**Module 4 - Activity 2 - Household Rapid Sanitary observations checklist**

1. **Scenario 1 - Water used for drinking and food preparation.**

*Please look at the survey below, discuss in your groups* ***what actions*** *you are going to undertake? You need to decide whether you give them a kit or not and the specific actions needed to be undertaken by the volunteers for the areas related to water use for drinking?*   
*(you have 5 minutes)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **Yes** | **No** | **Actions - Key protective behaviors** |
|  | **Direct observation for household safe water use** |  |  | A picture containing text, clipart  Description automatically generated |
| Q1 | Water storage containers are protected from contamination and kept clean.  ***Observations (notes for volunteers)***  *Observe that the container used for storage of drinking water are:*   * *kept in a separate container. Y* * *kept above floor level and away from contamination. Y* * *have a narrow mouth/opening and/or have a lid/cover. Y* * *the volunteer can infer by observation from the status of the container if it is cleaned regularly, including inside and outside. N*   ***For next observation*** *the volunteer can ask for drinking water and observe the behaviour.*   * *The utensil used to draw water from the water container are clean and kept away from surfaces and stored in a hygienic manner.* * *When drawing drinking water, the fingers or any part of the hand* ***do not go*** *into the water. N* |  |  |  |
| Q2 | Is the drinking water clear?   * *If cloudy then the water is turbid, needs filtering as pre-treatment if cloudy, dirty before chlorination. Y* |  |  |  |
| Q3 | Residual chlorine in drinking water?  (*As proxy* *check the presence of chlorine tablets or bleach for water treatment*)   * *Observe if chlorination materials are available for household water disinfection N* * *Check if community have access to these* |  |  |  |
| **All HH should have info card taped to the wall where water is stored.** | | | | |

**Scenario 2 - Water used for drinking and food preparation.**

*Please look at the survey below, discuss in your groups what actions you are going to undertake? You need to decide whether you give them a kit or not, and the specific actions needed to be undertaken by volunteers for the areas related to water use for drinking?*   
*(You have 5 minutes)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **Yes** | **No** | **Actions - Key protective behaviors** |
|  | **Direct observation for household safe water use** |  |  | A picture containing text, clipart  Description automatically generated |
| Q1 | Water storage containers are protected from contamination and kept clean.  ***Observations (notes for volunteers)***  *Observe that the container used for storage of drinking water are:*   * *kept in a separate container. N* * *kept above floor level and away from contamination. Y* * *have a narrow mouth/opening and/or have a lid/cover. N* * *the volunteer can infer by observation from the status of the container if it is cleaned regularly, including inside and outside. Y*   ***For next observation*** *the volunteer can ask for drinking water and observe the behaviour.*   * *The utensil used to draw water from the water container are clean and kept away from surfaces and stored in a hygienic manner. Y* * *When drawing drinking water, the fingers or any part of the hand* ***do not go*** *into the water. N* |  |  |  |
| Q2 | Is the drinking water clear?   * *If cloudy then the water is turbid, needs filtering as pre-treatment if cloudy, dirty before chlorination. Y* |  |  |  |
| Q3 | Residual chlorine in drinking water?  (*As proxy* *check the presence of chlorine tablets or bleach for water treatment*)   * *Observe if chlorination materials are available for household water disinfection N (HH members practice filtration)* * *Check if community have access to these* |  |  |  |
| **All HH should have info card taped to the wall where water is stored.** | | | | |

1. **Scenario 3 - Sanitation and shared hygiene (washing) areas.**

*Please look at the survey below, discuss in your groups what actions you are going to undertake? You need to decide whether you give them a kit or not, and the specific actions needed to be undertaken by volunteers for the areas related to Sanitation and shared hygiene?*

*(You have 5 minutes)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Direct observation for household safe sanitation habits** | **Yes** | **No** | **Actions - Key protective behaviors** |
| Q4 | Check presence of a latrine in the HH.   * *If there is no latrine then you need to ask where they go to the toilet? are practicing open defecation? Yes latrine (unsanitary, not clean)* |  |  |  |
| Q5 | Check if the latrine is clean.   * *Presence of water container beside the latrines (for cleaning and flushing) N* * *Presence of lid to cover the latrine’ hole. N* * *Cleaning/disinfectant material are present nearby the latrine. N* |  |  |  |
| Q6 | Check for presence of a handwashing device nearby the latrines. Y (no water and no soap) |  |  |  |
| **Community Link Questions and observations: (this will be answered by community sanitary survey)**  For facilities which the case and other members of the case household share with other households.  Find out the locations of shared sanitation facilities (toilets)?  Find the location for shared washing facilities (body, Laundry)? | | | | |

**Scenario 4 - Sanitation and shared hygiene (washing) areas.**

*Please look at the survey below, discuss in your groups what actions you are going to undertake? You need to decide whether you give them a kit or not, and the specific actions needed to be undertaken by volunteers for the areas related to Sanitation and shared hygiene?*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Direct observation for household safe sanitation habits** | **Yes** | **No** | **Actions - Key protective behaviors** |
| Q4 | Check presence of a latrine in the HH.   * *If there is no latrine then you need to ask where they go to the toilet? are practicing open defecation? No latrine (probably open defecation)* |  |  |  |
| Q5 | Check if the latrine is clean.   * *Presence of water container beside the latrines (for cleaning and flushing)* N/a *Presence of lid to cover the latrine’ hole.*  N/a * *Cleaning/disinfectant material are present nearby the latrine.*  N/a |  |  |  |
| Q6 | Check for presence of a handwashing device nearby the latrines. Y (no water and no soap) |  |  |  |
| **Community Link Questions and observations: (this will be answered by community sanitary survey)**  For facilities which the case and other members of the case household share with other households.  Find out the locations of shared sanitation facilities (toilets)?  Find the location for shared washing facilities (body, Laundry)? | | | | |