

**ORPHANS AND VULNERABLE CHILDREN (OVC) PROJECT**  
**The Plight of Orphans and Vulnerable Children (OVC) in Nairobi Urban Slums in the**  
**Face of HIV/AIDS**

**Psychosocial Survey**

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**Field Worker's Manual**

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**African Population and Health Research Center (APHRC)**

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## **General Introduction and Outline of the Manual**

This manual serves as a guide for conducting the orphans and vulnerable children (OVCs) survey aimed at assessing the psycho-social wellbeing of children (6-14 yrs) living in poor urban areas. This manual will give the fieldworker the general overview of the OVC study, the general concepts relevant in the study, procedures that will be followed, the expectations and many more. The field worker is expected to read this manual thoroughly before starting the fieldwork and refer to it any time during the period of field work as necessary. The manual is structured as follows:

### **Part I: Summary of the study**

The First part of this manual consists of a summary of the OVC study including:

- A) Background of the study
- B) Objectives of the study
- C) Design and methodology of the study
- D) Institutions, funding and time frame
- E) Definition of Terms

### **Part 2: Actual Survey Details**

The second part of the manual consists of the following:

- A) Survey Tools
- B) Conducting an Interview
- C) Counseling and Referrals
- D) Project Organization
- E) Roles and Responsibilities of field staff
- F) Work Assignments
- G) Training and Field Supervision
- H) Project Regulations
- I) Supplies required for field work

### **Part 1: Summary of the study**

#### **A) Background of the study**

One of the many crises caused by the soaring rates of HIV and AIDS prevalence in sub-Saharan Africa in the last decade is a sharp rise in the number of orphans. In Kenya, approximately 1.7 million out of an estimated total of 15 million children – that is to say, about 11% of the total – have lost one or both of their parents, due largely to HIV/AIDS. Moreover, the number of orphans is projected to grow to 2.5 million by the year 2010, with 500,000 of these children having lost both parents. Although many of these orphans are cared for by members of their extended family, the strain placed on caregivers can be large, especially in Kenya and other Sub-Saharan countries with very high poverty rates.

While there is overall agreement on the scope of the problem, there is little agreement on what measures should be taken to address it. Indeed, many argue that interventions should not be focused specifically on orphans and vulnerable children (OVCs), but rather on reducing poverty or on raising education or health outcomes among vulnerable families, whether or not they include OVCs. Even among those that believe in interventions focused specifically on OVCs or on their caregivers, there is a huge amount of disagreement on what is the best course of action. Clarity is needed on the latter, not least because funds earmarked specifically for interventions that address OVCs are now becoming increasingly available from donors and other sources. These problems are exacerbated by the fact that OVC-specific interventions tend to incur high costs per child and given the limited budgets of most sub-Saharan African governments, difficult tradeoffs must be made. A lot of effort must also be expended to ensure that the funds are well targeted towards the neediest beneficiaries.

### **B) Objectives of the study**

The overall goal of the OVC study is to provide evidence to inform current and future policy and practice initiatives for OVC welfare in poor urban areas in sub-Saharan Africa. Using data from the Nairobi Urban Health and Demographic Surveillance System (NUHDSS) and an additional module to assess the psychosocial wellbeing of OVC, a work program comprising the identification of qualifying beneficiaries and assessment of targeting methods will be carried out. The specific objectives of the project are:

- i). To identify child level characteristics that can be used to explain various welfare measures;
- ii). Identify households that would qualify for interventions based on their income or other related socio-economic status indicator; and
- iii). Identify areas of vulnerability that should be the main focus of interventions that are targeted specifically to OVCs (e.g. school enrolment, health care, psychosocial needs e.g. emotional-behavioral control, anxiety, feelings of belonging, etc.)

### **C) Design and Methodology of the Study**

The proposed research focuses specifically on two slum areas of Nairobi (Korogocho and Viwandani), located on the eastern side of Nairobi which are the focus of the Nairobi Urban Health and Demographic Surveillance System (NUHDSS) conducted by the African Population and Health Research Center (APHRC) since 2000. The NUHDSS follows about 60,000 individuals in the two slum settlements.

This OVC study consists of two components: secondary data analysis and primary data collection that involves a quantitative survey on psychosocial issues and other key indicators updates such as school enrollment and health status. The secondary data analysis will mostly rely on the NUHDSS database. The study will involve children aged 6-14 years resident in the APHRC demographic surveillance area (DSA).

The primary data collection will involve a total of about 1200 orphans and a comparison group of about 1200 non-orphans; a total of about 2400 participants. Questionnaires will be used to collect information on various aspects of the child wellbeing including health status

and health seeking behavior, schooling status, nutritional status, material wellbeing, involvement in economic activities and psychosocial wellbeing.

#### **D) Institutions, Funding and Time Frame**

This study is being conducted by APHRC with funding from the World Bank. It is being implemented from June 2006 to June 2007. Field Work will take place in February and March 2007.

#### **E) Definition of Terms**

Considerable variation exists in definitions of such terms as household, orphan, non-orphan and 'vulnerable'. The list below presents our working definitions of these terms for the purpose of this survey.

**a) Household:** A person or a group of persons who usually live and eat together. This is not the same as a family. A family includes only people who are related, but a household includes any people who live together, whether or not they are related. A household can comprise of more than one family.

**b) Members of the household include:** Persons who usually live in the household. This may include maids and servants if they often sleep in the household.

**c) Biological Father:** This refers to the father of the child that is related to him/her by blood. This does not include step father or guardian.

**d) Biological Mother:** This refers to the mother of the child that is related to him/her by blood. This does not include step mother or guardian.

**e) Guardian/Caregiver:** This is the person that is responsible for the child's welfare e.g. feeding the child, paying school fees, and seeking medical attention when the child is ill. This could be a relative e.g. an uncle/auntie or friend or neighbor

**f) Orphans:** Children 19 years and younger who have lost either their mother or father (single orphan) or both parents (double orphan). The age limit may be different according to different definitions.

**g) Vulnerable children:** Children who are at increased risk of adverse psychosocial, educational, physical, or economic outcomes due to parent suffering from a chronic illness.

### **PART 2: Actual Survey Details**

#### **A) Survey Tools**

The tools for the survey include

- i) Informed consent forms
- ii) Questionnaires

- o Caregiver's Questionnaire
- o Child's Questionnaire
- iii) Caregivers rating of child sheet
- iv) Child observation sheet
- v) Juma/Maria's story book
- vi) Sticks and Matching sheet
- vii) Anthropometric equipment (Tape measure, weighing scale)

## **i) Informed Consent Form**

An informed consent form is a document explaining all relevant study information to assist the study participant in understanding the expectations and requirements of participation in a study. This document is presented to and signed by the study participant.

The OVC informed consent form highlights the purpose of the study, the procedures to be employed, risks and benefits to the participant and/or society, participant's rights, confidentiality statement and contact details.

Before starting the interview it is required that the respondent freely agrees to participate. As mentioned previously, when first identifying the parent/caregiver, it is important to introduce yourself, to be pleasant, to seek a private location for the survey, and to maintain a professional demeanor.

Introduce yourself by reading the introductory statement to the participants. Read the confidentiality and informed consent statement to the parent/caregiver. Obtain consent from the parent/caregiver and assent from the child. Confirm the participant's response to participate in the interview or not by ticking "YES" or "NO" in the spaces provided, and by asking the participant to sign or put a thumb stamp. For all children, obtain proxy consent from the parent/caregiver.

Certify that the parent/caregiver and child have given consent/assent by ticking and signing or putting a mark in the respective space provided.

If after talking with the parent/caregiver, s/he declines to participate in the survey or to have the child participate, determine if it is because of poor timing or some other temporary reason (for example, the parent/caregiver is too busy at that moment), and suggest finding an alternative time to meet. If, by contrast, the parent/caregiver understands the objectives of the survey and specifically declines to participate, even after all attempts to persuade them including seeking intervention of the DSS team, *you must respect his/her wish*. If the parent/caregiver does not consent or child declines to participate, please tick "No" and end the interview.

