**Tool 2b – Informant Method Tool (Template)**

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| **Study Site:** | **Date of Data Collection:** |
| **Supervisor Name:** | **Enumerator Name:** |
| **Location of Interview:** |  |

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| Section: Informed Consent |
| I am \_\_\_\_\_, working for IMPACT Initiatives, a sister organization to ACTED, an international non-profit organization working in this area. Together with the University of Kinshasa School of Public Health and University of California Berkeley, we are doing research on methods to improve reporting of deaths in the community to better inform the health department on the number and causes of death in this area. This information helps health actors plan and run health services for the population. We are calling you today because you have valuable information on your community in Tanganyika Province. Would you have 30-60 minutes today to answer some questions about births, deaths and other health events that have occurred in your community?  If yes, I would like to give you some information about our work and invite you to take part in this study. If there is any part that you don’t understand you can ask me to stop and I will take time to explain, or you can ask later.  \*\*Does the participant agree to continue?\*\* [YES / NO] |
| [If not agree to continue] Thank you for your time. [END INTERVIEW] |
| [If yes to continue] [APPLY THE INFORMED CONSENT FORM for Tool 2b].  \*\* Has the respondent consented to participate? \*\* [YES / NO]  [If yes to consent] [Continue to section 1].  [If no to consent] Thank you for your time. [END INTERVIEW]. |

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| Section 1: Key Informant Information | | |  |
| S/No | **Question** | **Choices** |  |
| Q1.1 | What is the sex of the respondent? | 1 = Male; 2 = Female; |  |
| Q1.2 | What is the age of the respondent (in completed years) | Integer (completed years) |  |
| Q1.3 | What Territory are you in today? | [Select one – contextual list] |  |
| Q1.4 | What Zone de Sante are you in today? | [Select one – contextual list] |  |
| Q1.5 | What Aire de Sante are you in today? | [Select one – contextual list] |  |
| Q1.6 | What village are you in today? | [Select one – contextual list] |  |
| Q1.7 | Is [village\_name] your place of usual residence? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q1.8 | Is [village\_name] where your family currently resides? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q1.9 | What is the type of key informant being interviewed? | [Contextual list of community roles] |  |

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| Section 2: Summary Reporting | | |  |
| Q2.1 | Has a community listing been done for [village\_name] ? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| If not, explain the process for conducting the community listing. The steps are as follows:  - The key informant will verbally list all the households in the community, up to 150 households maximum. We only need an indicative name for each household to help probing during the interview.  - Ensure the key informant this information will be kept as confidential as possible and will be destroyed at the end of the project.  - After the listing is done, we will ask some questions about each household about births, deaths, suspect cases of cholera or measles, in the community. | | | |
| If the community listing has already been completed, explain or review the process by which you will conduct the interview.  Step 1: Starting from the top of the list, ask the respondent the following questions for each household:  - Has there been any births in the households of [NAME] died since January 1st, 2023?  - Have any older children (12+ years) or adults had serious case of diarrhoea in the household of [NAME] since January 1st, 2023?  - Has there been any children under five years of age with measles in the household of [NAME] since January 1st, 2023?  - Has anyone in the household of [NAME] died since January 1st, 2023?  Step 2: If the respondent reports any demographic or health event since January 1st, 2023, the enumerator will record it appropriately in the community listing form.  Step 3: Record the total number of households, births, suspect cholera cases, suspect measles cases, and deaths in this form.  Step 4: Ask the additional follow questions for each reported birth, suspect cholera case, suspect measles case, or death, in this form. | | | |
| Q2.2 | How many total households were reported about? | Integer |  |
| Q2.3 | Among the [num\_households] households, how many total births were reported since January 1st, 2023? | Integer |  |
| Q2.4 | Among the [num\_households] households, how many total cases of acute watery diarrhoea in older children (12+) or adults were reported since January 1st, 2023? | Integer |  |
| Q2.5 | Among the [num\_households] households, how many total cases of children under-5 years with suspect measles were reported since January 1st, 2023? | Integer |  |
| Q2.6 | Among the [num\_households] households, how many deaths were reported since January 1st, 2023? | Integer |  |
| Q2.7 | How many households have left the community since January 1st, 2023? | Integer |  |
| Q2.8 | How many households have joined the community since January 1st, 2023? | Integer |  |

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| Section 3: Births | | | |
| *Repeat below questions for each birth reported* | | | |
| Q3.2 | Do you know the sex of the child? | 1 = Male; 2 = Female; |  |
| Q3.3 | What is the approximate age in years of the child? | Integer |  |
| Q3.4 | Do you know the day, month, and year of child’s birth? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q3.5 | What is the \*\*date of birth\*\* for the child? | Date | Q3.4 = 1 |
| Q3.6 | If not exact date, can you estimate the \*\*month-year of birth\*\* for the child? | Month-Year | Q3.4 = 2 |
| Q3.7 | What was the outcome of this birth? | 1 = Born, and alive; 2 = Born, but now dead, 3 = Child not born alive; 4 = Don’t Know; 5 = Other (please specify) |  |

