2 = not received, 8 = don't know BCG	PVT2
DPT1	yamulibwa)
OVP= oral polio vaccine PVT = combined diphtheria, heamophilus influenzae B , hepatitis B , pertussis and tetanu DPT = combined diphtheria, pertussis and tetanus vaccine	ıs vaccine

18. Kugemebwa kwangeri ki omwana kweyefuna okuva olwo?
What immunisations, if any, has the child received since then?
1 = received, 2 = not received, 8 = don't know
TB IMMTB
Hepatitis B IMMHB
Tetanus (3 dose course) IMMTET
Tetanus (boosters) IMMTETB
Rabies IMMR
Other IMMO specify
IMMOSP
19. Immunisation card seen? 1 = yes, 2 = no
If yes, check that answers to questions 17/18 & 19 agree; if they do not, correct answers to question 17/18.
20. BCG scar seen (check right shoulder) 1 = yes, 2 = no
BCGS
BLOOD SAMPLE
21. Consent obtained for taking blood?
1 = yes, 2 = no
22. Blood: (microtainer)
1 = specimen obtained, $2 = $ specimen to be obtained later, $7 = $ refused, $9 = $ failed
23. Interviewer code of the person taking the blood sample if different from the interviewer _ DINTCODE
24. LABNO
TREATMENT - all participants
25. Instruction to interviewer: please record here if any treatment provided to participant on the spot
D'acceptant de la companya de la com
Diagnosis:
Treatment: