

# Assessing Community Health Programs

## A Participant's Manual and Workbook

Using LQAS for Baseline Surveys  
and Regular Monitoring

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*We dedicate this book to community health workers and local program supervisors working to improve the health of people in communities throughout the world. We also dedicate this book to our mothers—special people in our lives.*

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## TABLE OF CONTENTS

### A Participant's Manual and Workbook: Using LQAS for Baseline Surveys and Regular Monitoring

MODULE ONE: Why should I do a survey and why should I use the LQAS method? Page PM-5

Session 1: Introducing Participants and the Training/Survey page PM-6

Overhead #1—Getting to Know Each Other  
Overhead #2—Purpose of the LQAS Workshop  
Overhead #3—Skills to be Learned  
Overhead #4—Overview of the LQAS Training  
Overhead #5—Abbreviated Training Schedule/Agenda  
Overhead #6—Defining Catchment Area and Supervision Areas

Session 2: Uses of Surveys page PM-14

Overhead #7—What is Coverage?  
Overhead #8—What Surveys Can Show You  
Overhead #9—NGO Program Area: Scenario 1  
Overhead #10—NGO Program Area: Scenario 2  
Overhead #11—NGO Program Area: Scenario 3  
Overhead #12—Using Survey Data  
Overhead #13—Uses of Surveys

Session 3: Random Sampling page PM-21

Overhead #14—Why Random Sample?

Session 4: Using LQAS Sampling for Surveys page PM-22

Overhead #15—NGO Program Area: Scenario 4  
Overhead #16—LQAS Sampling Results  
Overhead #17—The LQAS Table  
Overhead #18—What a Sample of 19 Can Tell Us  
Overhead #19—What a Sample of 19 Cannot Tell Us  
Overhead #20—Why Use a Sample of 19?

Session 5: Using LQAS for Baseline Surveys page PM-28

Overhead #21—Five Supervision Areas and One Indicator  
Overhead #22—LQAS Concepts for Baseline Surveys  
Overhead #23—Five Supervision Areas and One Indicator:  
Participant Worksheet  
Overhead #24—Supervision Area A and Five Indicators  
Overhead #25—Comparing Supervision Areas A, B, C, D, and E

**MODULE TWO: Where should I conduct my survey?**

Page PM-33

**Session 1: Identifying Interview Locations**

page PM-34

Overhead #1—Identifying Locations for Interviews
Overhead #2—List of Communities and Total Population for a Supervision Area
Overhead #3—Calculate the Cumulative Population
Overhead #4—Calculate the Sampling Interval
Overhead #5—Random Number Table
Overhead #6—Identify the Location of Each of the 19 Interviews in a Supervision Area: Work Sheet
Overhead #7—LQAS Sampling Frame for a Supervision Area

**MODULE THREE: Whom should I interview?**

Page PM-41

**Session 1: Selecting Households**

page PM-42

Overhead #1—How to Assign Numbers to Households
Overhead #2—Situation 2: Household List Not Available: Size About 30
Overhead #3—Situation 3: Household List Not Available: Size Greater Than 30
Overhead #4—Group of 27 Households Numbered for Random Selection of 1 Household

**Session 2: Selecting Respondents**

page PM-46

Overhead #5—Rules for Identifying Respondents
Overhead #6—Household Composition Scenarios

**Session 3: Field Practical for Numbering and Selecting Households**

page PM-51

Overhead #7—Process for Field Practical
---

MODULE FOUR: What questions do I ask and how should I ask them? Page PM-52

Session 1: Reviewing the Survey Questionnaires page PM----

No overheads

Session 2: Interviewing Skills page PM-53

Overhead #1—Why Interviewing is Important  
Overhead #2—Interview Etiquette  
Overhead #3—Effective Interviewing Techniques

Session 3: Field Practical for Interviewing page PM---

No overheads

Session 4: Planning for the Data Collection/Survey page PM-56

HANDOUT - Survey Checklists

MODULE FIVE: What do I do with the information I have collected during the baseline survey? Page PM-59

Session 1: Fieldwork Debriefing page PM-60

Overhead #1—Status Report on Data Collection from the NGO

Session 2: Tabulating Results page PM-61

Overhead #2—Result Tabulation Table  
HANDOUT— Tabulation Quality Checklist

Session 3: Analyzing Results page PM-65

Overhead #3—Summary Tabulation Sheet for Baseline Surveys  
Overhead #4—The LQAS Table  
Overhead #5—Defining Program Goals and Annual Targets  
Overhead #6—Monitoring Targets and Average Coverage Over Time: In a Catchment Area  
Overhead #7—How To Analyze Data and Identify Priorities Using the Summary Tables  
Overhead #8—Baseline Survey Report Format  
Overhead #9—Methodology  
Overhead #10—Main Findings  
Overhead #11—Action Plans/Goals/Coverage Targets for Key Indicators

MODULE SIX: What do I do with the information I have collected during regular monitoring?

Page PM-74

Session 1: Fieldwork Debriefing

page PM-75

Overhead #1—Status Report on Data Collection from the NGO

Session 2: Tabulating Results

page PM-76

Overhead #2—Result Tabulation Table  
HANDOUT—Tabulation Quality Checklist

Session 3: Analyzing Results

page PM-80

Overhead #3—Summary Tabulation Sheet for Regular Monitoring  
Overhead #4—The LQAS Table  
Overhead #5—Defining Program Goals and Annual Targets  
Overhead #6—How to Identify Priority SAs Using the Summary Tables During Regular Monitoring  
Overhead #7—Using LQAS to Assess One Indicator Over the Life of a Project  
Overhead #8—Monitoring Targets and Average Coverage Over Time: In a Catchment Area  
Overhead #9—How To Analyze Data and Identify Priorities Using the Summary Tables  
Overhead #10—Monitoring Survey Report Format  
Overhead #11—Methodology  
Overhead #12—Main Findings  
Overhead #13—Action Plans/Goals/Coverage Targets for Key Indicators

LQAS Table: Bring This Table With You to Use in the Field or for Easy Reference

Page PM-91

## MODULE ONE

### Why should I do a survey and why should I use the LQAS method?

Session 1: Introducing Participants and the Training/Survey

Session 2: Uses of Surveys

Session 3: Random Sampling

Session 4: Using LQAS Sampling for Surveys

Session 5: Using LQAS for Baseline Surveys

## Getting to Know Each Other

1. What organization are you from?
2. What is your position/what do you do?
3. What is your interest in doing surveys?
4. What kind of experience do you have with surveys?



## Purpose of the LQAS Workshop

- Ø Train participants in how to conduct surveys to collect data for establishing baselines and for regular monitoring.
  
- Ø Train participants in how to analyze data to identify priorities for improving program coverage.

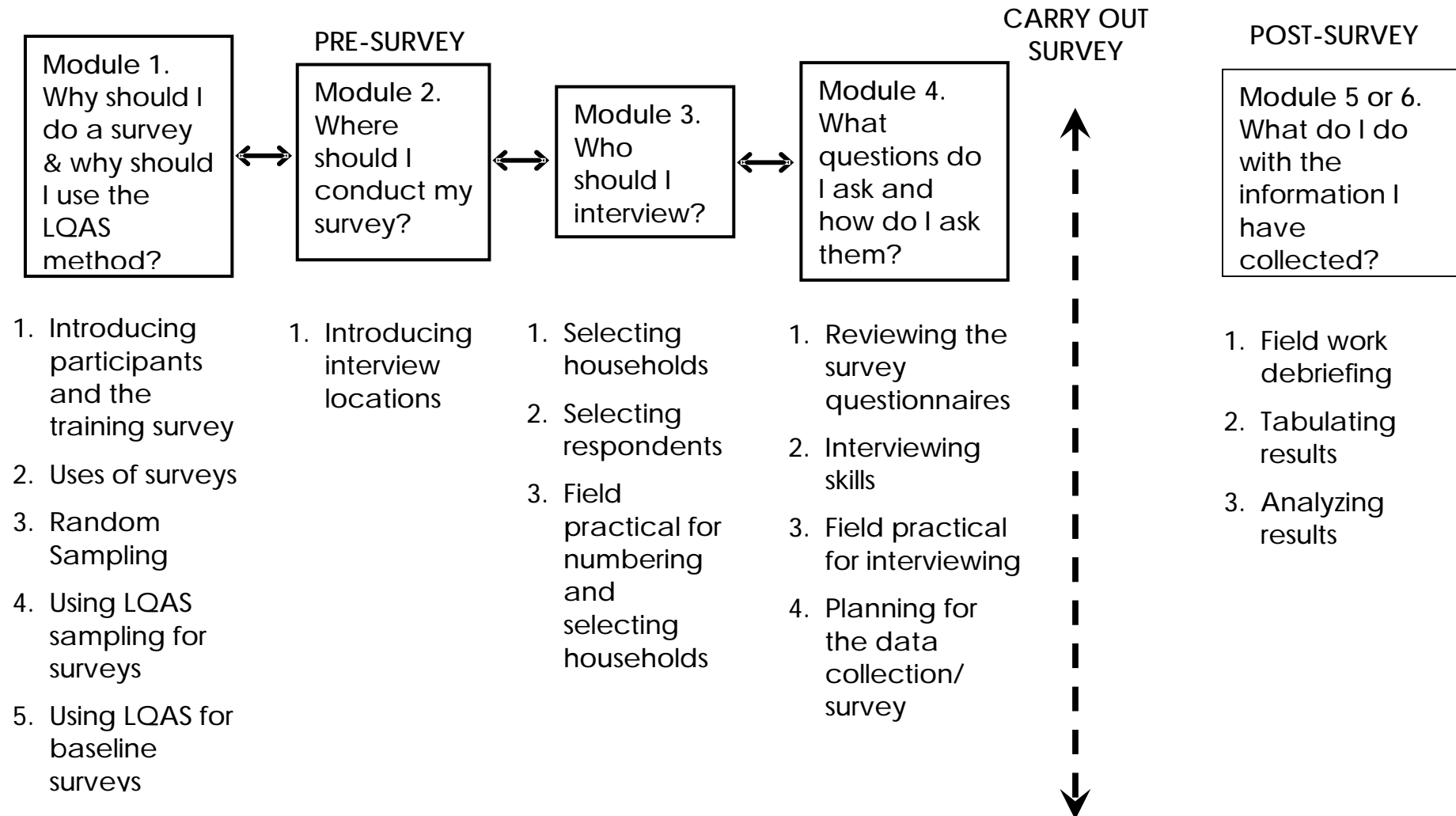
## Skills to Be Learned

Ø LQAS Sampling Methods

Ø Interviewing Techniques

Ø Data Tabulation and Analysis for Program Improvement

## Overview of the LQAS Training



## Abbreviated Agenda for Modules 1-4: Sampling and Data Collection Workshop

### Day 1

#### Morning

- Opening and Introductions
- Uses of Surveys
- Random Sampling
- Using LQAS

#### Afternoon

- Using LQAS continued
- Identifying Interview Locations – communities
- Selecting Households

### Day 2

#### Morning

- Selecting Respondents
- Field Practical for Numbering and Selecting Households

#### Afternoon

- Review and Discuss Field Practical
- Review Survey Questionnaires

### Day 3

#### Morning

- Review Survey Questionnaires cont.
- Interviewing Techniques

#### Afternoon

- Field Practical for Interviewing

### Day 4

#### Morning

- Review and Discuss Field Practical
- Improving Interviewing Skills
- Develop Final Plans for Data Collection

#### Afternoon

- Develop Final Plans for Data Collection cont.
- Workshop Certificates Awarded and Closing

## Abbreviated Agenda for Module 5 (Baselines): Tabulation and Data Analysis Workshop

### Day 1

#### Morning

- Opening and Welcome Back
- Field Work Debriefing
- Lessons learned During the Data Collection
- Agreement on Correct Answers on Questionnaires
- How to Use the Tabulation Tables

#### Afternoon

- Calculating Average Coverage and its Importance
- Two Exercises: Using the Tabulation Tables
- Begin Tabulation in Stages

### Day 2

#### Morning

- Continue Tabulation in Stages

#### Afternoon

- Continue Tabulation in Stages

### Day 3

#### Morning

- Continue Tabulation in Stages

#### Afternoon

- Continue Tabulation in Stages
- How to Analyze LQAS Data and Identify Priorities
- Preparing a Baseline Report
- Next Steps and the Future

Module One

Session 1

Alternative Overhead 5 cont.