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| Section 4: Suspect Cholera | | |  |
| *Repeat below questions for each person reported* | | | |
| Q4.2 | What was the sex of the person ? | 1 = Male; 2 = Female; |  |
| Q4.3 | What was the age in years of the person? | Integer |  |
| Q4.4 | What is your relationship to the person? | 1 = Family; 2 = Friend; 3 = Neighbour; 4 = Through buying/selling/business; 5 = Acquaintance; 6 = Don’t know; 7 = No response; 8 = Don’t know |  |
| Q4.5 | Did you observe the person directly when they were sick? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q4.6 | Did the person have at least 3 loose stools during a 24-hour period? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q4.5 = 1 |
| Q4.7 | Did the person have any vomiting? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q4.5 = 1 |
| Q4.8 | Did the person have sunken eyes? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q4.5 = 1 |
| Q4.9 | Do you know the \*\*day, month, and year\*\* that the person last had symptoms? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q4.10 | What is the \*\*last date\*\* that you are aware the person had symptoms ? | Date | Q4.9 = 1 |
| Q4.11 | If not exact date, can you estimate the \*\*month-year\*\* that the person had symptoms ? | Month-Year | Q4.9 = 2 |
| Q4.12 | Did the person seek health care? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q4.13 | If so, what place was health care sought? | 1 = Govt. hospital; 2 = Govt. health center; 3 = Govt. health post; 4 = Other govt. medical facility; 5 = Private hospital; 6 = Private clinic; 7 = Other private facility; 8 = NGO hospital; 9 = NGO clinic; 10 = Other NGO facility; 11 = Other (please specify); 12 = Don’t know | Q4.12 = 1 |
| Q4.14 | What was the outcome of the person’s illness? | 1 = Person recovered; 2 = Person still sick; 3 = Person died; 4 = Don’t know; 5 = Other (please specify) |  |

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| Section 5: Suspect Measles | | |  |
| In the following section, we want to ask you a few questions about children under 5-years of age who may have measles since January 1st, 2023. Similar to the previous questions, we only want to know about people who:   * People who reside in the same community as you * People you know by sight and name, and who know you by sight and name (not famous people) | | | |
| Q5.1 | How many children (under-5 years) do you know who had measles since January 1st, 2023? | Integer |  |
| *Repeat below questions for each person reported* | | | |
| Q5.2 | What was the sex of the child ? | 1 = Male; 2 = Female; |  |
| Q5.3 | What was the age in years of the child? | Integer |  |
| Q5.4 | Did you observe the child directly when they were sick? | 1 = Family; 2 = Friend; 3 = Neighbour; 4 = Through buying/selling/business; 5 = Acquaintance; 6 = Don’t know; 7 = No response; 8 = Don’t know |  |
| Q5.5 | Did the child have a rash on their head and/or neck? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q5.4 = 1 |
| Q5.6 | Did the child have fever? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q5.4 = 1 |
| Q5.7 | Do you know the \*\*day, month, and year\*\* that the child had measles ? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q5.8 | What is the \*\*last date\*\* that you are aware the child had measles symptoms ? | Date | Q5.7 = 1 |
| Q5.9 | If not exact date, can you estimate the \*\*month-year\*\* that the child had measles symptoms ? | Month-Year | Q5.7 = 2 |
| Q5.10 | Did the child seek health care? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q5.11 | If so, what place was health care sought? | 1 = Govt. hospital; 2 = Govt. health center; 3 = Govt. health post; 4 = Other govt. medical facility; 5 = Private hospital; 6 = Private clinic; 7 = Other private facility; 8 = NGO hospital; 9 = NGO clinic; 10 = Other NGO facility; 11 = Other (please specify); 12 = Don’t know | Q5.10 = 1 |
| Q5.12 | What was the outcome of the child's illness? | 1 = Person recovered; 2 = Person still sick; 3 = Person died; 4 = Don’t know; 5 = Other (please specify) |  |