## **ii) Questionnaires**

This study consists of two types of questionnaires:

- Caregiver's Questionnaire
- Child's Questionnaire

## **a) Background to the Questionnaires' Domains**

The following details provide the background information behind the questions asked in the two questionnaires. The information is intended to explain the issues that the questions we will ask should cover. Although it has been found that children are at risk of the issues covered, the behaviour or issues discussed may not be important in our target communities. The purpose of this research is to find out what children in our target communities are experiencing, and whether these experiences differ from the experience of children in other communities.

### ***Food security***

**Goal:** Child has access to sufficient food to eat to sustain an active and healthy life at all times of the year.

**Rationale:** Food security is the ability of the household or institution to obtain enough food for the child to eat at all times when hungry. Food access is associated with the health and overall wellbeing of the child and it provides one index of the overall capacity of the household to provide safe and secure care. As with many factors in a child's life, food security interacts with other domains. Hungry children have trouble attending and learning in school. Hungry children may steal food and be labeled as delinquent (e.g., Foster, Makufa, Drew, Mashumba, & Kambeu, 1997.)

Most investigators emphasize nutrition and food security as an area of significant vulnerability. Makame and colleagues (Makame, Ani, & Grantham-McGregor, 2002) reported that orphans talk about lack of food at home, about being hungry at school, and about going to bed hungry. Almost 25% of older orphans interviewed in Zimbabwe for one study reported that they do not get enough food to eat several times a week or more (Gilborn, Nyonyintono, Kabumbuli & Jagwe-Wadda, 2001.) Food supplementation is frequently an aspect of core services provided by local services; but food supplements can be inconsistent and vulnerable to changes in funding. Many children do not have adequate food across seasons.

### **Shelter: How the child lives**

**Goal:** Child has shelter that is adequate and safe; the way the child lives is similar to others in the household and community.

**Rationale:** Shelter is the physical place or structure of the home or institution where the child lives permanently as well as the extent to which the structure provides security, cover, lodging, and protection from weather. In some situations, a child lives in a structurally sound house, but her or his sleeping situation may not be adequate (he or she may sleep on the floor without beddings, in a garage, or live in other unsuitable ways). This domain represents how the child lives.

There is evidence that orphaned children live in poorer households and in less adequate main dwellings (Nyamukapa, Foster, & Gregson, 2003); these studies use employment and income of head of household as indicators. This seems to be especially true of paternal

orphans (Case, Paxson, & Ableidinger, 2004.) Orphans describe themselves as less content with the conditions under which they live than non-orphans in the same community (Atwine, Cantor-Graae, & Bajunirwe., 2005.) Some children are discriminated against by other family members and hence isolated because they are HIV-positive or are not part of the immediate biological family or for any other reason. One result may be that the OVC receives less attention, financial support, or accommodation relative to other family members, who, for example, might sleep in a bed with a mattress while OVCs are sleeping on the floor or in an outside area. In some extreme cases, orphaned children may not have a permanent home where they live. For example, orphans and vulnerable children could be staying in different households at different times. Sometimes a child might not be having a place (room, bed, or space) to sleep within the homestead and as such, they go elsewhere else for the night.

### **Care**

**Goal:** Child has adult(s) who provide consistent love and support.

**Rationale:** Care is defined as adequate when there is an adult (parent or caregiver) who provides a child with safe, stable, and nurturing environment. It is widely acknowledged that the most important aspect of childhood is the sense of physical safety and psychological security provided by the adult or adults who are involved in the child's life. Questions thus focus upon the guardian's availability; and caring behaviour extended.

The provision of loving care may be as or even more important for child wellbeing as food security (e.g., Bowlby, 1980, 1982; Suomi, Collins, Harlow, & Ruppenthal, 1976). In studies in Western countries, the failure of loving care, neglect as well as abuse, are associated with negative child outcomes, including learning, affective disorders, such as depression, and behavior disorders, such as delinquency.

### **Abuse**

**Goal:** Child is safe from any abuse, neglect, or exploitation

**Rationale:** Many reports emphasize the high incidence of child abuse and maltreatment of orphaned children. Maltreatment, as it is used here, includes lack of care, being provided less food than others in the household, young children being put to work, children being forced into inappropriate work, being physically beaten by household members, being beaten by others and not protected by adults in the household, and being sexually abused.

In a preliminary analysis of a community study based in Tanzania, the data revealed that about 76% of orphaned children reported being hit, kicked, or beaten at home (Whetten et al., 2007, personal communication.) Despite these reports about the high incidence of child abuse, there are few published studies and almost no models for intervening with child maltreatment in this population. It is apparent that without the safety provided by a loving and committed caregiver, girls, in particular, are more vulnerable to exploitation, such as coercive and commercial sex and unwanted and early marriage and pregnancy (Gilborn, 2002); "under age girls are married to get the bride price" (interview with community member in Foster et al., 1997.) Community members interviewed by the Foster group

(Foster, Shakespeare, Chinemana, Jackson, Gregson, & Marange, 1995) also reported that people take advantage of orphaned children as laborers.

### **Physical Wellness**

**Goal:** Child is feeling healthy.

**Rationale:** Mortality and morbidity are closely related to indices of poorer nutrition, malnutrition, and an increased prevalence of stunting and wasting among orphans (Lindblade, Odhiambo, Rosen, & DeCock, 2003, Mishra, Arnold, Otieno, Cross, & Hong, 2005),

Multiple studies provide evidence for higher morbidity among orphans compared to non-orphans in the same community (Bledsoe, Ewbank, & Isiugo-Abanihe, 1988; Ori, 1995) as well as higher mortality (Forsyth, Damour, Nagler, & Adnopo, 1996.) although there are studies and locations, in which the association does not hold up (e.g., Kenya, Lindblade et al., 2003.) The Antwine group reported that 34.4% of orphans answered “yes” to “Does your stomach hurt?” versus 9.1% of non-orphans. There is evidence that children of parents with HIV/AIDS or who have been orphaned by HIV/AIDS are less likely to access and use available medical care for prevention and treatment of illnesses, including but not limited to drug therapy for pediatric HIV/AIDS (e.g., Mishra et al., 2005.) The higher morbidity found among orphaned children (Bledsoe et al., 1988) is consistent with this finding. For example, children in Kenya who were ill with diarrhea were less likely to receive medical care for their illness when their parents were HIV-positive.

### **Affect/Behaviour**

**Goal:** Child is happy, content, has a generally positive mood, and has hope for a good life. Child also has good relations with siblings, peers and neighbours.

**Rationale:** Orphans (especially due to HIV) and the adults who care for them are at very high risk for depression, trauma-related symptoms, having poor self-esteem, anxiety, and frank suicidal thoughts. The grief and losses related to HIV/AIDS is, no doubt, chronic and affects multiple aspects of the child’s life.

Several studies in Africa, in particular, support the focus on the emotional life and needs of children orphaned and made vulnerable by this disease. Children who are orphans are more likely to be depressed (Birdthistle, 2004; Makame et al., 2002; Forsyth et al., 1996), to “worry about many things, to be fearful of new things or situations, do things alone, and appear unhappy, tearful, and miserable, distressed” (Poulter, 1997.) In Uganda, orphaned children were more likely to wish they were dead than non-orphans (12.2% versus 2.7%); and they indicated that they thought their life would be bad (32.5% versus 5.5% of non-orphans; Atwine et al., 2005.) In a 4-year longitudinal study in 5 counties, including three countries in Africa, preliminary analysis of a cohort in Tanzania show that a high rate of child trauma was reported by guardians and children themselves (32 to 54%% respectively). They reported five or more traumatic events, such as being beaten or having a family member die, respectively. Orphaned children studied in South Africa were more likely to view

themselves has not having a good friend (Cluver & Gardner, 2006), and this is consistent with the low self-esteem and having little hope for a good future.

### **Access to Education**

**Goal:** Child is enrolled in and regularly attends school.

**Rationale:** There are conflicting reports about the access to education for orphans in low resource countries. Attending and completing school increases your prospects for job security later in life.

Makame and group (2002) showed that orphans were more likely to be out of school (20% versus 2% in this study.) Another study indicated that orphans were 13% less likely to be in school and that double orphans were the most likely to be disadvantaged in this way (Monasch, R., & Boerma, 2004.) Other studies support these findings (Muller & Abbas, 1990; Desmond, Gow, Badcock-Walters, Booysen, Dorrington, & Ewing, 2002; Case et al., 2004.) However, other studies find limited effects on school attendance (Kamali, Seeley, Nunn, Kengeya-Kayondo, Ruberantwari, & Mulder, 1996; Nyamukapa et al., 2003.) Maternal orphans, for example, are less likely to be enrolled in school. Other research indicated that orphans were less likely than non-orphans to be at their proper educational level, with a stronger effect at younger ages (Bicego, Rutstein, & Johnson, 2003.) Others at risk of low educational enrollment are orphans in poor households and those who live in poor households and are not orphaned but who have experienced adult death in the extended family (Ainsworth & Filmore, 2002.)

### **b) General instructions in the questionnaires**

Be sure to read/know all the instructions given per question before asking the child so that you ask the question the right way.

The questions written in CAPS are **NOT** meant to be asked to the respondent but the Field Worker is meant to fill in the details themselves.

Instructions to field workers are written in **CAPS** and **BOLD**. Field worker should do as required in the instruction.

There are three parts to the question, **the question, coding categories** and **skips**.

FW: Ask the question and look for the appropriate response from the list of coding categories. On the list of coding category, you are required to circle the appropriate response or write the appropriate response.

Check whether there is a skip indicated after a particular response with an arrow. If there is a skip, go to the question indicated after the arrow.

In some questions, you are required to circle all the responses given, therefore, circle as appropriate. In other instances, you are required to obtain only one response. If the respondent gives more than one response, probe for the most important. Two answers for such a question will not be accepted.

Often, you are not required to read the list/prompt the respondent but ask the respondent to tell you. If the question allows more than one response, probe by asking...what else? Mhu? etc

### **c) General guidelines for completing the questionnaires**

As you complete the questionnaires, there are several things you should keep in mind:

- Where possible, please use blue ink rather than black ink, as your marks will be clearer to the data entry staff.

Make sure that your marked responses are clear, and that there is no ambiguity about what the response was. If you circle the number which indicates the correct response, be careful that you do not accidentally circle two adjacent responses.

- Make sure that you distinguish a response of "Don't know" vs a question that the respondent refuses to answer. If the respondent declines to answer the question, and there is no category for "Declined/No response" *leave the answer blank or write in No Response*, do not mark "don't know".
- In cases when the response is "Other", remember to write in the response AND circle the number indicated for "Other"/write the number representing "Other" in the box provided.
- Some questions specify that more than one answer is requested, while others request that the respondent select one, and only one answer (for example, the 'Most important reason' for not seeking care. Be sure to follow all instructions indicated in the question.
- Some questions, particularly at the start of each section, are broad questions intended to identify those individuals for whom more detailed questions are relevant versus those who are not. Pay close attention to the last column which indicates what question to skip to, following specific responses. Failing to follow the identified skips can cause confusion for both you and the respondent. If skips are taken that are not required, essential information can be missed for that respondent. If you realize you have made a mistake and skipped a section incorrectly, return to that section to repeat it. As a general rule, everyone makes mistakes. So it is quite possible that you might make an error at some point. If you make a mistake, or if you realize that you are unsure about a question, make the correction by crossing out the incorrect response with an "X" and write your code. You may then circle the correct response. In cases where you have questions, make a note of it in the margins, and go over the questionnaire with the team leader.
- In some cases, if answers seem clearly inconsistent, for example, if a respondent states that they never went to school in response to one question, and that they are still in school in another question, ask the respondent to clarify, and make sure that you have accurately completed the questionnaire. Other than in such obvious instances of inconsistency, however, do not correct the respondent for small inconsistencies e.g. emotional well-being. If the respondent states for example, in reply to a question that they "are happy all the time", but they state that they are "often unhappy" in another question, continue with the survey without stopping.

◎Remember to provide comments if anything unusual occurred during the interview (e.g.: others were present in the room, interview was interrupted etc., child broke into tears during the interview, child was hesitant to answer questions (e.g. at the beginning), etc.).

### **d) Checking completed questionnaires**

It is the responsibility of the interviewer to review each questionnaire when the interview is finished. This review should be done before you leave the household so that you can be sure every appropriate question was asked, that all answers are clear and reasonable, and that your handwriting is legible. Also check that you have followed the skip instruction correctly. You can make minor corrections yourself (e.g. the respondent mentioned an answer but you forgot to circle). But any serious errors should be clarified by the respondent. Simply explain to the respondent that you made an error and ask the question again. Do not recopy questionnaires. As long as the answers are clear and readable, it is not necessary that the questionnaire itself be neat. Every time you transcribe the answers to a new questionnaire, you increase the chance of an error. Record all the information on the questionnaires you have been provided. Anything out of the ordinary should be explained either in the margins near the relevant question or in the comments section at the end. These comments are very helpful to the field editor and team leader/supervisor and in checking questionnaires. Comments are also read in the office and used to resolve problems encountered during data entry.

### **1. Caregiver's Questionnaire**

The caregiver's questionnaire is meant to be administered to the parent/caregiver of the child.

Ensure privacy while administering the questionnaire to the parent/caregiver.

#### **Specific Details about the Caregiver's Questionnaire**

The questionnaire consists of 8 sections

Section 1: Background information

Section 2: Schooling details

Section 3: Health status and health seeking behaviour

Section 4: Food intake

Section 5: Involvement in employment/income generating activities

Section 6: Household Relationships

Section 7: General comments and end of interview

Section 8: Office/field check details

#### ***Section 1: Background Information***

This section is expected to record/collect background information of the study including the time and date of the interview, the field worker's code, the identification number (ID) of the child, the child's household ID, the location ID and details of the household head. This section is also expected to establish where the child currently lives. It is also expected to record the respondent's details including the relationship to the child and details about the primary caregiver of the child.

Most of the questions in this section are not meant to be asked to the respondent but the field worker should record the information themselves from the assignment sheet and confirm with the respondent whenever necessary.

#### ***Section 2: Schooling details***

This section is expected to update the schooling status of the child. In this section, we want to know the schooling status of the child and the regularity of attendance.

This information will be used in the describing/determining welfare of the child.

### ***Section 3 Health status and health seeking behavior***

This section is expected to collect data on the health status of the child at the time of the interview or within the last two weeks of the interview. We also want to collect data on the health seeking for the illness or for the most recent illness in the last one year for those who are not ill or were ill in the last two weeks. If there was no illness, in the last two weeks or in the last one year, indicate no illness and circle '1'.

In this section, in some questions, more than one answer is possible. FW is asked not to read the list but to ask the question and circle all the responses mentioned. In this case, FW should not read the list but probe by allowing the respondent to continue mentioning more e.g. by asking, "What else...?" "Anything else...?" "Mhu...?" etc.

In other questions, the question asks for the Main/most important (say main/most important reason), in this case, FW should ask the respondent the main reason. If the respondent says more than one main reason, FW should probe to get the main reason.

This information will be used in describing/determining the welfare of the child.

### ***Section 4: Food intake***

In this section, we want to have an idea of the nutritional status of the child; whether the child eats enough food. This information will be related to the information from the anthropometric measurements carried on the child and will be used in describing the child welfare.

Ask for each meal separately for each day e.g. yesterday, did (NAME) have breakfast (response), and Lunch (response) and Supper (response). Then ask for yesterday but one....the questions yesterday ... yesterday but one, did (NAME) have breakfast (response), and Lunch (response) and Supper (response).

### ***Section 5: Involvement in employment/income generating activities***

In this section, we want to capture child abuse/exploitation. We are asking if the child is involved in any activity that is meant to earn income for him or the family and how the income earned is used. This information will be used to describe the welfare of the child.

### ***Section 6: Household Relationships***

In this section, we want to know the child co-residence; whom the child lives with, whether the child has blood siblings and whether there are other children in the household where the child lives. These may affect the emotional wellbeing of the child. We also want to determine the parental survivorship. This may also have implications on the wellbeing of the child.

Be sure to note the instructions and the skips in this section as asking the respondent questions that you should already know the answer e.g. if the biological mother lives in the

same household with the child or where the mother lives (information you already obtained in the background) may irritate the respondent.

Also note that remembering some issues e.g. death of a loved one may provoke emotional disturbance to the respondent. Be sure to utilize appropriate comforters if this happens.

### ***Section 9: General comments and end of interview***

Please note any peculiarities in the study under this section or anything that happened during the interview that may be important e.g. interruptions. Also note in this section any peculiar behaviour of the respondent e.g. being violent, being withdrawn, refusing to answer some questions, being emotionally disturbed etc.

Note the end time in this section and the result of interview. The result should be the end result before submitting the questionnaire to the team leader. If you have a call back, do not fill the result until you have done the call backs and determined the end result.

### ***Section 10: Office/field check details***

This section will be completed at the office by the data editor, team leader, supervisor or the data entry clerk. You as the interviewer are not expected to fill this section.

## **2. Child Questionnaire**

The child questionnaire is meant to be administered to the target child age 6-14 years.

In this questionnaire, it is very likely that the child might provide you with details regarding their personal lives. Though it is important to let the child open up to you, as an interviewer you must be mindful of time constraints and issues of confidentiality. The child might also ask your opinion in how to deal with a personal problem or with certain circumstances. Since it is very important that you remain neutral while conducting the survey, you might have to dissuade the child from asking your opinions or personal questions by telling them that as an interviewer you are interested in only their thoughts and feelings. If the child becomes visibly upset or emotional to the point where the interview cannot be completed, you can offer the child assistance by providing a referral for counseling.

These questions refer to the child's emotional well-being or level of happiness or frustration with their life. We are interested in their overall feelings or emotions in general. The respondents are asked how often they would say the sentiment expressed in each question happens to them. The response categories are: Never, sometimes, often and always. The 'don't know' category should not be read aloud.

Give time for the respondent to think about the questions. If the child does not know how often something happened, record 8. However, if this is a common response in an interview with a certain child, it may be that child is not willing to give answers and you may need to reassure the child or ask the question again in a different way. This may also be the case for a non response. Note that if a child refuses to answer a question, this is not a don't know but rather it is a no response. If a respondent refuses to answer a question, try to persuade him/her, and or reassure her/him, but if they really do not want to answer, this should be coded '9'. However, code '9' has not been provided so if this happens write '9' beside '8' and circle it.

Note that most of the time you will be referring to in the last one, two weeks. This is the recall period we expect the child to use in answering the questions. However, for some of the questions, we are asking how often something happens generally without giving a time frame. In this case, we have not included it in the first sentence before the set of questions.

Note that you are expected to read the first sentence before each set of questions...  
e.g. "How often would you say that..."

...You Cry?

...You play with other children?

Note that we want the rating each of the questions and not Yes or No, so do not ask the questions in a way they elicit a yes or no response. This may be overcome by putting the first sentence before each question as described above.

Be sure to read/know all the instructions given per question before asking the question so that you ask the question the right way.

**Please read all questions and corresponding coding categories to the child and circle only one answer.**

### **Specific Details of the Child Questionnaire**

The questionnaire consists of 12 sections

Section 1: Background information

Section 2: Freedom from exploitation

Section 3: Affect/ behavior

Section 4: Abuse

Section 5: Fears

Section 6: Shelter and care

Section 7: Physical Health

Section 8: Child's Attitude towards school

Section 9: General Questions

Section 10: Anthropometric Measurements

Section 11: General comments and end of interview

Section 12: Office/field check details

#### ***Section 1: Background information***

As in the caregiver's questionnaire, this section is expected to record/collect background information of the study including the time and date of the interview, the field worker's code, the identification number (ID) of the child, the child's household ID, the location ID and details of the household head.

Most of the questions in this section are not meant to be asked to the respondent but the field worker should record the information themselves from the assignment sheet and confirm with the respondent whenever necessary.

#### ***Introduction***

Under the introduction, the field worker is expected to give a brief description of the study to the child and obtain assent from the child to participate in the study. Remember that the

child's participation is voluntary and they should not be coerced to participate by either you or the caregiver.

Note that privacy is very important in administering this questionnaire to the child. Children may not want to talk about themselves while other people are listening. This is even truer in the case of the parent or guardian/caregiver. They may not tell the truth when the parent or guardian/caregiver is present. Seek to interview the child alone. However, if after explaining to the child the importance of having to be interviewed alone the child still insists they want the parent or guardian/caregiver or any one else to be present, allow them to be present.

The field worker is also expected to clearly describe the procedures that will be employed in the interview to the child including the story of Juma/Maria, use of sticks, matching sheet and rating of experiences.

Make sure you describe how you are going to use the story of Juma/Maria during the interview clearly to give context of the things that may happen to the child (just as they happen to Juma/Maria). If the child is a boy, you should use the story of Juma throughout the interview and if the child is a girl, you should use the story of Maria throughout.

Let the child tell the story of Juma/Maria with you but always remember that the primary responsibility of telling the story is yours and not the child's so do not tire the child or spend too much time by asking the child to say what they see all the time...you could start the story and let them participate in the process.

If there is a picture that may not be straightforward e.g. the picture of Juma/Maria seated thinking, be sure to explain to the child what the picture is all about rather than asking the child to describe what the picture shows as they may say different things from what you expect and it may take some time for you to explain to them later.

Ensure too that you describe the purpose of the sticks clearly in rating the frequency of how things happen to the child. Also at this point, use different examples to make sure the child understands the rating. The rating scales range from 1=Never, 2=Sometimes, 3=Often, 4=Always. Make sure that the child clearly understands this scale before proceeding to the next questions by giving examples as indicated in the questionnaire.

### ***Section 2: Freedom from exploitation***

At the beginning of this section, show the picture of Juma/Maria's daily activities and use it to elicit information from the child on what activities they do daily. Indicate activities that the child undertakes on a weekday and those that they undertake on weekend. For the weekend, remember to indicate the day you are referring to on the space provided. Record all the activities in the space provided and code them using the categories indicated that include: food, education, play, chores, rest. Code the activities mentioned where they fit best.

After you get the daily diary of the child, it will be easier to get answers to the questions that follow. In case a child indicate they undertake an activity in the daily diary e.g. going to school and when you ask the question on how often they go to school they say never, be sure to confirm this with the child by probing further.

### ***Section 3: Affect/ behavior***

This section will capture information on happiness, sadness, worries, social relationships, anger and joy. Use the pictures and the story of Juma/Maria to put the questions in this section into context.

In the places you are expected to list what the child says then code, please do so. The qualitative information may be used for further analysis qualitatively. Code the responses in the appropriate category on the list.

#### ***Section 4: Abuse***

In this section, we are looking for information on both physical abuse and sexual abuse. Note that this information may be very personal and you may need to lower your voice or seek more privacy (if necessary while asking these questions). Questions on sexual abuse are even more sensitive and many children would rather not answer them (correctly). Reassure the child of confidentiality and use your tact to elicit information from the child particularly if the child refuses to respond.

#### ***Section 5: Fears***

In this section, we want to capture the child's feeling of security both within the household and within the neighborhood.

In question 5.6, if the child says they have never ran away, the arrow shows that you should skip the following question and go to section 6.0.

#### ***Section 6: Shelter and care***

In this section, we want to capture information on the shelter for the child and howwell they are cared for.

If in the first question (6.1) the child says they do not have a regular place to sleep, this does not mean you skip the question on what they regularly sleep on, you should still ask this question (6.2).

On question 6.3, be sure to give the child some examples of things that other children own e.g. clothes, shoes, toys as you ask the question. In 6.4, group the responses as appropriate.

Read/know all the instructions given for each questions before asking the question to enable you to ask the questions appropriately.

#### ***Section 7: Physical Health***

In this section we want to know how healthy the child feels physically, so we are asking questions on how often they feel ill, pain, fatigue, lack of appetite. These aspects define physical health. Be sure to mention that the pain in 7.2 is not related to being bitten.

#### ***Section 8: Child's Attitude towards school***

In this section we want to know the child's attitude towards school. For those currently in school we want to capture there current attitude. For those not in school but have ever attended, we want to capture their attitude when they were in school. So check the daily diary and/or question 2.1 to know if the child goes to school. If the child ask the child if they have ever attended school and if yes, ask these questions in the past tense e.g. instead of "how

often would you say you enjoy schoolwork”, ask; “how often would you say you enjoyed schoolwork when you were in school” etc.

If child has never been to school, indicate not applicable and skip to 9.0.

In question 8.6, if child says ‘Never’, do not ask the next question but skip to section 9.0. as indicated by the arrow.

### ***Section 9: General Questions***

In this section, we just want to know whether the child has a role model and who that is. Indicate the name of the person in the space provide and the relationship to the child if any (e.g. often children may say they would want to be like their mother or father...so indicate mother or father or friend in the space provided). Ask also for the profession of the person they would like to be like. Ask also the reason they want to be like them 9.2.

### ***Section 10: Anthropometric Measurements***

In this section, we want to obtain objective measures of nutrition of the child. So accuracy is very key in this section. Measure the child’s height and record to the nearest 0.1cm. Measure also the child’s weight and record it in kg to the nearest 0.1kg.

### ***Section 11: General Comments and End of Interview***

This section is meant to record any comments that are related to the interview, for example the behaviour of the child during the interview e.g. if the child cried or was uncooperative etc or the parent/guardian if they were present in the interview, setting of the interview (if it was peculiar...e.g. if there were disruptions), or anything peculiar observed during the interview.

Record also the time the interview ended.

### ***Section 12: Office/Field Check Details***

This section is meant for office checks only and the Field Worker should not fill anything in this section.

### **iii) Caregivers rating of child sheet**

This sheet is meant to be used to rate generally what the caregiver thinks about the child e.g. their general mood, general behavior and performance either in school or at home. This sheet can be self administered if the respondent is literate and comfortable in self administering it. However, read the question to the respondent and probe by using the explanations given in the boxes.

The sheet should be administered immediately after the caregiver’s interview.

### **iv) Child observation rating**

This sheet is to be used to rate the general appearance of the child and the mood during the interview. This is meant to be done by the interviewer after interviewing the child. Be careful not to expose the rating to the child or to the caregiver as they may not be happy we your rating.

#### **v) Juma/Maria's story book**

This book has both the story of Juma and the story of Maria. It has pictures that depict what happens in Juma's or Maria's life. The story and pictures are meant to help you to put the things that may happen to the child (that you are asking the child about) into context and give examples of what happen to other children in the same community. Make sure you use the story and the picture properly to be able to elicit the appropriate responses from them.

The use of the story and pictures may be informed by the age of the child, if the child is able to comprehend more easily, you may spend less time in using these aids.

#### **vi) Sticks and matching sheet**

The sticks are to be used to help the child conceptualize the frequency of how things happen in their lives. The longest stick indicates that it happens always while the shortest stick indicates that it never happens. The matching sheet also has bars with the same size as sticks drawn on a sheet. The sheet is meant to be used to match the actual stick with that on the sheet by the child using examples of what happens in their lives e.g. how often they eat chips. Ensure that the child can match the sticks correctly and correctly relate the size to how often things happen in their lives before you proceed to the questions.

#### **vii) Anthropometric equipment (Tape measure, weighing scale)**

There will be a weighing scale to weigh the weight of the child and a tape measure to measure the height of the child.

#### **Using the anthropometric Equipment**

##### ***Measuring the Height***

1. Start measuring
  - a. Child should remove shoes (socks may remain)
  - b. Let child stand on the floor against a straight surface e.g. a wall with arms at sides
  - c. Take your positions (assistant on Left, Measurer on Right side of child)
  - d. Check the child's feet, sole, calf, knees, buttocks, back, and back of the head – should all be touching the surface
  - e. Check the eye and ear level – line of sight at same level as top of the ear. Tell the child to look straight ahead, support the chin if needed
  - f. Check the shoulders – both should be at same level
  - g. Place the headpiece firmly on top of child's head – push through the child's hair
  - h. Assistant should check all the child's positions again!!
2. Read off the measurement from the scale given

3. Record height in the questionnaire

### *Measuring the Weight*

1. Activate the scale (if not yet done so)
2. Place scale on firm level ground
3. Tell child to remove all but light clothing (shirt, pants, socks only)
4. Activate the scale yourself – until display reads 0.00
5. Tell child to step on scale and keep still
6. Wait for up to 5 seconds – or until the weight displayed is not changing
7. Read weight from the display
8. Record weight into questionnaire

### *Recording measurements*

Record the measurements accurately and clearly:-

- 1 – Single vertical line, no “hat”, no base, no slant
- 2 – No loops e.g.
- 3 – As above
- 4 – Make open 4’s. closed 4’s can look like 9’s!
- 5 – Do not connect the 5 – it may end up looking like a 6
- 6 – Be careful with the loop – make it long enough so it doesn’t look like a 0
- 7 – Cross the 7 – this way it will not look like a 1
- 8 – Make with two separate loops one on top of the other – so it doesn’t look like a 0. Do not leave space between – otherwise it will look like a g
- 9 – Close the loop – otherwise it may look like a 4
- 0 – Put a diagonal line through the 0 for easy identification

## **B) Conducting an Interview**

The fieldworker’s role as an interviewer requires a set of behaviors that assist in performance of this task. The fieldworker (FW) will be asking a set of questions to an eligible respondent. A respondent is a person who is expected to or who responds to a set of questions or a questionnaire. The eligible respondent in this case is the caregiver for the caregiver’s questionnaire and the child for the child’s questionnaire. The interviewer and the respondent are strangers to each other and one of the main tasks of an interviewer is to establish rapport. The respondent’s first impression of you will influence his/her willingness to participate in the project. Be sure that you appear neat and friendly as you introduce yourself. Successful interviewing is an art and should not be treated as a mechanical process. Each interview is a new source of information, so the FW should make it interesting and pleasant. Again, note that you are dealing with a vulnerable group (OVCs) and they are bound to be very sensitive to the questions you ask. **YOU MUST BE VERY TACTFUL WHILE ASKING THE QUESTIONS.**

### **i) Tips for Conducting an Interview**

Below are tips that have shown their effectiveness.

### 1. Developing Rapport and Showing Interest

Seek to establish a balanced relationship between the respondent and yourself as an empathetic friendly individual who is not too different from the interviewee but who is also an independent, unbiased, and honest collector of data. Your appearance, verbal mannerisms, body language, and voice will determine the rapport, starting with the contact that sets up the interview. Your appearance is still another variable that influences rapport and, therefore, the tone of the interview. Dress to fit both the interview and the respondent. Try to live up to the respondents' expected standards. Not doing so might get the interview off to a bad start. This gives the respondent the feeling that you understand the nature of their circumstances and that you are not totally different from the respondent.

### 2. Make a good first impression.

When first approaching the respondent, do your best to make her/him feel at ease. With a few well-chosen words you can put the respondent in the right frame of mind for the interview. Open the interview with a smile and salutation like "Good Morning/Afternoon" and then proceed with your introduction.

### 3. Ask for permission to carry out the interview.

People are usually busy. You have to be tactful to get them to accept to be interviewed. Never adopt an apologetic manner, and do not use words such as "Are you too busy?" or "Would you spare a few minutes?" or "Would you mind answering some questions?" Such questions invite refusal before you start. Rather, tell the respondent, "I would like to ask you a few questions" or "I would like to talk with you for a few moments." "Is it okay for me to continue"? Note that it is not compulsory for the people to be interviewed at your first visit; you may have to come later if the respondent is too busy. Additionally, these are suggestions of ways in which you can convince the potential respondent to agree to talk to you. You should not bombard the potential respondents with all these probes just because they are written here.

### 4. Stress confidentiality of responses when necessary.

If the respondent is hesitant about responding to the interview or asks what the data will be used for, explain that the information you collect will remain confidential, no individual names will be used to identify the respondent in any report that will arise from the study. Also, you should never mention other interviews or show completed questionnaires to other interviewers or supervisors in front of a respondent or any other person.

### 5. Answer frankly any questions from the respondent.

Before agreeing to be interviewed, the respondent may ask you some questions about the study or how she/he was selected to participate in the study. Answer the questions accordingly. The respondent may also be concerned about the length of the interview. If she/he asks, tell her/him the average time it takes to complete the interview.

### 6. Be neutral throughout the interview.

Most people are polite and will tend to give answers that they think you want to hear. It is, therefore, very important that you remain absolutely neutral as you ask the questions. Never, either by the expression on your face or by the tone of your voice, allow the respondent to think that she has given the "right" or "wrong" answer to the question. Never appear to approve or disapprove of any of the respondent's responses. A respondent may ask for your opinion on questions on the questionnaire. Tell him/her that we are interested in his/her opinions.

If the respondent gives an ambiguous answer, try to probe in a neutral way, asking questions such as:

"Can you explain a little more?"

"I did not quite hear you; could you please tell me again?"

"There is no hurry. Take a moment to think about it."

7. Never suggest answers to the respondent.

If a respondent's answer is not relevant to a question, do not prompt her by saying something like "I suppose you mean that... Is that right?" In many cases, she/he will agree with your interpretation of her/his answer, even when that is not what she/he meant.

Rather, you should probe in such a manner that the respondent herself/himself comes up with the relevant answer as suggested in # 5 above. You should never read out the list of coded answers to the respondent when you are not allowed to do so, even if she/he has trouble in answering.

8. Do not change the wording or sequence of questions.

The wording of the questions and their sequence in the questionnaire must be maintained. If the respondent has misunderstood the question, you should repeat the question slowly and clearly. If she still does not understand, you may reword the question, being careful not to alter the meaning of the original question. Provide only the minimum information required to get an appropriate response.

Do not omit questions that you think have been answered by other questions. Answers are expected to all questions, unless instructions call for an item to be skipped or the interviewee refuses to answer. (Refusal can be considered an answer.) If the interviewee gives the answer to a question before it is asked, give it as a statement for the interviewee to affirm.

9. Do not introduce bias in the way you ask the questions

A question is biased when it causes the respondent to answer in a way that does not reflect his/her true positions on an issue. The respondent can be influenced to respond in the way that is directed by the wording of a question.

There can be bias also in the way you pose the contents of the query, in the introduction of your own ideas into a probe, or in your adding certain verbal emphasis or using certain body language. All these can destroy the neutrality that should characterize your presentation.

10. Obtaining Sufficient Answers

You must learn to judge when an answer is sufficient before going to the next question. If the answer is incomplete or vague, you should ensure that the question is understood or draw more out of the respondent to complete the answer. The respondent can answer questions in an open-ended fashion, while you match each answer to one of a set of responses on the interview form. You must be sure that the information given to you by the respondent is sufficient to select one of the answers. On other occasions, a respondent may not have the answer in mind but may need to refer to documents or ask someone else. If this can be done conveniently and within a short time, encourage the respondent to do so. You can also check the accuracy of the answers given by asking for supporting information or documents.

#### 11. Giving the respondent a reason to participate

Some respondents are obliged to cooperate. Such individuals usually understand why they should participate. In other cases, greater explanation may be required. Respondents who are not aware of the importance of the interview and how they can help may not give sincere and well-thought-out answers. Your explanations to them, therefore, are important to the validity of the resulting data. Your understanding of the rationale for the whole project and why some questions are asked will help you in getting the right responses.

The interviewer should help in making the respondent comfortable and capable as a respondent. The success of the interview is very sensitive to question wording and ensuring that the interview takes on a conversational tone. During the interview, it may help to reinforce the respondent with such verbal cues as, *"Un-huh, I see."* *"Let me get that down."* *"I see" (repeat answer).* *"I want to make sure I have that right."* *"It's useful to get your ideas on this."* *"Thanks, it's important to get your opinion on that."* *"I see, that's helpful to know."*

#### 12. Handle hesitant respondents tactfully

There will be situations where the respondent simply says "I don't know", gives an irrelevant answer, acts very bored or detached, contradicts something she/he has already said, or refuses to answer the question. In these cases you must try to re-interest him/her in the conversation. For example, if you sense that she/he is shy or afraid, try to remove her/his shyness or fear before asking the next question. Spend a few moments talking about things unrelated to the interview (for example, her/his town or village, the weather, her/his daily activities, etc.).

If the respondent is reluctant or unwilling to answer a question, try to overcome her/his reluctance, explaining once again that the same question is being asked of other people in the community and that the answers will all be merged together. If she/he still refuses, simply write REFUSED next to the question and proceed as if nothing had happened. If you have successfully completed the interview, you may try to obtain the missing information at the end, but do not push too hard for an answer. Remember, the respondent cannot be forced to give an answer.

#### 13. Do not form expectations.

You must not form expectations as to the ability and knowledge of the respondent. On the other hand, remember that differences between you and the respondent can influence the interview. The respondent, believing that you are different from her/him, may

be afraid or mistrustful. You should always behave and speak in such a way that she/he is put at ease and is comfortable talking to you.

#### 15. Do not hurry the interview.

Ask the questions slowly to ensure the respondent understands what she/he is being asked. After you have asked a question, pause and give her/him time to think. If the respondent feels hurried or is not allowed to formulate her/his own opinion she/he may respond with "I don't know" or give an inaccurate answer. If you feel the respondent is answering without thinking, just to speed up the interview, say to the respondent, "There is no hurry. Your opinion is very important so consider your answers carefully."

At times, a respondent may not understand a question, as indicated either by telling the interviewer so, by not answering, or by providing an answer that seems inconsistent or wrong. When this happens, you should use an appropriate probing technique such as repeating the question, giving an expectant pause, repeat the respondent's reply, or make neutral questions or comments, such as "Anything else?" "Any other reason?" "Any others?" "What do you mean?" "Could you tell me more about your thinking on that?" "Would you tell me what you have in mind?" "Why do you feel that way?" Therefore to maintain the meaning of the questions and not to bias them, do this "probing" with care.

#### 16. Never complete questionnaires without asking the respondent.

The project seeks to get information from the respondent, and not from you, the interviewer. Under no circumstance should you fill questionnaires without conducting an interview. If you missed some questions and it is required that you go back to the respondent, you must go back, rather than guessing answers.

#### 17. Observe an appropriate dress code.

Throughout your work on the project ensure that you are dressed decently. Inappropriate dressing can put off some respondents and negatively influence the respondent's willingness to participate in the project. Your dressing should, as much as possible, take into account the cultural values about dressing in the communities in which you are working. For instance, while one community may regard wearing trousers for women to be inappropriate, another community may be fine with this. Women who are not "appropriately" dressed may also be subjected to verbal and physical abuse in various communities.

#### 18. Language of the Interview

The original questionnaires are all in English, but have been translated to Kiswahili as this is the main common language used in the study communities. One of the key things you should do when you approach a household (and in particular the respondent) to do an interview is to establish the language they are most comfortable with (English or Kiswahili). In the rare case that the respondent does not speak any of these two languages, ask them which language they speak. If you are able to interview in the language they speak, please do so but take precaution to maintain the meaning of the question during translation. However, in some cases, it will not be possible for you to find a language that both you and the respondent speak. In this case, try to find out if the respondent speaks a language which

another member of your team speaks. If so, tell your team leader so that he or she can arrange for that person to conduct the interview.

#### 19. Observe privacy for the respondent

The presence of a third person during an interview can prevent you from getting frank honest answers from the respondent. It is therefore very important that the interview be conducted privately and that all questions are answered by the respondent themselves.

If other people are present explain to the respondent that some of the questions are private and ask to interview them in the best place for talking with him/her alone.

Sometimes asking for privacy will make others more curious, so they will want to listen; you will have to be creative. Establishing privacy from the beginning will allow the respondent to be more attentive to your questions.

If it is impossible to get privacy, you may have to carry out the interview with the other people present. However, try to separate yourself and the respondent from the others as much as possible. Extra effort should be made to gain privacy.

However, if the child desires that the parent/guardian be present during the interview, you should allow this.

### **ii) Important Qualities in an Interviewer**

Apart from the guidelines listed above that can help improve your interviewing skills, there are additional qualities highlighted below which are important to an interviewer.

#### 1. Honesty

Field workers must be honest both to the job and to the respondents that he or she is interacting with. Cheating, in terms of fabricating partial or complete responses is easily detectable. Likewise, the information that you collect from the respondents is strictly confidential and you are not to discuss it with anyone but the field staff (if need be). Even among the field staff, discussing of information should only be for the purposes of clarification and should be anonymous.

#### 2. Interest in the work you are doing

You will produce errors and poor quality work if you find the work to be boring and/or valueless. Furthermore, show of interest or lack of it will affect how the respondent will respond to your questions.

#### 3. Accuracy in reporting and following guidelines

Interviewers should be accurate in both their recording of answers and in the ways that they follow instructions.

#### 4. Be Friendly

Respondents will not agree to participate if you are not friendly with them. Even if you may know a respondent personally, you must try to maintain a professional rapport with them, so as not to distract from your work. They must also respect that you are on the job.

5. Adaptable:

Your respondents are busy people. You may find that a respondent agrees to answer your questions while continuing to do his/her activity. Provided it is manageable, be flexible and try to work around these kinds of constraints. Likewise, if an informant would like you to return at another time to finish the interview, be accommodating to this request.

6. Unprejudiced:

You will be interviewing many different types of people, from different ethnic background, different religious beliefs, different occupations and interests. You must not allow your own background to influence the way in which you conduct the interview. You must respect other people's opinions/views.

7. Be Grateful.

At the end of the interview be sure to thank your respondent for the time he or she took out of his/her day.

### **C) Counseling and referrals**

At any time during the survey, if the respondent expresses distress, *stop the questions immediately*. Counsel the respondent first before continuing with the interview. If you are not in a position to counsel the respondent adequately, remind the respondent that there is counseling available to him/her, and a counselor can be contacted to come to the respondent's house. (Notify the team leader of the issue)

Upon completion of the survey provide ALL respondents with a list of CBOs/institutions supporting OVCs in the community. In cases where respondents report an urgent need for assistance, please discuss this issue with your team leader. An example is if physical or sexual abuse is suspected or reported. A respondent may confide in you during the course of the interview that s/he is a victim of physical or sexual abuse. In these cases, listen to the respondent and allow him/her to express his/her feelings. Tell the respondent that you are glad s/he told you about this, that you believe him/her, and that you are sorry that this has happened to them. Ask the respondent to describe what happened, when the case of abuse happened, and who was involved. You should then tell the respondent that someone else will come to see them. After the interview, you should then report the matter to the team leader who should deal with the case and/or report it to the field supervisor. In other cases, children may display symptoms that suggest physical or sexual abuse. These symptoms include:

●●Visible bruises, cuts or burns

●●Trouble walking

In these cases, please report what you have seen or heard to your team leader.

### **D) Project Organization**

The project has both an office and a field team. Each field team consists of one site leader (supervisor), team leaders, field editors and several interviewers.

Each fieldworker will be required to undergo training, which will consist of a combination of classroom training and practical experience. Before the start of the field work, you should

study this manual carefully along with the questionnaires, writing down any questions you may have. Interviewers can learn a lot from each other by asking questions and talking about situations encountered in practice and actual interview situations. The practical phase of training will involve role-playing in which you practice by interviewing another trainee. One person will be the interviewer and the other will be the respondent.

When in the field, your team leader and/or the site supervisor as well as the office team will continue monitoring your work to ensure that you collect quality data. The team leader may observe some of your interviews to ensure that you are conducting them well, spot check some of the locations in the study area to be sure you interviewed all the eligible households, review completed questionnaires to be sure they are complete and are internally consistent; and meet with each member of the team on a daily basis to discuss performance and assign future work.

### **E) Roles and Responsibilities of field staff**

The field staff will include the following:

- Field interviewers
- Field Editors
- Field team leaders
- Field Supervisors

Each of the team members has a key role to play in the success of the project. The specific roles of each of the team members are given below.

#### **a) Role of and Responsibilities the Field Interviewer**

As already mentioned, the field interviewers play a very central role on the project because he/she is the one who collects information from respondents. The success of this research depends upon the quality of each interviewer's work. Without the hard work and dedication of each interviewer, this project could not happen. And without the carefully collected, accurate data collected by the interviewer, the ability to better understand orphans' needs and to make improvements to programs trying to reach orphans, will be totally lost.

Be attentive during training and ASK QUESTIONS if you do not understand. The responsibilities of the interviewer include the following:

1. Locating the households where the targeted respondent lives.
2. Identifying the targeted respondents from the household
3. Seeking informed consent from the parent /guardian of the child and seeking permission from the child
4. Interviewing the targeted respondents as assigned either in the household or in school
5. Ensuring accuracy and consistency of data
6. Checking completed interviews to be sure that all questions were asked and the responses neatly and legibly recorded
6. Call backs-returning to households that you could not contact, or to complete surveys with the targeted respondents
7. Referring needy respondents to relevant CBOs for support and/or report to team leader extreme needy cases

## 8. Counseling respondents as necessary

*Note: An interviewer can introduce a bias in the data he or she is collecting through:*

1. Missing events either deliberately or unconsciously in households
2. Not asking some questions or bringing questions with no responses
3. "Cooking up" data – filling questionnaires without carrying out interviews

These tasks are described more in detail throughout the manual and during your training.