## Abbreviated Agenda for Module 6 (Monitoring and Evaluation): Tabulation and Data Analysis Workshop

### Day 1

Morning

- Opening and Welcome Back
- Field Work Debriefing
- Lessons Learned During the Data Collection
- Agreement on Correct Answers on Questionnaires
- How to Use the Tabulation Tables

Afternoon

- Calculating Average Coverage and its Importance
- Reviewing Performance Benchmarks for the Project
- Two Exercises: Using the Tabulation Tables
- Begin Tabulation in Stages

### Day 2

Morning

- Continue Tabulation in Stages

Afternoon

- Continue Tabulation in Stages

### Day 3

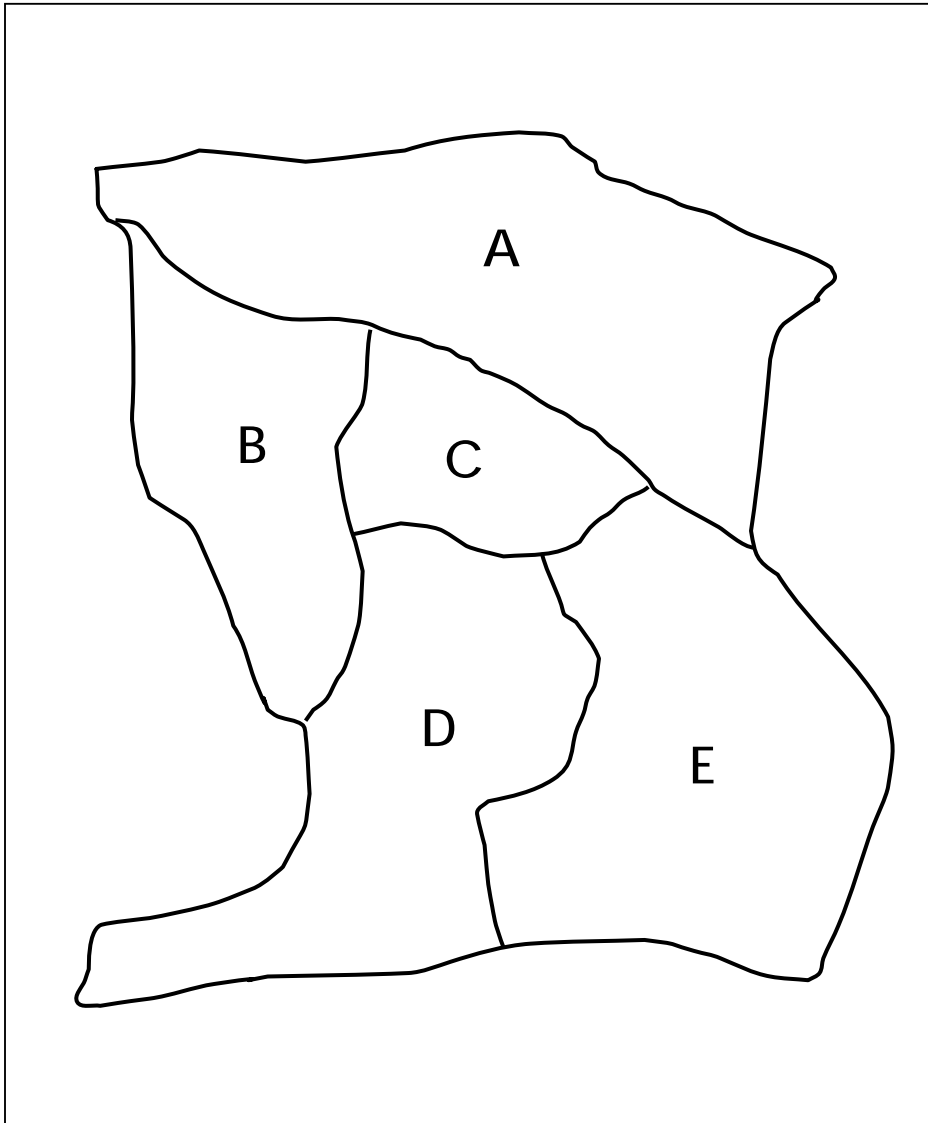
Morning

- Continue Tabulation in Stages

Afternoon

- Continue Tabulation in Stages
- How to Analyze LQAS Data and Identify Priorities Using Average Coverage and Performance Benchmarks
- Preparing a Monitoring and/or Evaluation Report
- Next Steps and the Future

## Defining Catchment Area and Supervision Areas



Together, A, B, C, D, and E represent the Catchment Area,

A, B, C, D, and E represent 5 Supervision Areas.

## What is Coverage?

An important use of surveys  
is to measure coverage.

Ø What is coverage?

Ø Why is it important to know about  
coverage?



## What Surveys Can Show You

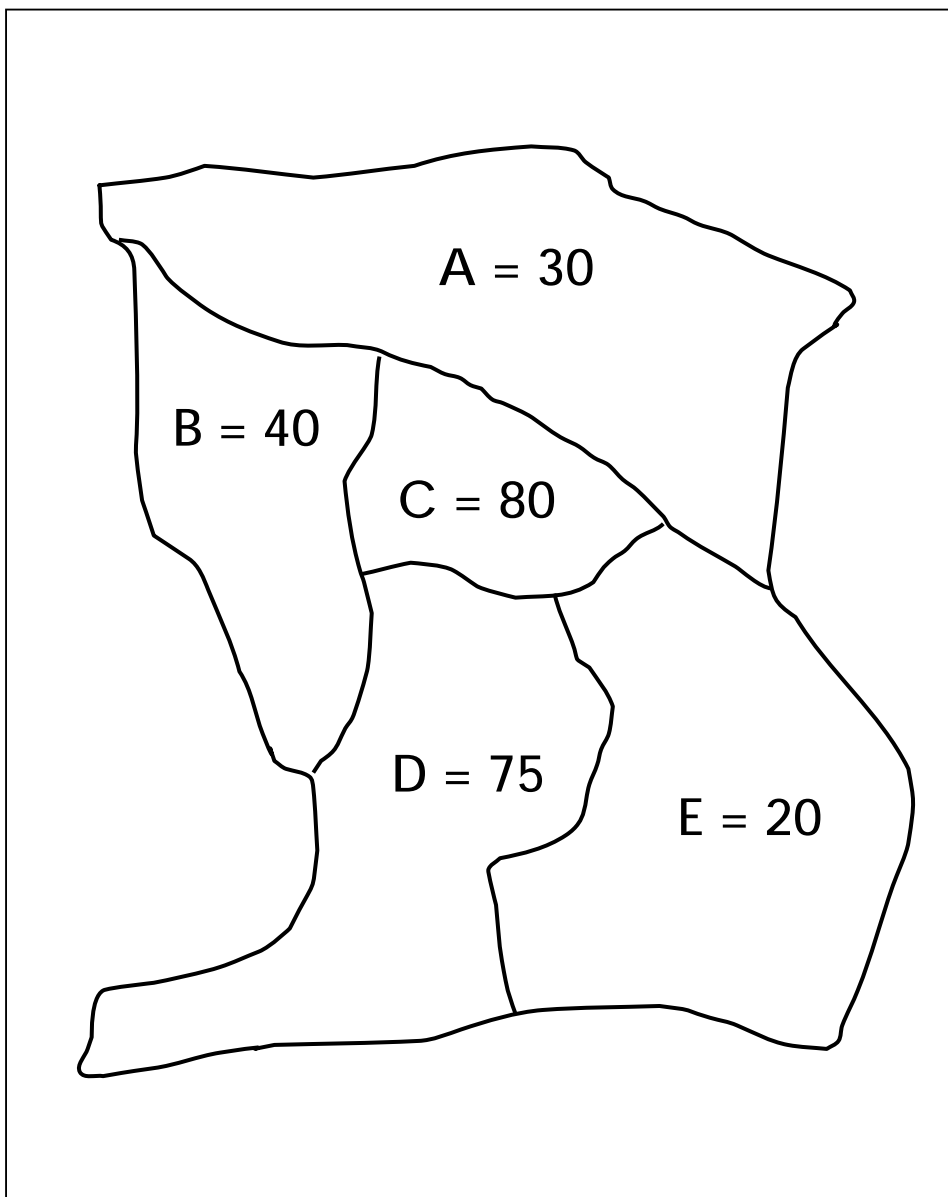
Surveys can help you identify the level of coverage of the program area as a whole, AND if there are:

- Ø large differences in coverage regarding health knowledge and practices among supervision areas
  
- Ø little difference in coverage regarding health knowledge and practices among supervision areas

## NGO PROGRAM: Scenario One (1)

Supervision Areas: A - E

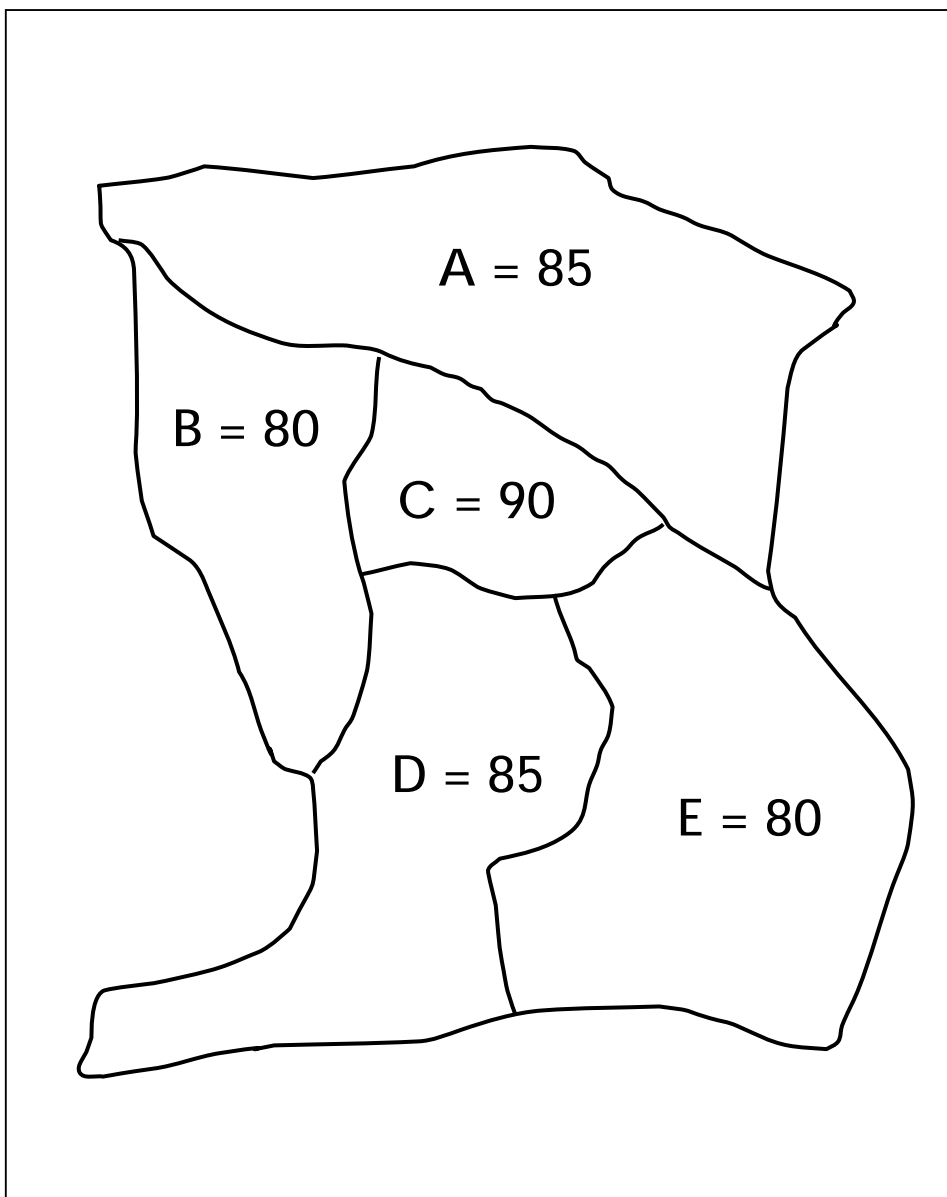
Indicator: Percent of women (15-49) who know 2 or more ways to prevent HIV transmission.



## NGO PROGRAM: Scenario Two (2)

Supervision Areas: A - E

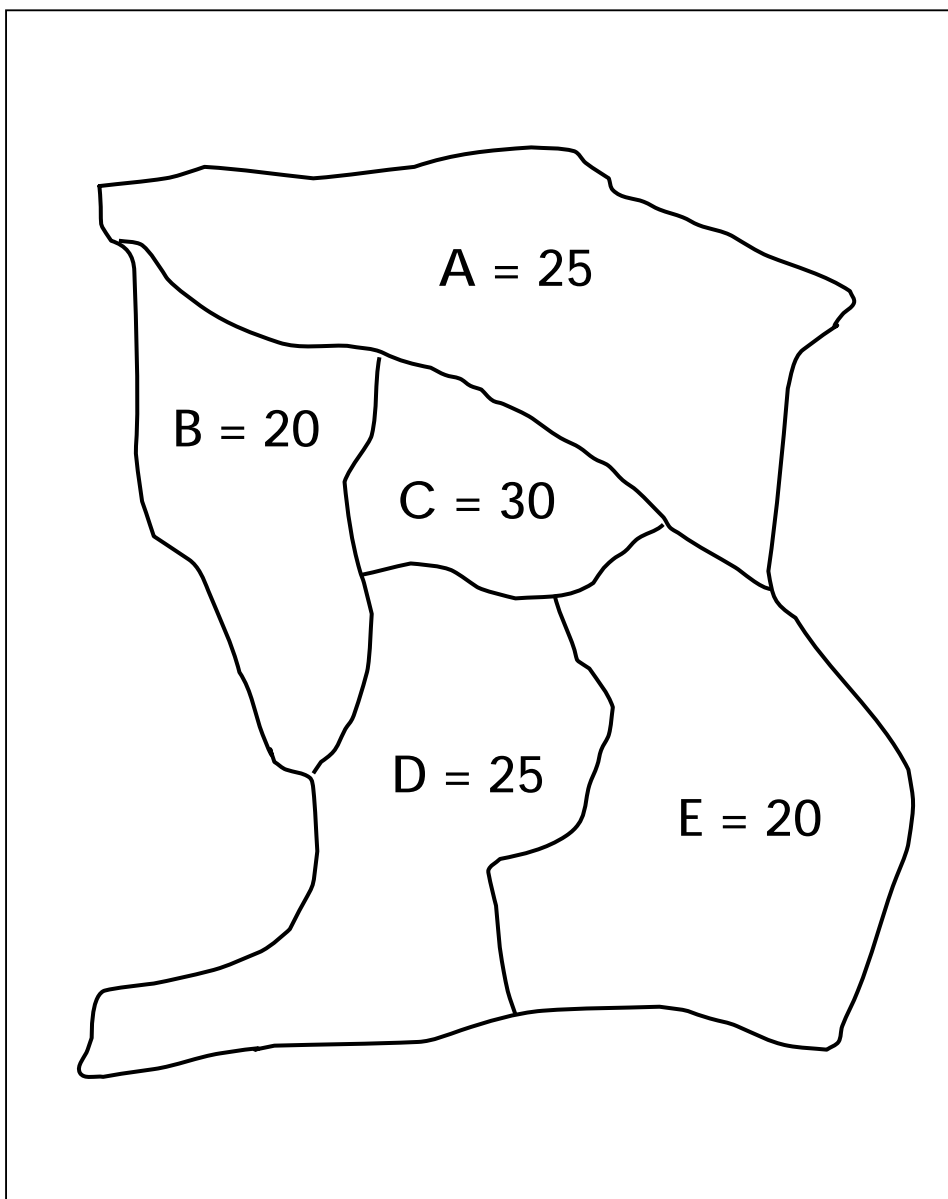
Indicator: Percent of women (15-49) who know 2 or more ways to prevent HIV transmission.



## NGO PROGRAM: Scenario Three (3)

Supervision Areas: A - E

Indicator: Percent of women (15-49) who know 2 or more ways to prevent HIV transmission.



## Using Survey Data

Indicator: Percent of women (15-49) who know at least two ways to prevent HIV transmission

Possible Scenarios			
Supervision Area	Scenario One (1) True Coverage (%)	Scenario Two (2) True Coverage (%)	Scenario Three (3) True Coverage (%)
A	30	85	25
B	40	80	20
C	80	90	30
D	75	85	25
E	20	80	20

### Analysis:

Look only at the true coverage figures within your assigned scenario (1, 2 or 3):

1. Discuss for a few minutes the differences in coverage among the 5 supervision areas *within your scenario*:
  - What is the difference in coverage among the 5 supervision areas?
  - How different is this? Very different? Little difference?
2. Does coverage for the overall program area appear HIGH, LOW, or MIXED?
3. What may be possible reasons for why, in your scenario, the program area has this coverage?
4. What might you propose to do about HIV/AIDS in the program area?

## Uses of Surveys

Identify health knowledge and practices with:

### 1. Large differences in coverage among supervision areas (SAs).

- è Identify the low-coverage SAs to be able to:
  - learn causes of low coverage.
  - focus our efforts and resources on these SAs.
  - improve coverage of the whole NGO program area by improving coverage in these SAs.
- è Identify high-coverage SAs to be able to:
  - study and learn what is working well.
  - identify things that can be applied to other SAs.

### 2. Little difference in coverage among SAs.

- è If coverage is generally high, shift resources to improve other health knowledge and practices.
- è If coverage is generally low:
  - learn causes of low coverage.
  - identify/study other NGO program areas to learn what is working well.
  - identify things that can be applied in your own program area.

## Why Random Sample?

Sampling allows you to use the “few” to describe the “whole,” and this:

Ø Saves time

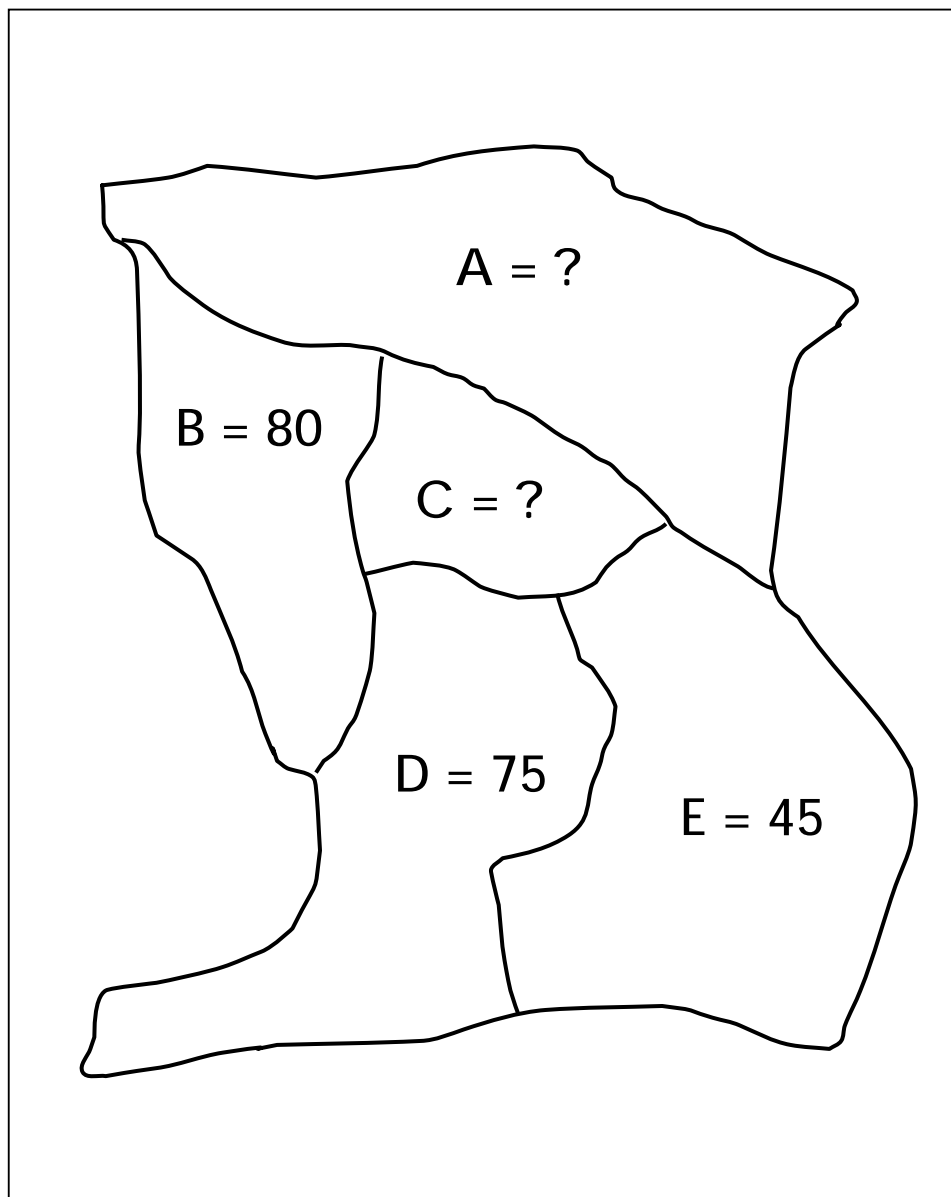
and

Ø Saves money

## NGO PROGRAM: Scenario Four (4)

Supervision Areas: A - E

Indicator: Percent of women (15-49) who know at least 2 ways to prevent HIV transmission.





## LQAS Sampling Results

Indicator: Percent of women (15-49) who know at least 2 ways to prevent HIV transmission.

	Supervision Areas: NGO Program Area	
	A	C
Sample	# Correct (green marbles)	# Correct (green marbles)
1		
2		
3		
4		
5		



Verify "coverage" in the bag for SA A è  $\frac{\text{Total green marbles in the bag}}{\text{Total green and red marbles in the bag}} = \frac{\boxed{\phantom{000}}}{\boxed{\phantom{000}}} = \boxed{\phantom{000}}\%$

Verify "coverage" in the bag for SA C è  $\frac{\text{Total green marbles in the bag}}{\text{Total green and red marbles in the bag}} = \frac{\boxed{\phantom{000}}}{\boxed{\phantom{000}}} = \boxed{\phantom{000}}\%$

Module One  
 Session 4  
 Overhead 17

LQAS Table: Decision Rules for Sample Sizes of 12-30 and Coverage Targets/Average of 10%-95%																		
Sample Size*	Average Coverage (Baselines) / Annual Coverage Target (Monitoring and Evaluation)																	
	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%
12	N/A	N/A	1	1	2	2	3	4	5	5	6	7	7	8	8	9	10	11
13	N/A	N/A	1	1	2	3	3	4	5	6	6	7	8	8	9	10	11	11
14	N/A	N/A	1	1	2	3	4	4	5	6	7	8	8	9	10	11	11	12
15	N/A	N/A	1	2	2	3	4	5	6	6	7	8	9	10	10	11	12	13
16	N/A	N/A	1	2	2	3	4	5	6	7	8	9	9	10	11	12	13	14
17	N/A	N/A	1	2	2	3	4	5	6	7	8	9	10	11	12	13	14	15
18	N/A	N/A	1	2	2	3	5	6	7	8	9	10	11	11	12	13	14	16
19	N/A	N/A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
20	N/A	N/A	1	2	3	4	5	6	7	8	9	11	12	13	14	15	16	17
21	N/A	N/A	1	2	3	4	5	6	8	9	10	11	12	13	14	16	17	18
22	N/A	N/A	1	2	3	4	5	7	8	9	10	12	13	14	15	16	18	19
23	N/A	N/A	1	2	3	4	6	7	8	10	11	12	13	14	16	17	18	20
24	N/A	N/A	1	2	3	4	6	7	9	10	11	13	14	15	16	18	19	21
25	N/A	1	2	2	4	5	6	8	9	10	12	13	14	16	17	18	20	21
26	N/A	1	2	3	4	5	6	8	9	11	12	14	15	16	18	19	21	22
27	N/A	1	2	3	4	5	7	8	10	11	13	14	15	17	18	20	21	23
28	N/A	1	2	3	4	5	7	8	10	12	13	15	16	18	19	21	22	24
29	N/A	1	2	3	4	5	7	9	10	12	13	15	17	18	20	21	23	25
30	N/A	1	2	3	4	5	7	9	11	12	14	16	17	19	20	22	24	26

N/A: *not applicable*, meaning LQAS can not be used in this assessment because the coverage is either too low or too high to assess an SA. This table assumes the lower threshold is 30 percentage points below the upper threshold.

- : shaded cells indicate where *alpha* or *beta* errors are  $\geq 10\%$ .
- : hashed cells indicate where *alpha* or *beta* errors are  $> 15\%$ .

## What a Random Sample of 19 Can Tell Us

- Ø Good for deciding what are the higher-performing supervision areas to learn from
  
- Ø Good for deciding what are the lower-performing supervision areas
  
- Ø Good for differentiating knowledge/practices that have high coverage from those of low coverage
  
- Ø Good for setting priorities among supervision areas with large differences in coverage
  
- Ø Good for setting priorities among knowledge/practices within an SA

(if one intervention is high but the other is low, we would concentrate on the low-coverage intervention)

## What a Random Sample of 19 Cannot Tell Us

∅ Not good for calculating exact coverage in an SA (but can be used to calculate coverage for an entire program)

∅ Not good for setting priorities among supervision areas that have little difference in coverage among them

## Why Use a Random Sample of 19?

- Ø A sample of 19 provides an acceptable level of error for making management decisions; at least 92% of the time it correctly identifies SAs that have reached their coverage target.
  
- Ø Samples larger than 19 have practically the same statistical precision as 19. They do not result in better information, and they cost more.

## Five Supervision Areas & One Indicator

SUPERVISION AREA: A, B, C, D or E			
Indicator: Women who know at least 2 ways to prevent HIV transmission	# Correct	Coverage Estimate =	Equal to or Above Average? Yes or No
Supervision Area A	12	<b>65.3%</b>	Yes
Supervision Area B	9		No
Supervision Area C	16	Decision Rule =	Yes
Supervision Area D	11		Yes
Supervision Area E	14		Yes
		<b>11</b>	

1. Add Number Correct in all SAs:  $12 + 9 + 16 + 11 + 14 = 62$   
 Add all Samples Sizes:  $19 + 19 + 19 + 19 + 19 = 95$   
 Coverage Estimate = Average Coverage =  $62/95 = 65.3\% = 70\%$   
 (Round upward to the nearest interval of 5 to find the Decision Rule)
2. Use table to find Decision Rule.
3. Is coverage in Supervision Areas generally equal to or below average? Yes or No?
4. Can you identify Supervision Areas that are your priorities?
5. If yes, which are they? If not, why can't you identify them?

## LQAS Concepts for Baseline Surveys

- Ø “Average Coverage” for a question/ indicator is the number of people in the sample who responded correctly to a question divided by the total number of people responding to that question.
  
- Ø The “Decision Rule” tells you whether an individual supervision area reaches the average coverage or is below average coverage.

## Five Supervision Areas & One Indicator: Participant Worksheet – For Baseline Surveys

Indicator: Women who used condoms each time with intercourse	# Correct	Coverage Estimate =	Equal to or Above Average? Yes or No
Supervision Area A	7	<input style="width: 100px; height: 40px;" type="text"/>	
Supervision Area B	3		
Supervision Area C	2	Decision Rule (Using the LQAS Table) = <input style="width: 100px; height: 40px;" type="text"/>	
Supervision Area D	13		
Supervision Area E	14		

**Questions:**

1. For baseline surveys, add number correct in all SAs:

$$7 + 3 + 2 + 13 + 14 = 39$$

Add all sample sizes:  $19 + 19 + 19 + 19 + 19 =$  \_\_\_\_\_

Average coverage = \_\_\_\_\_ / \_\_\_\_\_ = \_\_\_\_\_ %

2. What is the Decision Rule?
3. Is coverage is SAs generally equal to or above average? Yes or No?
4. Can you identify Supervision Areas that are your priorities?
5. If yes, which are they? If not, why can't you identify them?



## Supervision Area A & Five Indicators

	Indicators	# Correct	Coverage Estimate	Decision Rule	Equal to or Above Average? Yes or No
1	Women who used condoms each time with intercourse	7	45%	6	
2	Men who used condoms each time with intercourse	4	20%		
3	Women who know how HIV is transmitted	4	45%		
4	Men who know how HIV is transmitted	13	65%		
5	Women who know where to get tested for HIV	6	30%		

### Questions:

1. Can you identify indicators that are your priorities?
2. If yes, which indicators are they? If not, why can't you identify them?

## Comparing Supervision Areas A, B, C, D, & E (for baseline survey)

Indicators		Supervision Area				
		A	B	C	D	E
1	Women who used condoms each time with intercourse				Y	Y
2	Men who used condoms each time with intercourse	Y	Y	Y	N	Y
3	Women who know how HIV is transmitted	N	N	Y	N	Y
4	Men who know how HIV is transmitted	Y	Y	N	N	Y
5	Women who know where to get tested for HIV	Y	Y	Y	N	Y

Questions:

1. Which Supervision Area(s) appears to be performing the best for all 5 indicators: A, B, C, D, or E? \_\_\_\_
2. Which SA(s) appears to need the most support for their overall program: A, B, C, D, or E? \_\_\_\_
3. Which indicator(s) needs improvement across most of the catchment area? \_\_\_\_
4. Which indicator(s) needs improvement in only a few SAs? \_\_\_\_
5. For these weaker indicators :
  - Which SA(s) needs special attention? \_\_\_\_
  - Which SA(s) would you visit to learn possible ways to improve these weaker indicator? \_\_\_\_

## MODULE TWO

### Where should I conduct my survey?

#### Session 1: Identifying Interview Locations

## Identifying Locations for Interviews

- Step 1. List communities and total population.
- Step 2. Calculate the cumulative population.
- Step 3. Calculate the sampling interval.
- Step 4. Choose a random number.
- Step 5. Beginning with the random number, use the sampling interval to identify communities for the 19 sets of interviews.

## List of Communities and Total Population for a Supervision Area

Name of Community	Total Population
Pagai	548
Santai	730
Serina	686
Mulrose	280
Fanta	1256
Bagia	684
Rostam	919
Mt. Sil	1374
Livton	1136
Farry	544
Tunis	193
Pulau	375
Sasarota	333
Pingra	3504
Kanata	336
Sirvish	2115
Balding	258
Rescuut	678
Krista	207
Manalopa	1162
Garafa	408
Spiltar	455
Masraf	978
Abrama	335
Junagadh	541
Singri	725
Kalarata	355
Ichimota	498
Chaplar	347
Sr. Kitt	186
Nevis	1346
<b>TOTAL</b>	<b>23489</b>

## Calculate the Cumulative Population

of Community	Total Population	Cumulative Population
Pagai	548	548
Santai	730	
Serina	686	
Mulrose	280	
Fanta	1256	3500
Bagia	684	4184
Rostam	919	5103
Mt. Sil	1374	6477
Livton	1136	7610
Farry	544	8154
Tunis	193	8347
Pulau	375	8722
Sasarota	333	9055
Pingra	3504	12559
Kanata	336	12895
Sirvish	2115	15010
Balding	258	15268
Rescuut	678	15946
Krista	207	16153
Manalopa	1162	17315
Garafa	408	17723
Spiltar	455	18178
Masraf	978	
Abrama	335	
Junagadh	541	
Singri	725	
Kalarata	355	
Ichimota	498	
Chaplar	347	
Sr. Kitt	186	
Nevis	1346	
TOTAL	23489	

## Calculate the Sampling Interval

Name of Community	Total Population	Cumulative Population
Pagai	548	548
Santai	730	1278
Serina	686	1964
Mulrose	280	2244
Fanta	1256	3500
Bagia	684	4184
Rostam	919	5103
Mt. Sil	1374	6477
Livton	1136	7610
Farry	544	8154
Tunis	193	8347
Pulau	375	8722
Sasarota	333	9055
Pingra	3504	12559
Kanata	336	12895
Sirvish	2115	15010
Balding	258	15268
Rescuut	678	15946
Krista	207	16153
Manalopa	1162	17315
Garafa	408	17723
Spiltar	455	18178
Masraf	978	19156
Abrama	335	19491
Junagadh	541	20032
Singri	725	20757
Kalarata	355	21112
Ichimota	498	21610
Chaplar	347	21957
Sr. Kitt	186	22143
Nevis	1346	23489
TOTAL	23489	--

**Sampling Interval = Total Cumulative Population/19 = ?**

## A Random Number Table

87172	43062	39719	10020	32722	86545	86985	04962	54546	23138	62135	55870	97083	67875
28900	50851	30543	89185	16747	95104	49852	26467	58869	79053	06894	23975	34902	23587
86248	71156	55044	13045	33161	95604	57876	23367	10768	78193	60477	70307	06498	48793
10531	51391	41884	69759	32741	70072	01902	96656	90584	59263	49995	27235	40055	20917
02481	90230	81978	39127	93335	74259	25856	52838	49847	69042	85964	78159	40374	49658
23988	13019	78830	17069	58267	69796	94329	34050	25622	55349	10403	93790	77631	74261
37137	47689	82466	24243	10756	54009	44053	74870	28352	66389	38729	80349	50509	56465
38230	82039	34158	90149	82948	60686	27962	39306	53826	47852	76144	38812	76939	03119
98745	08288	19108	84791	58470	59415	45456	44839	86274	25091	42809	56707	47169	95273
44653	58412	91751	14954	87949	81399	51105	29718	82780	11262	23712	99782	42829	26308
88386	66621	16648	19217	52375	05417	26136	05952	71958	25744	52021	20225	01377	47012
50660	58138	01695	69351	25445	20797	74079	60851	47634	36633	93999	96345	58484	12506
36732	74234	84240	46924	62744	39238	78397	60869	26426	55588	56963	59506	17293	45096
34187	78277	83678	34754	46616	45250	25291	04999	19717	60324	66915	03473	98329	82447
26095	98131	79362	39530	53870	87445	26277	90551	28604	39865	40686	05435	74511	69866
00067	74289	20706	74076	28206	36960	09231	82988	57062	35331	08212	68111	52199	05065
42104	26434	30953	15259	76676	63339	75664	23993	63538	34968	47655	44553	61982	13296
82580	46580	87292	23226	21865	60338	04115	33807	38395	98484	40387	69877	24910	13317
89266	14764	17681	68663	66030	12931	17372	35601	63805	55739	42705	30549	31697	33478
47100	92329	89435	69974	40783	52649	93444	41317	02749	19052	34647	92814	88046	34020
59566	26527	44706	85670	96223	36275	82013	82673	60955	62617	90214	24589	59715	57612
10946	24676	66513	56743	96911	89042	08263	70753	89045	39189	04306	06090	94515	17772
34013	69250	27977	84597	55192	65088	55739	35953	18533	39339	78037	32827	68269	69218
21606	11751	30073	71431	53569	27865	90215	34772	21779	11734	64313	49764	30816	56852
56620	92612	77157	90231	90144	29781	01683	52503	60080	73703	70080	80686	47379	33279
49238	90475	84356	87159	21222	40106	02671	52684	38514	68434	16407	58164	13341	48142
50738	21999	73539	51802	78179	27872	57937	29696	67783	29373	96563	74619	77099	17190
58761	21571	71692	19723	25088	10483	71430	47068	78378	80237	32113	09381	62931	29243
55335	71937	22025	33538	04648	74232	57839	62431	61835	04784	06732	34202	93497	72070
26515	31143	83795	78445	32869	31489	81587	90354	97672	70106	35008	37899	36246	97805
32625	36806	00082	26902	26250	28919	38054	49027	22209	42696	46980	17065	61288	30208
20311	96089	20141	30362	04980	32703	04202	91080	28660	89691	84660	73433	70169	11273
10941	73003	87930	85620	06956	38719	88711	61454	64076	13316	02203	54437	54306	78229
56982	46636	34070	30803	39095	80387	08971	25067	07377	70704	13629	68474	99229	05535
14661	10670	15811	00454	81124	46977	89983	48836	48182	17054	06344	24267	16686	21401
52760	78118	23277	29760	00099	97325	54762	43117	73199	19621	24599	11030	64809	35088
48874	20831	02286	73635	93771	54264	49801	22653	01524	84621	91023	64028	29278	15987
44817	77408	48447	25934	22912	43086	68126	92970	91833	26418	72454	97636	94593	07880
17896	79375	70883	70135	21589	51181	71969	32951	35036	17219	27357	96517	55307	84470
27166	22347	92146	92189	16301	15747	72837	59174	75024	39459	54910	95335	95013	47068
13665	30490	63583	73098	19976	03001	94645	40476	43617	85698	66512	42759	20973	98759
58644	73840	08103	97926	57340	63077	08114	10031	35668	21740	33787	44756	20527	65367
72570	36278	06602	56406	85679	85529	08576	50874	59706	01019	29980	56742	05356	04810
92041	68829	02163	59918	83041	71241	90678	79835	86324	13075	29913	99831	25688	53648
71240	74119	53090	23693	14007	90107	68804	54927	68964	26535	28184	21630	12362	67990



## Identify the Location of Each of the 19 Interviews in a Supervision Area: Worksheet

Random Number = 622      Sampling Interval = 1236.26

LQAS No.	Calculation	Interview Location
1.	Random Number = Location Number 1	622
2.	RN + Sampling Interval = Location Number 2	$622 + 1236.26 = 1858.26$
3.	Interview Location Number 2 + Sampling Interval	$1858.26 + 1236.26 = 3094.52$
4.	Interview Location Number 3 + Sampling Interval	$3094.52 + 1236.26 = 4330.78$
5.	Interview Location Number 4 + Sampling Interval	
6.	Interview Location Number 5 + Sampling Interval	
7.	Interview Location Number 6 + Sampling Interval	
8.	Interview Location Number 7 + Sampling Interval	
9.	Interview Location Number 8 + Sampling Interval	
10.	Interview Location Number 9 + Sampling Interval	
11.	Interview Location Number 10 + Sampling Interval	
12.	Interview Location Number 11 + Sampling Interval	
13.	Interview Location Number 12 + Sampling Interval	
14.	Interview Location Number 13 + Sampling Interval	
15.	Interview Location Number 14 + Sampling Interval	
16.	Interview Location Number 15 + Sampling Interval	
17.	Interview Location Number 16 + Sampling Interval	
18.	Interview Location Number 17 + Sampling Interval	
19.	Interview Location Number 18 + Sampling Interval	

## LQAS Sampling Frame for a Supervision Area

Name of Community	Total Population	Cumulative Population	Interview Location Number	Number of Interviews
Pagai	548	548		
Santai	730	1278	<del>622.00</del>	
Serina	686	1964	<del>1858.26</del>	
Mulrose	280	2244		
Fanta	1256	3500	<del>3094.52</del>	
Bagia	684	4184		
Rostam	919	5103	<del>4330.78</del>	
Mt. Sil	1374	6477		
Livton	1136	7610		
Farry	544	8154		
Tunis	193	8347		
Pulau	375	8722		
Sasarota	333	9055		
Pingra	3504	12559		
Kanata	336	12895		
Sirvish	2115	15010	<del>12984.6, 14220.86</del>	
Balding	258	15268		
Rescuut	678	15946	<del>15457.12</del>	
Krista	207	16153		
Manalopa	1162	17315	<del>16693.38</del>	
Garafa	408	17723		
Spiltar	455	18178	<del>17929.64</del>	
Masraf	978	19156		
Abrama	335	19491	<del>19165.90</del>	
Junagadh	541	20032		
Singri	725	20757	<del>20402.16</del>	
Kalarata	355	21112		
Ichimota	498	21610		
Chaplar	347	21957	<del>21638.42</del>	
Sr. Kitt	186	22143		
Nevis	1346	23489	<del>22874.68</del>	
<b>TOTAL</b>	<b>23489</b>			<b>19</b>

## MODULE THREE

### Whom should I interview?

Session 1: Selecting Households

Session 2: Selecting Respondents

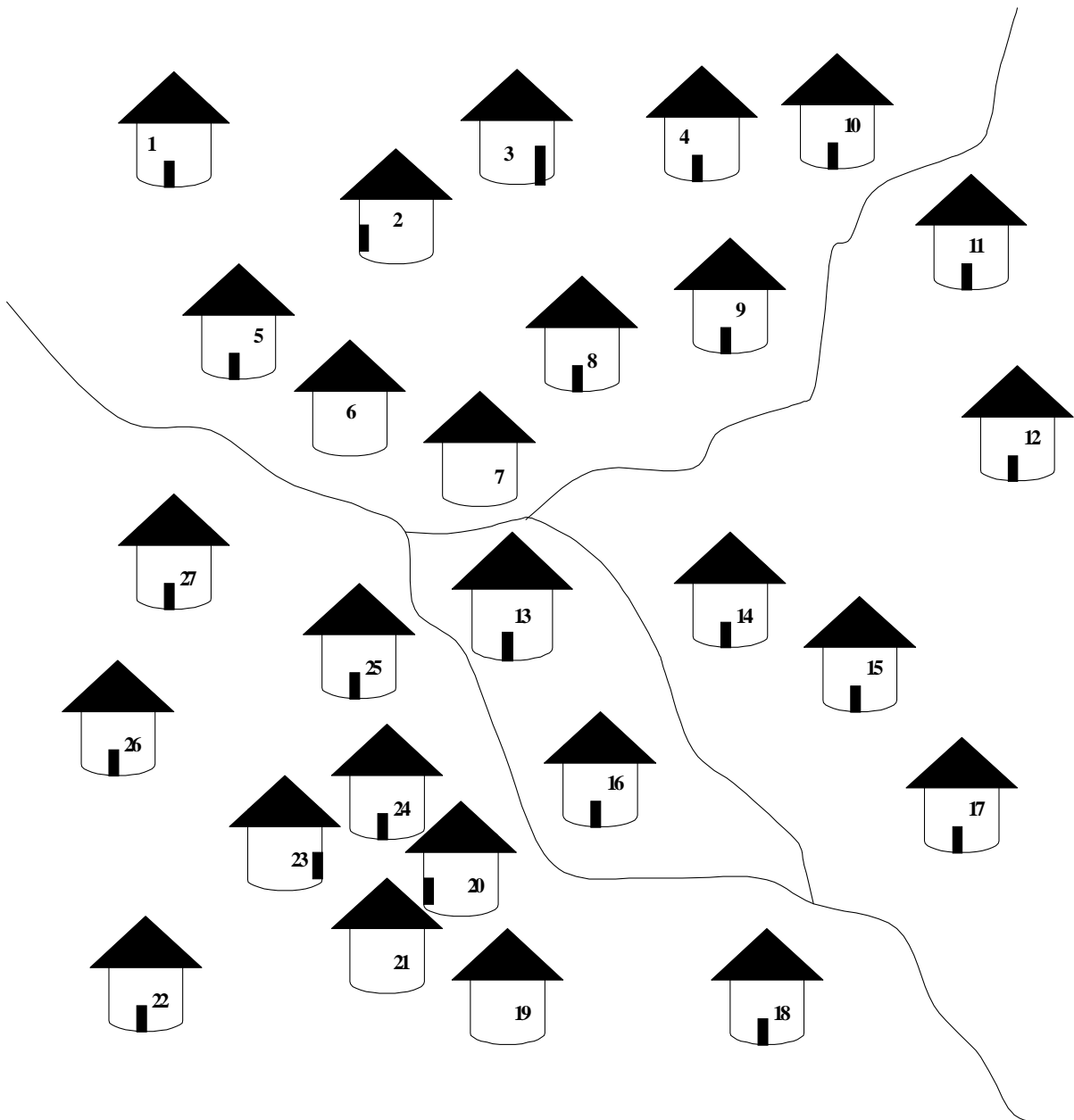
Session 3: Field Practical for Numbering and  
Selecting Households

## How to Assign Numbers to Households

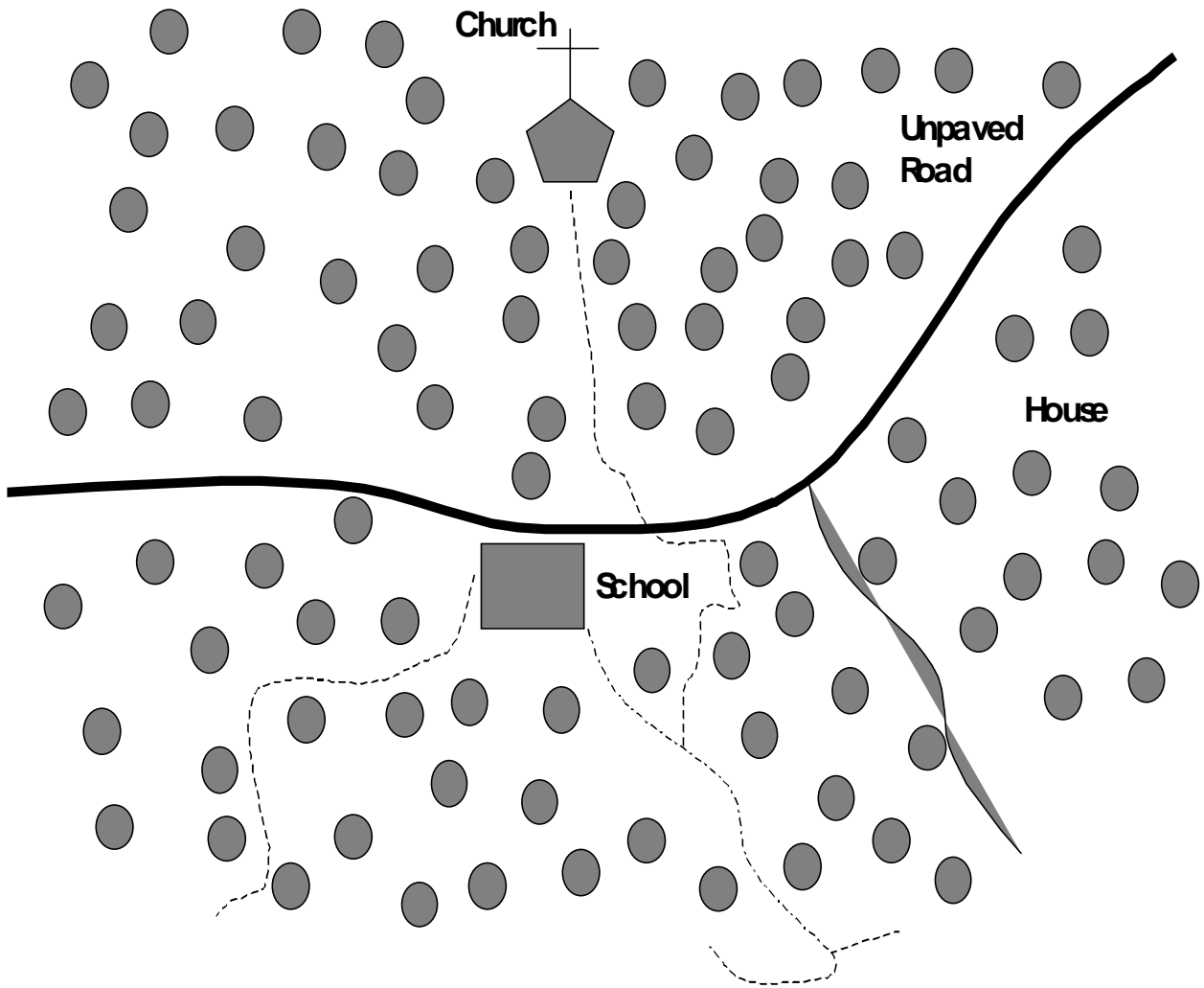
IF:	THEN:
A complete household list is available (tax list, census, map)	Assign a number to each house... ...Work is done!
If the community size is "about" 30 households or less	Make a household list or map with the location of each household (use assistance of a key informant from the community)...  And then assign a number to each house...  (... Alternatively, you can use the "spin-the-bottle technique ...")  ... Work is done!
If the community size is more than "about" 30 households	Subdivide the community into 2-5 sections with about the same number of households in each section. ...Select one section at random...  ...If the section has more houses than you can easily count, subdivide into 2-5 sections again and select one at random. Continue doing this until few houses remain.  ...Make a house list or map with the location of each household (use an assistant or key informant from your community). Then assign a number to each house.  (... Alternatively, you can use the "spin the bottle technique ..." )  ...Work is done!

Household = group of persons who share the same kitchen or hearth; or, a group of persons who eat from the same cooking pot.

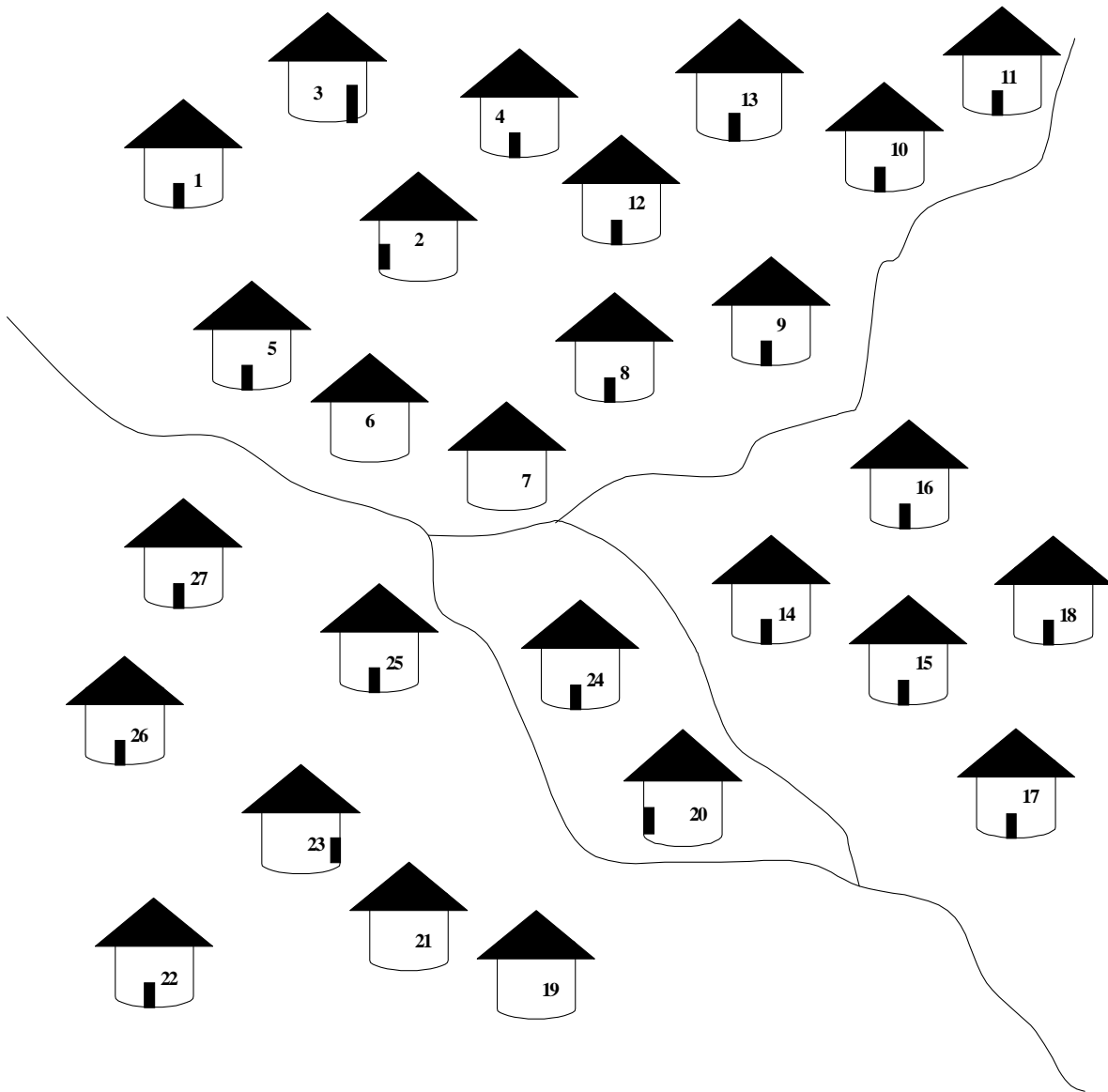
## Situation 2: Household List Not Available – Size ‘About’ 30



### Situation 3: Household List Not Available - Size > 30



## Group of 27 Households Numbered for Random Selection of 1 Household



## Rules for Identifying Respondents

If the type of respondent you are looking for:	Then:
Is at the household* you selected	<u>Interview</u> that person <u>if</u> she consents.
Does <u>not</u> live at the household you selected	Go to the next-nearest household <u>from the front entrance</u> to the household you are at, and check at this "next-nearest" household... <u>Continue</u> this process <u>until</u> you find the respondent type you are looking for.
Lives at that household BUT is absent and far away ( <u>more than</u> 30 minutes away)	[Hint: if 2 households are equally near, then choose the one with the closest door. Otherwise, "flip a coin."]
Lives at that household, is absent BUT is nearby ( <u>within</u> 30 minutes)	Go <u>find</u> the respondent with the help of a guide from the community.... IF you <u>cannot</u> find the person in the next 30 minutes... GO to the next-nearest household <u>from the front entrance</u> of the household of the person you cannot find.

\* Household = group of persons who share the same kitchen or hearth; or, a group of persons who eat from the same cooking pot.



## 24 Household Composition Scenarios

- ◆ Household #1
  - Mother 35 years with children 6 months old and 23 months old
  - Sister of woman is 23 years old
  - Grandmother is 50 years old
  
- ◆ Household #2
  - Mother 18 years old with child 24 months, pregnant
  - Father 26 years
  
- ◆ Household #3
  - Abandoned house – owners absent
  
- ◆ Household #4
  - Girl 12 years old
  - 3-month-old baby
  - Mother of 3-month-old in market, and she is the sister of the 12-year-old
  - Mother of 6-month-old is dead, also sister of 12-year-old
  - Father in nearby field
  
- ◆ Household #5
  - Man 65 years
  - Man's wife 60 years
  - Mother of 15-month-old absent in field nearby – might be pregnant, doesn't know
  - 15-month-old baby
  - Father in city

Module Three

Session 2

Overhead 6 – Continued

- ◆ Household #6
  - Father 45 years old
  - One wife, 48 years old
  - Daughter, 24 years and pregnant
  - Children 2 and 3 years old
  
- ◆ Household #7
  - Mother of 9-year-old child is not home – child does not know when mother will be back
  - 9-year-old child
  - 8-month-old child of woman
  
- ◆ Household #8
  - Mother and father are not at home
  - 15-year-old girl and 16-year-old boy are present
  
- ◆ Household #9
  - 18 year old son
  - Mother of 18-year-old is 40
  - Father of 18-year-old is 70
  - 18-month-old child of mother's sister is in city
  
- ◆ Household #10
  - Woman 20 years old with child 6 months
  - Sister of 20-year-old is 25 years old and has child 3 years old
  - 3<sup>rd</sup> sister 30 years old with 12-month-old baby
  - 2 husbands, one is 25 years old, the other is 32 years – both in market playing cards

Module Three

Session 2

Overhead 6 -Continued

- ◆ Household #11
  - 10-year-old sister
  - 30-year-old aunt – she is pregnant
  - Woman 75 years old, mother of pregnant aunt
  - Grandfather 80 years old
  - Mother and her children in the city
  
- ◆ Household #12
  - Mother 35 years old – pregnant
  - Child of pregnant mother is 13 months old
  - Neighbor woman is 35 years old
  - Neighbor's 10-month-old baby
  
- ◆ Household #13
  - Girl 10 years old
  - 35-year-old sister of 10-year-old is at neighbor's house
  - 10-month-old baby with mother at neighbor's house
  
- ◆ Household #14
  - 8-month-old twin girls
  - Mother of twins, 27 years old
  - 40-year-old brother of mother
  - 32-year-old wife of brother (of mother)
  
- ◆ Household #15
  - New bride of 14 years with 2-month-old baby
  - Her 19-year-old husband
  - Mother-in-law 47 years
  - Husband's 26-year-old brother visiting
  
- ◆ Household #16
  - Refugee woman from neighboring country with 3-year-old
  - Her sister, who immigrated when she was 39, about 12 years ago
  - Sister's father 47 years old

Module Three

Session 2

Overhead 6 -Continued

- ◆ Household #17
  - Guesthouse has 42-year-old female owner who lives at the guesthouse
  - Guest: include 42-year-old businessman
  - Guest: Mother 43 years with teenage children
  - Guest: 30-year-old truck driver
  
- ◆ Household #18
  - Priest is 38 years old. He lives on the church grounds and does not maintain a separate house.
  - 42-year-old female cook also lives on the church grounds.
  
- ◆ Household #19
  - Three sisters, one with a six-week-old baby, one with an 8-month-old and one who is childless.
  - Husband of sister with 8-month-old is 24 years.
  
- ◆ Household #20
  - Mother 18 – pregnant, has 4-month-old baby
  - Father is working on the roof of the house
  
- ◆ Household #21
  - 8-year-old boy
  - His 32-year-old father is taking a shower
  - His mother, 24 years, is cooking dinner
  
- ◆ Household #22
  - Mother 18 years old with child 24 months, pregnant
  - Father 26 years
  
- ◆ Household #23
  - Abandoned house – owners absent
  
- ◆ Household #24
  - Father 45 years old
  - Wife, 35 years old and pregnant

## Process for Field Practical

1. Meet with community leader.
2. Revise and/or create community map.
3. Subdivide the community into sections of 30 or fewer households.
4. Give each section (each group of 30 or fewer households) a number.
5. Select a section using a random number.
6. Perform steps 3 through 5 again if the selected section is still too large.
7. Assign numbers to households in selected section.
8. Select a starting household using a random number table.
9. Identify the "next-nearest" household at least twice.

## MODULE FOUR

### What questions do I ask and how should I ask them?

Session 1: Reviewing the Survey Questionnaires  
*(no overheads needed for this section)*

Session 2: Interviewing Skills

Session 3: Field Practical for Interviewing  
*(no overheads needed for this section)*

Session 4: Planning for the Data Collection/Survey  
*(no overheads needed for this section)*  
*(handout only included in this section)*

## Why Interviewing is Important

Ø Sound programming decisions depend on reliable data,

and

Ø reliable data depends on getting good information from local respondents,

and

Ø getting good information from respondents depends on conducting effective interviews.

## Interview Etiquette

- Ø Dress appropriately.
- Ø Present official document/certificate from organization or project if necessary.
- Ø Be punctual (if appointments have been made).
- Ø Do not enter the house unless you are invited.
- Ø If you remain outside, do not ask for a chair; sit on the porch, steps, etc.
- Ø Tell people how long the questionnaire will take.
- Ø Do not accept lunch (unless it would be rude to refuse).
- Ø Do not give gifts to interviewees.
- Ø Thank interviewees at the end.



## Effective Interviewing Techniques

1. Introduce yourself, your organization, and the purpose of the survey (show document or certificate if necessary).
2. Maintain confidentiality:
  - Do not interview the respondent in the presence of others (unless he/she indicates otherwise).
  - Explain that all answers will be kept confidential.
3. Ask questions exactly as written or with minor changes that were agreed upon during the training.
4. Wait for a response; be silent, then probe.
5. If the respondent doesn't understand or the answer is unclear, ask the question again, making as few changes in wording as possible.
6. Do not suggest—by tone of voice, facial expression, or body language—the answer you want.
7. Do not ask leading questions, questions that signal the correct answer or that suggest the answer you would like.
8. Try not to react to answers in such a way as to show that you approve or disapprove.
9. If one answer is inconsistent with another, try to clear up the confusion.
10. Try to maintain a conversational tone of voice; don't make the interview seem like an interrogation.
11. Know the local words for sensitive/delicate topics.
12. Use neutral probes (e.g., anything more?)

## Survey Checklists

### 1. PRE-SURVEY CHECKLIST

Before the survey begins, be sure the following tasks have been completed:

1. Review the sampling frame before designing the plan for data collection.
2. Count the questionnaires to be sure you have 19 for the respondent type and for each supervision area.
3. Number questionnaires 1 through 19 for each supervision area.
4. Review each one of the 19 questionnaires to make sure that they have the correct number of pages and they are securely stapled.
5. Review the materials checklist below. Be sure you have (or have decided you don't need) the following materials:
6. Verify questionnaires have no missing pages and are securely stapled together.

#### *Materials Checklist*

- q 19 questionnaires for correct respondent + 2 extras
- q Pencil
- q Pencil sharpener
- q Eraser
- q Clipboard
- q Day pack or bag to carry questionnaires and materials
- q Random number tables
- q Rules to select respondents in a household
- q Raincoat
- q Community maps or paper for making maps
- q Any 'questionnaire-specific' materials: literacy tests, ORS packets, etc.)

## 2. CHECKLIST FOR DATA COLLECTORS

After you are in the field, make sure participants complete the survey in the following manner:

1. If a community census is available, number households and randomly select a starting household (and proceed as in step 6. below).
2. If no community census is available, update community maps, as needed, before selecting starting household(s), identifying all houses in the community. If no map is available, make one, being sure to include landmarks and showing the relative number of houses in each section of the community.
3. If the community is small, e.g., less than 30 houses, number all houses. Randomly select a starting household.
4. If the community is large, e.g., more than 30 houses, divide into sections (each section with a similar number of houses):
  - number each section;
  - randomly select one of the community sections; (If you have divided the community into 3 sections, select a random number between 1 and 3.)
  - go to the selected section to confirm the number of houses and the location of each house (and, if necessary, update the community map); if the section is large, subdivide it into subsections and randomly select one (and repeat this process until you get a subsection with 30 or fewer houses);
  - number on the map each house in the section or subsection selected;
  - randomly select one house.
5. If it is very difficult to divide the community or a section of it into sections, then:
  - ask a respondent to take you to a place where exactly 50% of the houses are in front of you, 50% of the houses are behind you, 50% are to the right and 50% are to the left;
  - number these 4 sections;
  - choose one randomly;
  - go to that section and repeat the procedure until you can see a manageable number of houses you can easily count;
  - select one of those houses randomly.
6. Go to the selected house to begin interviewing.
7. If you cannot complete an interview in the selected house, visit the closest house until the interview has been completed. Continue doing this procedure until you complete all questionnaire types as instructed.
8. After completing all questionnaire types, select another starting household (or section and then household) at random if there is more than one sampling point in the community or continue to a new community.

*Remember: For each questionnaire, randomly select a starting household and then go to the closest house until the interview is complete.*

### 3. CHECKLIST FOR MANAGERS

The following is a checklist for program managers:

1. Review the data collection plan with each interviewer and supervisor.
2. Indicate the minimum number of interviews to be completed in one day.
3. During day 1 you can let data collectors work in pairs if you think this will increase their confidence.
4. Provide the technical and administrative support required by each interviewer (transport, lunch, etc.).
5. At the end of each day always review the questionnaires of each interviewer to assure that they have been correctly filled out and are complete. Check for any missing information or responses, and missing pages.
6. Make necessary corrections to questionnaire and inform the interviewer of problems found. If information is missing, the interviewer should revisit the house to complete the questionnaire before going to another community.
7. Confirm that all questionnaires have been filled in for each supervision area and that no pages are missing. If your LQAS sample size is 19 then you should have 19 completed questionnaires.
8. Organize the questionnaires by LQAS number (for example – from 1 to 19 ), according to the supervision area. For five supervision areas, for example, you would organize the questionnaires as follows:

Folder 1: Respondent Type A, Area 1: 01 to 19  
Folder 2: Respondent Type A, Area 2: 01 to 19  
Folder 3: Respondent Type A, Area 3: 01 to 19  
Folder 4: Respondent Type A, Area 4: 01 to 19  
Folder 5: Respondent Type A, Area 5: 01 to 19

**NB:** *Be sure to bring all the questionnaires to the tabulation workshop.*

USE THIS MODULE TO CARRY OUT A BASELINE  
SURVEY FOR YOUR PROGRAM

## MODULE FIVE

What do I do with the  
information I have collected  
during baseline?

Session 1: Fieldwork Debriefing

Session 2: Tabulating Results  
(*handout*)

Session 3: Analyzing Results

**Status Report on Data Collection  
 from the NGO or MOH Administrative Area:**

NGO or MOH Administrative Area: \_\_\_\_\_

**Total Supervision Areas Included  
 in Baseline Survey = # \_\_\_\_\_**

SA Number or Name	No. of Questionnaires <u>Completed</u>	No. of Questionnaires Remaining (If Any)	No. of Questionnaires Brought To The Workshop	Plan to Finish Tabulation: Dates for Data Collection, Deadline for Completion
1				
2				
3				
4				
5				
6				

Result Tabulation Table for a Supervision Area: Baseline Survey and Regular Monitoring Females 15 – 49 Years																							
Supervision Area: _____										Supervisor: _____										Date: _____			
CORRECT = 1					INCORRECT = 0					SKIPPED = S					MISSING = X								
#	Indicator	Correct Response Key	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Total Correct in SA	Total Sample Size (all '0's and '1's)
<b>Section 3: Family Planning</b>																							
1	Age of mother at first birth	20 – 35 Years																					
2	How long should a female wait after the birth of a child to have another?	2 or more years																					
3	What can a female or male do to avoid pregnancy?	3 or more of acceptable responses (ex. 1-10)																					
<b>Section 4: HIV/AIDS and Other Sexually Transmitted Infections</b>																							
1	Have you ever heard of an illness called HIV/AIDS?	Yes (if No or Unknown then Quest. 3-5 automatically incorrect)																					
2	Is there anything a man can do to avoid getting HIV/AIDS?	DO NOT CODE																					
3	What can a man do to avoid getting HIV/AIDS?	2 or more acceptable responses (ex. 1-19 or 14)																					
4	Is there anything a woman can do to avoid getting HIV/AIDS?	DO NOT CODE																					
5	What can a woman do to avoid getting HIV/AIDS?	2 or more acceptable responses (ex. 1-19 or 14)																					

## Tabulation Quality Checklist

As you tabulate your questionnaire, use the following checklist.

### ∅ Before You Begin:

1. Be sure the questionnaires you are about to tabulate match the type of tabulation table you have (right age, sex, etc.)
2. Confirm that questionnaires are in the correct order: 01 – 19, and confirm they have the correct number of pages.

### ∅ During Tabulation:

1. Work in threes.
2. The first person reads the correct answer on the tabulation sheet.
3. The second person looks at the answer on the questionnaire, determines if the answer is a "1" correct or a "0" incorrect. Mark an "S" for intentionally skipped questions that can not be judged as either correct or incorrect, and an "X" for questions that should have responses but the responses are missing. An "X" should be taken out of the denominator. An "S" should only be marked if the person should be taken out of the denominator. For example, if the question concerns a sick child but the respondent's child has not been sick, then all the questions about the sickness would be marked as "S" since they are irrelevant for this respondent. However, in most cases a skipped question is equivalent to an automatic incorrect and should be coded as "0." For example, if a respondent says he/she



does not know how to prepare ORS, then all subsequent questions related to ORS preparation would be automatically incorrect. Similarly, if a respondent does not have a vaccination card for their child, then all of the child's vaccinations would be judged as "0." On rare occasions an "S" is an automatic correct and should be coded "1."

4. The first person records the answer on the tabulation sheet.
5. The third person confirms that the second person correctly determined if the answer should be coded "1" or "0" or "S" or "X" and that the first person recorded it properly.

Ø After Completing Each Column (all responses from one respondent):

1. Check that all the marks are in the same column; there should be no marks in the column to the right of the column just completed.
2. Check that there are no blank cells in the column just completed.
  - Be sure that no cells are blank. For any blank cell review the questionnaire to see if it should be coded a 0, 1, S, or X.
  - Almost all responses should be a 0 or 1.
  - If the cell has an "S," then check to see that it satisfies this criterion: The respondent was skipped because the question should not be asked of her/him because she/he cannot be included in the denominator. In a way, this means they are not part of the universe being assessed.

EXAMPLE 1: Some questions are asked of mothers if their child has had diarrhea in the last 2 weeks. Children who did not have diarrhea are coded "S" because the question cannot be asked of them.

EXAMPLE 2: Some questions are not asked because the questions are automatically INCORRECT or 0. If a woman is asked if she has ever heard of HIV/AIDS, and responds "No," that question is coded a 0 since it is not the desired response—it is incorrect. Any following question that asks about how HIV is transmitted or prevented would be SKIPPED since they are automatically counted as INCORRECT (coded "0") since we know the person cannot know the correct response because she does not even know that HIV exists.

- If the cell has an "X," this means the respondent should have responded to the question but for some reason no response was recorded. This could be because the interviewer forgot to do this. Sometimes an interviewer circles several responses when they should have only circled one of them. These responses are also coded as "X" since there is no clear response. Also, if you cannot decipher the response written on a questionnaire, then "X" is an appropriate code. All "Xs" are excluded from the denominator in any calculation.
3. Ask a trainer to check your tabulation sheet after you have completed the first column.

Ø After Completing a Tabulation Sheet:



1. Enter the total number correct in the appropriate column.
2. Enter the total sample size in the appropriate column.
3. Look at all questions where the sample is less than 19 and confirm the reason:
  - All questions should have a "0", "1", "S", or "X." If this is not the case, find out why, so you can make an appropriate entry in the space provided.

Summary Tabulation Table: Baseline Survey Females 15 – 49 Years

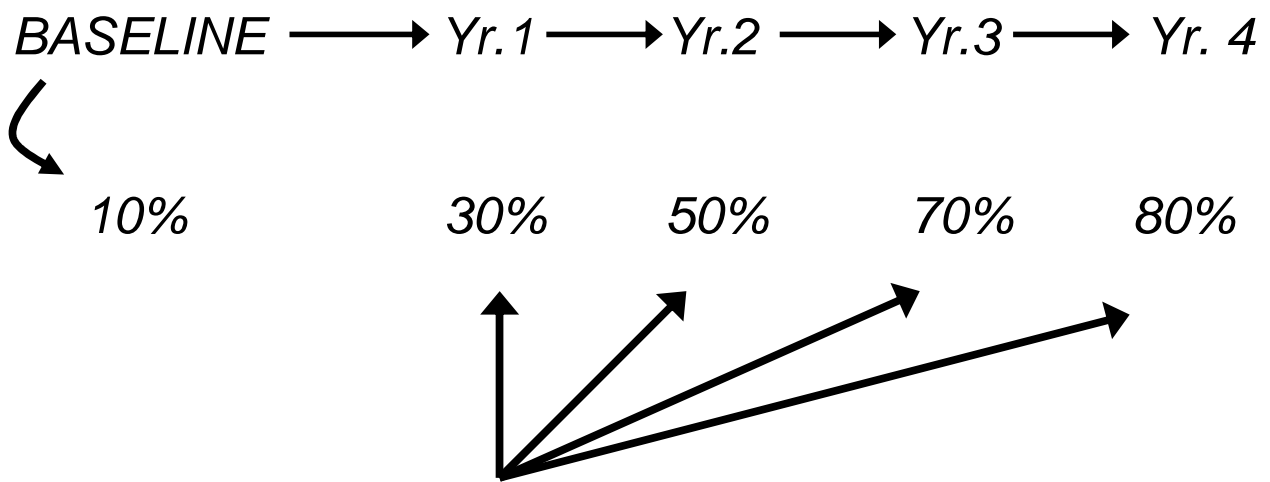
NGO name: _____																	DATE: _____	
#	Indicator	Total Correct in Each SA/Decision Rule						Total Correct in Program	Sample Size						Total Sample Size in Program	Average Coverage = $\frac{\text{Total Correct}}{\text{Sample Size}}$		
		1	2	3	4	5	6		1	2	3	4	5	6				
<b>Section 3: Family Planning</b>																		
1	Age of mother at first birth																	
2	How long should a female wait after the birth of a child to have another?																	
3	What can a female or male do to avoid pregnancy?																	
<b>Section 4: HIV/AIDS and Other Sexually Transmitted Infections</b>																		
1	Have you ever heard of an illness called HIV/AIDS?																	
2	Is there anything a man can do to avoid getting HIV/AIDS?	DO NOT CODE																
3	What can a man do to avoid getting HIV/AIDS?																	
4	Is there anything a woman can do to avoid getting HIV/AIDS?	DO NOT CODE																
5	What can a woman do to avoid getting HIV/AIDS?																	
<p>* To find the "Decision Rule" for each indicator, using the LQAS Table, find the "Sample Size" in the left column. Then for <i>baseline surveys</i>: look for the "Average Coverage" across the top and look down the column for the "Decision Rule." Then for <i>monitoring surveys</i>: look for the "Annual Coverage Target" across the top and look down the column for the "Decision Rule." (See Module 6.)</p>																		

LQAS Table: Decision Rules for Sample Sizes of 12-30 and Coverage Targets/Average of 10%-95%																		
Sample Size*	Average Coverage (Baselines) / Annual Coverage Target (Monitoring and Evaluation)																	
	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%
12	N/A	N/A	1	1	2	2	3	4	5	5	6	7	7	8	8	9	10	11
13	N/A	N/A	1	1	2	3	3	4	5	6	6	7	8	8	9	10	11	11
14	N/A	N/A	1	1	2	3	4	4	5	6	7	8	8	9	10	11	11	12
15	N/A	N/A	1	2	2	3	4	5	6	6	7	8	9	10	10	11	12	13
16	N/A	N/A	1	2	2	3	4	5	6	7	8	9	9	10	11	12	13	14
17	N/A	N/A	1	2	2	3	4	5	6	7	8	9	10	11	12	13	14	15
18	N/A	N/A	1	2	2	3	5	6	7	8	9	10	11	11	12	13	14	16
19	N/A	N/A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
20	N/A	N/A	1	2	3	4	5	6	7	8	9	11	12	13	14	15	16	17
21	N/A	N/A	1	2	3	4	5	6	8	9	10	11	12	13	14	16	17	18
22	N/A	N/A	1	2	3	4	5	7	8	9	10	12	13	14	15	16	18	19
23	N/A	N/A	1	2	3	4	6	7	8	10	11	12	13	14	16	17	18	20
24	N/A	N/A	1	2	3	4	6	7	9	10	11	13	14	15	16	18	19	21
25	N/A	1	2	2	4	5	6	8	9	10	12	13	14	16	17	18	20	21
26	N/A	1	2	3	4	5	6	8	9	11	12	14	15	16	18	19	21	22
27	N/A	1	2	3	4	5	7	8	10	11	13	14	15	17	18	20	21	23
28	N/A	1	2	3	4	5	7	8	10	12	13	15	16	18	19	21	22	24
29	N/A	1	2	3	4	5	7	9	10	12	13	15	17	18	20	21	23	25
30	N/A	1	2	3	4	5	7	9	11	12	14	16	17	19	20	22	24	26

N/A: *not applicable*, meaning LQAS cannot be used in this assessment because the coverage is either too low or too high to assess an SA. This table assumes the lower threshold is 30 percentage points below the upper threshold.

-  : shaded cells indicate where *alpha* or *beta* errors are  $\geq 10\%$ .
-  : hashed cells indicate where *alpha* or *beta* errors are  $> 15\%$ .

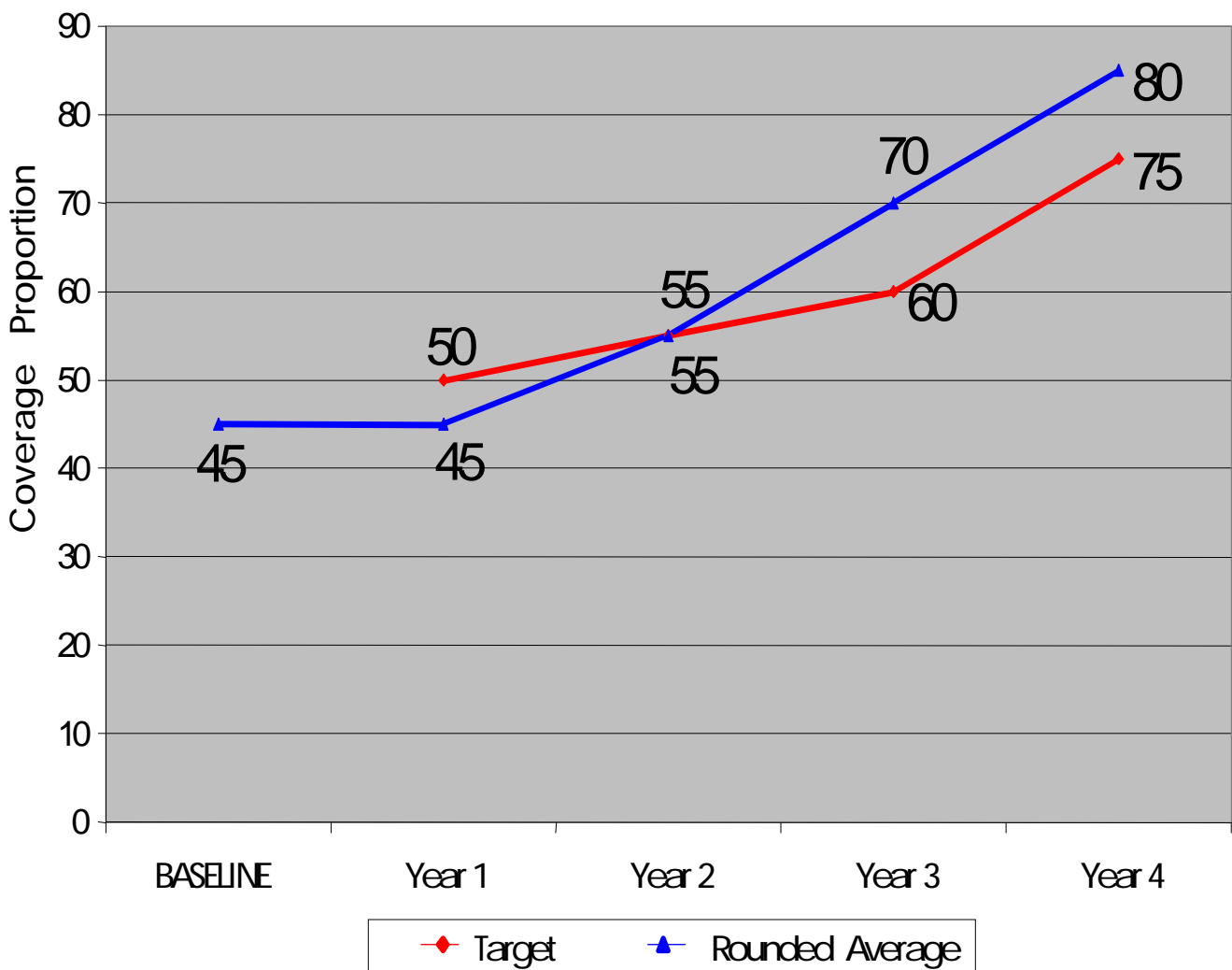
## Defining Program Goals and Annual Targets



**PROGRAM GOALS FROM BASELINE  
UNTIL YEAR 4 OF THE PROJECT**

**IMPROVEMENT**

## Monitoring Targets and Average Coverage Over Time In a Catchment Area



## How to Analyze Data and Identify Priorities Using the Summary Tables

### Group Work

1. Discuss within your group the following (25 minutes):
  - Priorities among Supervision Areas for each indicator in a group of related indicators
  - Priorities within one Supervision Area among a group of related indicators
2. Report main findings to all workshop participants (10 minutes each)

## Baseline Survey Report Format

CONTENT	MAXIMUM PAGES (13, Excluding Appendix)
Summary	1
Program Overview (locations, objectives, main activities, beneficiaries, etc.)	1
Purpose of Baseline Survey and Methodology	1
Main Findings: Priorities by Supervision Area and for the Program as a Whole	5
Action Plans and Goals/Coverage Targets for Key Indicators	2
Conclusions and Recommendations	2
Appendix (Photocopy Summary Tabulation Tables)	1



## Methodology (Illustrative of aspects that could be included)

- Ø Training in LQAS (principles and concepts).
- Ø Used a sample of 19 (randomly selected) in each Supervision Area.
- Ø Number of questionnaires and questionnaire types used, which were discussed, tested and revised by NGO staff.
- Ø Updated the maps in each Supervision Area with the assistance of chiefs, health workers, etc.
- Ø Households were randomly chosen and, in some cases, respondents were also chosen randomly.
- Ø Organization for data collection (e.g., as a group, etc.).
- Ø Hand tabulation using separate tables.