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| Section 6: Deaths | | |  |
| In the following section, we want to ask you a few questions about people who have died since January 1st, 2023. Similar to the previous questions, we only want to know about people who:   * People who reside in the same community as you * People you know by sight and name, and who know you by sight and name (not famous people) * People who lived in your community since January 1st, 2023. * Children of people who lived in your community since January 1st, 2023. | | | |
| Q6.1 | How many people have passed away who reside in the same community as you since January 1st, 2023. | Integer |  |
| *Repeat below questions for each person reported* | | | |
| Q6.2 | What was the first name of the deceased individual? | Text |  |
| Q6.3 | What was the family name of the deceased individual? | Text |  |
| Q6.4 | Was [name\_deceased] known by any other names or nicknames? | Text |  |
| Q6.5 | What was the sex of [name\_deceased]? | 1 = Male; 2 = Female; |  |
| Q6.6 | What was the age in completed years of [name\_deceased] ? | Integer |  |
| Q6.7 | Do you know the day, month, and year of [name\_deceased] birth? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.8 | What is the \*\*date of birth\*\* for [name\_deceased]? | Date | Q6.7 = 1 |
| Q6.9 | If not exact date, can you estimate the \*\*month-year of birth\*\* for [name\_deceased] ? | Month-Year | Q6.7 = 2 |
| Q6.10 | Do you know the day, month, and year that [name\_deceased] passed away? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.11 | Do you know the exact date that [name\_deceased] passed away? | Date | Q6.10 = 1 |
| Q6.12 | If not, please estimate the month-year of death as close as possible? | Month-Year | Q6.10 = 2 |
| Q6.13 | What was the main cause of death for [name\_deceased]? | 1 = Acute disease; 2 = Chronic disease; 3 = Intentional violence; 4 = Accident/trauma; 5 = Post-partum (0-42 days); 6 = During pregnancy; 7 = During delivery; 8 = Other (please specify); 9 = Don’t know |  |
| Q6.14 | Where did the [name\_deceased] pass away? | 1 = Current location of residence; 2 = Health facility at current location of residence; 3 = During migration or displacement; 4 = At last place of residence; 5 = Health facility at last place of residence |  |
| Q6.15 | Did [name\_deceased] seek health care in the 2 weeks before dying? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.16 | If so, what place was health care sought? | 1 = Govt. hospital; 2 = Govt. health center; 3 = Govt. health post; 4 = Other govt. medical facility; 5 = Private hospital; 6 = Private clinic; 7 = Other private facility; 8 = NGO hospital; 9 = NGO clinic; 10 = Other NGO facility; 11 = Other (please specify); 12 = Don’t know | Q6.15 = 1 |
| Q6.17 | If not, what was the main reason for not seeking care in a health structure/facility? | 1 = Immediate death; 2 = No money/consultation too expensive; 3 = Too sick to seek care; 4 = Not sick enough to seek care; 5 = Health facility too far away; 6 = Went to a traditional healer; 7 = No time to go/too busy to go; 8 = No trust in the health facility; 9 = Safety issue; 10 = Care was refused at the health center; 11 = Other please specify; 12 = Don’t know | Q6.15 = 2 |
| Q6.18 | In your own words, can you provide any other details about the circumstances of [name\_deceased]'s death? | Text |  |
| Q6.21 | Was [name\_deceased} a part of your own household? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.22 | Was [name\_deceased] a membre of the community you currently live in? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.23 | If no, what Zone de Sante did [name\_deceased] live at the time of death? | [Select one – contextual list] | Q6.22 = 1 |
| Q6.24 | If no, what Aire de Sante did [name\_deceased] live at the time of death? | [Select one – contextual list] | Q6.22 = 1 |
| Q6.25 | If no, what Village did [name\_deceased] live at the time of death? | [Select one – contextual list] | Q6.22 = 1 |
| Q6.26 | We would like to follow up more closely with the household of [name\_deceased] to better understand the causes of their death. This will help us understand the causes of high mortality in Tanganyika Province so the health department and NGOs can better plan their response.  We would like to ask your permission to follow up with [name\_deceased]'s household directly to better understand the causes of death. We would not disclose your information that you told us about the death, but it would increase the risk of breaching your confidentiality if we discussed with the household. If you are not comfortable with us following up with the household, please tell us. We will only follow up with them if you give us permission to do so.  \*\*Do we have your permission to follow up with the household of [name\_deceased]? \*\* | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.27 | \*\*Do we have your permission from household of [name\_deceased] the follow-up with some questions about cause of death? \*\* | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer |  |
| Q6.27 | Do you have any phone number you can share for [name\_deceased]'s household? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q6.26 = 1 |
| Q6.29 | Phone number | Phone Number | Q6.27 = 1 |
| Q6.30 | Is there anyone else we could call by phone who could connect us with [name\_deceased]'s household? | 1 = Yes; 2 = No; 8 = Don’t know; 9 = Prefer not to answer | Q6.26 = 1 |
| Q6.31 | Phone number (alternate): | Phone Number | Q6.29 = 1 |
| Q6.32 | Do you have any other information on how we could reach or contact [name\_deceased]'s household? | Text | Q6.26 = 1 |