### **b) Role and Responsibilities of Editor**

1. Undertake duties of a field interviewer to a lesser extent
2. Edit all questionnaires to ensure accuracy and consistency:
  - a. Check for completeness of information
  - b. Are all questions that should be answered actually answered?
  - c. Are interviewers providing explanations where they need to?
3. Ensure accuracy & consistency of data
4. Liaise with team leaders/supervisor on any data quality issues
5. Document all the errors identified with edited questionnaires

### **c) Role and Responsibilities of the Team Leader**

1. Undertake the activities of a field interviewer as described above
2. Do quality checks: Carry out spot-checks on work done by interviewers (5%)
3. Document all mistakes and problems noted and liaise with concerned interviewers to correct the mistakes
4. Assign work and supervise interviewers to ensure they are working according to guidelines
5. Assign call backs as necessary
6. Report refusals and or migration cases to the supervisors
7. Give daily reports on work progress in their teams to the supervisors
8. Deal with difficult field workers and/or report to supervisor
9. Deal with extreme needy cases identified by field workers in their team e.g. abuse cases and as necessary, report such cases to the supervisor
10. Retraining of field workers if need arises

### **d) Role and Responsibilities of Field Supervisor**

1. Undertake the activities of a field interviewer as described above

2. Do quality checks: Edit a sample (5%) of questionnaires edited by the editor to ensure that questionnaires with mistakes are not submitted to the office. May carry out spot-checks on work done by team leaders (1%).
3. Document all mistakes and problems noted and liaise with team leaders to communicate with concerned interviewers to correct the mistakes
4. Coordinate all field activities
5. Provide link between the field and the office
6. Mobilize community support....this will involve linking very needy cases to appropriate support groups and soliciting for support for example, if a child has been abused, it will be the responsibility of the supervisor to analyze the situation and determine the best course of action.
7. Deal with refusals and migration cases/liaise with DSS supervisors concerning refusals or migration cases
8. Retraining of field workers if need arises
9. Deal with difficult field workers and/or report to research officer/assistant
10. Give regular reports on work progress in their sites to research officer/assistant

#### **F) Work Assignments**

Each Fieldworker will be given an Assignment Sheet indicating the respondents he or she is supposed to interview including their location. A sample of the Assignment Sheet is shown below.

Enter your Fieldworker's code on the 2 cells provided and indicate the date when your Team Leader assigned you the work and the date you returned the work. Columns (1) to (13) in the Assignment Sheet will be pre-printed and this will help you locate and identify the eligible respondents. Complete Columns (14) to (16) after completing the interview and or determining the outcome of the interview. The last column should be used to record any remarks. If the ERP column shows that there is no record of schooling for the child but during the interview you identify that the child is in school, record the name and ID of the child in the note book and give this information to the team leader who should inform the site supervisor who should inform the office about this. This would mean that a schooling questionnaire should be administered for the child.

For those interviewing caregivers, you should get the consent for the child to be interviewed and note the whereabouts of the child and inform the team leader so that the child can be interviewed by those dealing with the child questionnaire.

***Making callbacks:*** You should make every effort to conduct interviews with the individuals identified. Make at least 3 informed visits on three separate times of the day or days when trying to obtain an individual interview to maximize the possibility of successfully completing the interview.

Generally, each Assignment Sheet together with the filled questionnaires will only be returned to your Team Leader after you complete the interviews or establish a final result for each of the eligible respondents listed on the Assignment Sheet.

## **Targets**

The field worker is expected to conduct the following number of completed interviews per day:

- a) Field worker completing caregiver's questionnaire only should complete 12 questionnaires
  
- b) Field worker completing child's questionnaire only should complete 5 questionnaires
  
- c) Field worker completing caregiver's questionnaire and child's questionnaire should complete 3 child's questionnaires and 6 caregiver's questionnaires
  
- d) Field supervisors and team leaders should complete 3-4 child questionnaires per day
  
- e) Editors should complete 2 child questionnaires per week (Korogocho) and 1-2 questionnaires per day (Viwandani).

FIELDWORKER'S ASSIGNMENT SHEET																
FIELDW	DATE ASSIGNED	DATE RETURNED	__ / __ / __													
Sno	child_name	childid	childm	ecod	locationid	socialgp	pid	headname	headid	Age	Sex	sc-ds	sc-erp	I-D	R-D	F-Res
1	JOSHUA	G00100	MART	G001	G0010050	G00100500	JACKSON	G001005	11	M		Y				
2	STEPHEN	G00402	LEAH	G001	G0010060	G00100600	JECINTER	G001006	13	M		Y				
3	CAROLIN	G00402	LEAH	G001	G0010060	G00100600	STEVEN V	G001006	10	F	Y	Y				
4	HELENA	G00100	GETR	G001	G0010080	G00100800	DEOS SHI	G001008	13	F						
5	VIVIAN A	G00100800100		G001	G0010080	G00100800	DEOS SHI	G001008	12	F						
6	ZAMZAM	G00102	DEKH	G001	G0010200	G00102000	ADAN MO	G001020	13	F		Y				
7	NUSRA A	G00102	DEKH	G001	G0010200	G00102000	ADAN MO	G001020	8	F		Y				

## **G) Training and Field Supervision**

The training you have undergone that consisted of a combination of classroom training and practical experience will enable you to conduct the interviews as required. Review this manual from time to time, carefully writing down any questions that you have. Ask question at any time to avoid mistakes during actual interviews.

Training is a continuous process. Observation and supervision throughout the fieldwork are part of the training and data collection process. Your team leaders/supervisors/office staff will play very important roles in continuing your training and in ensuring the quality of the data. Team leaders/Supervisors/Office staff will:

1. Observe some of your interviews to ensure that you are conducting yourself well, asking questions in the right manner, interpreting and recording the answers correctly.
2. Make sure that you interviewed the correct respondents
3. Review each questionnaire to be sure it is complete and consistent.
4. Meet each member of the team on a regular basis to discuss performance and give out future work assignments
5. Help you resolve any problems that you might have in finding the assigned households, understanding the concepts in the questionnaire, or dealing with difficult respondents.

The survey director may release from service any interviewer who is not performing at the level necessary to produce the high quality data required to make the survey a success.

## **H) Project Regulations**

Throughout the time you will be working on the project, we will do all we can to provide you with the necessary information, training, tools, and support for you need to do your work effectively and comfortably. In order for the workload to be equally divided and the support equally shared, the following survey regulations have been established and will be strictly enforced.

1. If you accept to work on the project, your presence is required for each day of fieldwork. This is a full-time job for the period that the field work will be conducted, and you should be prepared to work outside the standard working hours.
2. Except for illnesses, any person who is absent from duty during any part of the training or any part of the fieldwork (whether it is a whole day or part of a day) without prior approval from her/his team leader may be dismissed from the project.
3. Lateness in attending the training sessions or arriving late at work will not be tolerated.
4. Throughout the training and the fieldwork period, you are representing the APHRC. Your conduct must be professional and your behavior must be congenial in dealing with the public. We must always be aware of the fact that we are only able to do our work with the

good will and cooperation of the people we interview. Therefore, any team member who is consistently overly aggressive, abrupt, or disrespectful to the people in the field may be dismissed from the project.

5. For the project to succeed, each team must work closely together, sharing experiences and supporting each other. Consequently, any team member who creates a disruptive influence on the team may be dismissed from the project.
6. It is critical that the data gathered during the fieldwork be both accurate and valid. To limit or eradicate inaccurate or invalid data, spot checks will be conducted. Interviewers may be dismissed at any time during the fieldwork if their performance is not considered adequate for the excellence this project demands.

The data are confidential. They should not be discussed with anyone, including your fellow interviewers. Under no circumstances should confidential information be passed on to third parties. Any fieldworker breaking these rules, and therefore, the confidence placed in them by the respondent and the project, will be dismissed

### **I) Supplies required for fieldwork**

Before leaving for the field, you should make sure you have adequate supplies for the day's work. These supplies include the following:

- a. Questionnaires
- b. Informed consent forms
- c. Stamp pad
- d. Juma/Maria's story book
- e. Sticks
- f. Matching sheet
- g. Anthropometric Measurements (Tape measure, weighing scale)
- h. Caregivers rating of child sheet
- i. Child observation sheet
- j. Stationery
- k. Field Worker's Manual
- l. Document Wallet to carry the materials

### **Conclusion**

After reading this manual thoroughly, the field worker will be able to competently perform the field work.