## Main Findings

ü **Priorities:** Specify the program priorities by indicator, by Supervision Area and by type of respondent (e.g., men, women, and/or mothers with children of different age groups).

For example:

The percentage of women who know danger signs during pregnancy (that indicate the need to seek care) is below average only in Supervision Areas 3 and 5. We need to focus on Areas 3 and 5 in our efforts to improve this indicator.

Among the infant and child feeding indicators, the percentage of mothers who continue to breastfeed up to and beyond 12 months of age appears to be the biggest problem (across all Supervision Areas, only 20% of mothers of children aged 12-15 months were breastfeeding at the time of the survey). This practice will receive special attention in the project's nutrition intervention.

## Action Plans and Goals/Coverage Targets for Key Indicators

- Ø For each priority, list the main activities that your organization will implement to reduce the identified problems.
  
- Ø For example, a priority activity could be to identify terms, perceived causes, preferred treatments and preferred providers for the danger signs during pregnancy that women in the community recognize. Then we can further build upon the local understanding of pregnancy danger signs to develop appropriate strategies for improving recognition and care-seeking.
  
- Ø Report key indicators, coverage targets, and goals for your future planning.

### Results of Baseline Survey, Coverage Targets, and End of Project Goals (Men 15-49 Years)

Key Indicators	Baseline Average Coverage	Projected Coverage Target Year 1	Projected Coverage Target Year 2	Projected Coverage Target Year 3	End-of-Project Goal Year 4

USE THIS SECTION FOR REGULAR  
MONITORING OF YOUR PROGRAM

## MODULE SIX

What do I do with the  
information I have collected  
during monitoring?

Session 1: Fieldwork Debriefing

Session 2: Tabulating Results  
(*handout*)

Session 3: Analyzing Results

## Status Report on Data Collection from the NGO or MOH Administrative Area:

NGO or MOH Administrative Area: \_\_\_\_\_

Total Supervision Areas Included  
 in Monitoring Survey = # \_\_\_\_\_

SA Number or Name	No. of Questionnaires <u>Completed</u>	No. of Questionnaires Remaining (If Any)	No. of Questionnaires Brought To The Workshop	Plan to Finish Tabulation: Dates for Data Collection, Deadline for Completion
1				
2				
3				
4				
5				
6				

Module Six  
Session 2  
Overhead 2

Result Tabulation Table for a Supervision Area: Baseline Survey and Regular Monitoring Females 15 – 49 Years																								
Supervision Area: _____										Supervisor: _____										Date: _____				
CORRECT = 1					INCORRECT = 0					SKIPPED = S					MISSING = X									
#	Indicator	Correct Response Key	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Total Correct in SA	Total Sample Size (all '0's and '1's)	
<b>Section 3: Family Planning</b>																								
1	Age of mother at first birth	20 – 35 Years																						
2	How long should a female wait after the birth of a child to have another?	2 or more years																						
3	What can a female or male do to avoid pregnancy?	3 or more of acceptable responses (ex. 1-10)																						
<b>Section 4: HIV/AIDS and Other Sexually Transmitted Infections</b>																								
1	Have you ever heard of an illness called HIV/AIDS?	Yes (if No or Unknown then Quest. 3-5 automatically incorrect)																						
2	Is there anything a man can do to avoid getting HIV/AIDS?	DO NOT CODE																						
3	What can a man do to avoid getting HIV/AIDS?	2 or more acceptable responses (ex. 1-19 or 14)																						
4	Is there anything a woman can do to avoid getting HIV/AIDS?	DO NOT CODE																						
5	What can a woman do to avoid getting HIV/AIDS?	2 or more acceptable responses (ex. 1-19 or 14)																						

## Tabulation Quality Checklist

As you tabulate your questionnaire, use the following checklist.

### ∅ Before You Begin:

1. Be sure the questionnaires you are about to tabulate match the type of tabulation table you have (right age, sex, etc.)
2. Confirm that questionnaires are in the correct order: 01–19, and that they have the correct number of pages.

### ∅ During Tabulation:

1. Work in threes.
2. The first person reads the correct answer on the tabulation sheet.
3. The second person looks at the answer on the questionnaire, determines if the answer is a "1" correct or a "0" incorrect. Mark an "S" for intentionally skipped questions that can not be judged as either correct or incorrect, and an "X" for questions that should have responses but the responses are missing. An "X" should be taken out of the denominator. An "S" should only be marked if the person should be taken out of the denominator. For example, if the question concerns a sick child but the respondent's child has not been sick, then all the questions about the sickness would be marked as "S" since they are irrelevant for this respondent. However, in most cases a skipped question is equivalent to an automatic incorrect and should be coded as "0." For example, if a respondent says they do

not know how to prepare ORS, then all subsequent questions related to ORS preparation would be automatically incorrect. Similarly, if a respondent does not have a vaccination card for their child, then all of the child's vaccinations would be judged as "0." On rare occasions it is an automatic correct and should be coded "1."

4. The first person records the answer on the tabulation sheet.
5. The third person confirms that the second person correctly determined if the answer should be coded "1" or "0" or "S" or "X" and that the first person recorded it properly.

Ø After Completing Each Column (all responses from one respondent):

1. Check that all the marks are in the same column; there should be no marks in the column to the right of the column just completed.
2. Check that there are no blank cells in the column just completed.
  - Be sure that no cells are blank. For any blank cell, review the questionnaire to see if it should be coded a 0, 1, S, or X.
  - Almost all responses should be a 0 or 1.
  - If the cell has an "S," then check to see that it satisfies this criterion: The respondent was skipped because the question should not be asked of her/him because she/he cannot be included in the denominator. In a way, this means they are not part of the universe being assessed.

EXAMPLE 1: Some questions are asked of mothers if their child has had diarrhea in the last 2 weeks. Children who did not have diarrhea are coded "S" because the question cannot be asked of them.



EXAMPLE 2: Some questions are not asked because the questions are automatically INCORRECT or 0. If a woman is asked if she has ever heard of HIV/AIDS, and responds "No," that question is coded a 0 since it is not the desired response – it is incorrect. Any following question that asks questions about how HIV is transmitted or prevented would be SKIPPED since they are automatically counted as INCORRECT (coded "0") since we know the person cannot know the correct response because she does not even know that HIV exists.

- If the cell has an "X," this means the respondent should have responded to the question but for some reason no response was recorded. This could be because the interviewer forgot to do this. Sometimes an interviewer circles several responses when they should have only circled one of them. These responses are also coded as "X" since there is no clear response. Also, if you cannot decipher the response written on a questionnaire, then "X" is an appropriate code. All "Xs" are excluded from the denominator in any calculation.
3. Ask a trainer to check your tabulation sheet after you have completed the first column.



#### Ø After Completing a Tabulation Sheet:

1. Enter the total number correct in the appropriate column.
2. Enter the total sample size in the appropriate column.
3. Look at all questions where the sample is less than 19 and confirm the reason:
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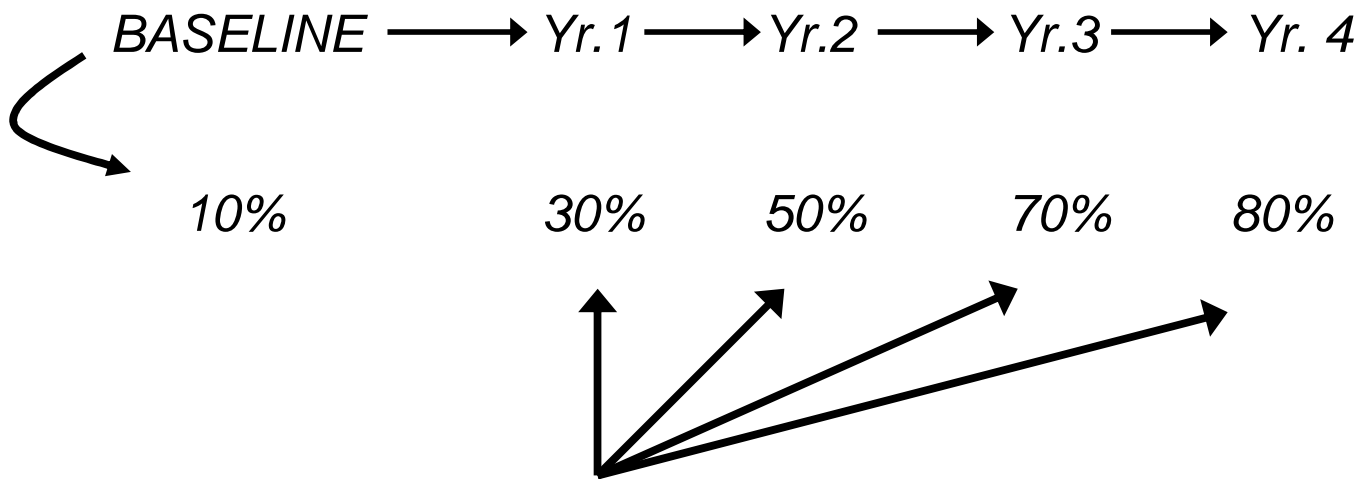
Summary Tabulation Table: Regular Monitoring Females 15 – 49 Years																	
NGO name: _____												DATE: _____					
#	Indicator	Total Correct in Each SA/Decision Rule						Total Correct in Program	Sample Size						Total Sample Size in Program	Average Coverage = $\frac{\text{Total Correct}}{\text{Sample Size}}$	Coverage Target
		1	2	3	4	5	6		1	2	3	4	5	6			
CIRCLE IF BELOW AVERAGE COVERAGE DECISION RULE MARK WITH A STAR (*) IF BELOW COVERAGE TARGET DECISION RULE																	
<b>Section 3: Family Planning</b>																	
1	Age of mother at first birth																
2	How long should a female wait after the birth of a child to have another?																
3	What can a female or male do to avoid pregnancy?																
<b>Section 4: HIV/AIDS and Other Sexually Transmitted Infections</b>																	
1	Have you ever heard of an illness called HIV/AIDS?																
2	Is there anything a man can do to avoid getting HIV/AIDS?	DO NOT CODE															
3	What can a man do to avoid getting HIV/AIDS?																
4	Is there anything a woman can do to avoid getting HIV/AIDS?	DO NOT CODE															
5	What can a woman do to avoid getting HIV/AIDS?																

LQAS Table: Decision Rules for Sample Sizes of 12-30 and Coverage Targets/Average of 10%-95%																		
Sample Size*	Average Coverage (Baselines) / Annual Coverage Target (Monitoring and Evaluation)																	
	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%
12	N/A	N/A	1	1	2	2	3	4	5	5	6	7	7	8	8	9	10	11
13	N/A	N/A	1	1	2	3	3	4	5	6	6	7	8	8	9	10	11	11
14	N/A	N/A	1	1	2	3	4	4	5	6	7	8	8	9	10	11	11	12
15	N/A	N/A	1	2	2	3	4	5	6	6	7	8	9	10	10	11	12	13
16	N/A	N/A	1	2	2	3	4	5	6	7	8	9	9	10	11	12	13	14
17	N/A	N/A	1	2	2	3	4	5	6	7	8	9	10	11	12	13	14	15
18	N/A	N/A	1	2	2	3	5	6	7	8	9	10	11	11	12	13	14	16
19	N/A	N/A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
20	N/A	N/A	1	2	3	4	5	6	7	8	9	11	12	13	14	15	16	17
21	N/A	N/A	1	2	3	4	5	6	8	9	10	11	12	13	14	16	17	18
22	N/A	N/A	1	2	3	4	5	7	8	9	10	12	13	14	15	16	18	19
23	N/A	N/A	1	2	3	4	6	7	8	10	11	12	13	14	16	17	18	20
24	N/A	N/A	1	2	3	4	6	7	9	10	11	13	14	15	16	18	19	21
25	N/A	1	2	2	4	5	6	8	9	10	12	13	14	16	17	18	20	21
26	N/A	1	2	3	4	5	6	8	9	11	12	14	15	16	18	19	21	22
27	N/A	1	2	3	4	5	7	8	10	11	13	14	15	17	18	20	21	23
28	N/A	1	2	3	4	5	7	8	10	12	13	15	16	18	19	21	22	24
29	N/A	1	2	3	4	5	7	9	10	12	13	15	17	18	20	21	23	25
30	N/A	1	2	3	4	5	7	9	11	12	14	16	17	19	20	22	24	26

N/A: *not applicable*, meaning LQAS cannot be used in this assessment because the coverage is either too low or too high to assess an SA. This table assumes the lower threshold is 30 percentage points below the upper threshold.

-  : shaded cells indicate where *alpha* or *beta* errors are  $\geq 10\%$ .
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## Defining Program Goals and Annual Targets



*PROGRAM GOALS FROM BASELINE  
UNTIL YEAR 4 OF THE PROJECT*

IMPROVEMENT



## How to Identify Priority Supervision Areas Using the Summary Tables During Regular Monitoring

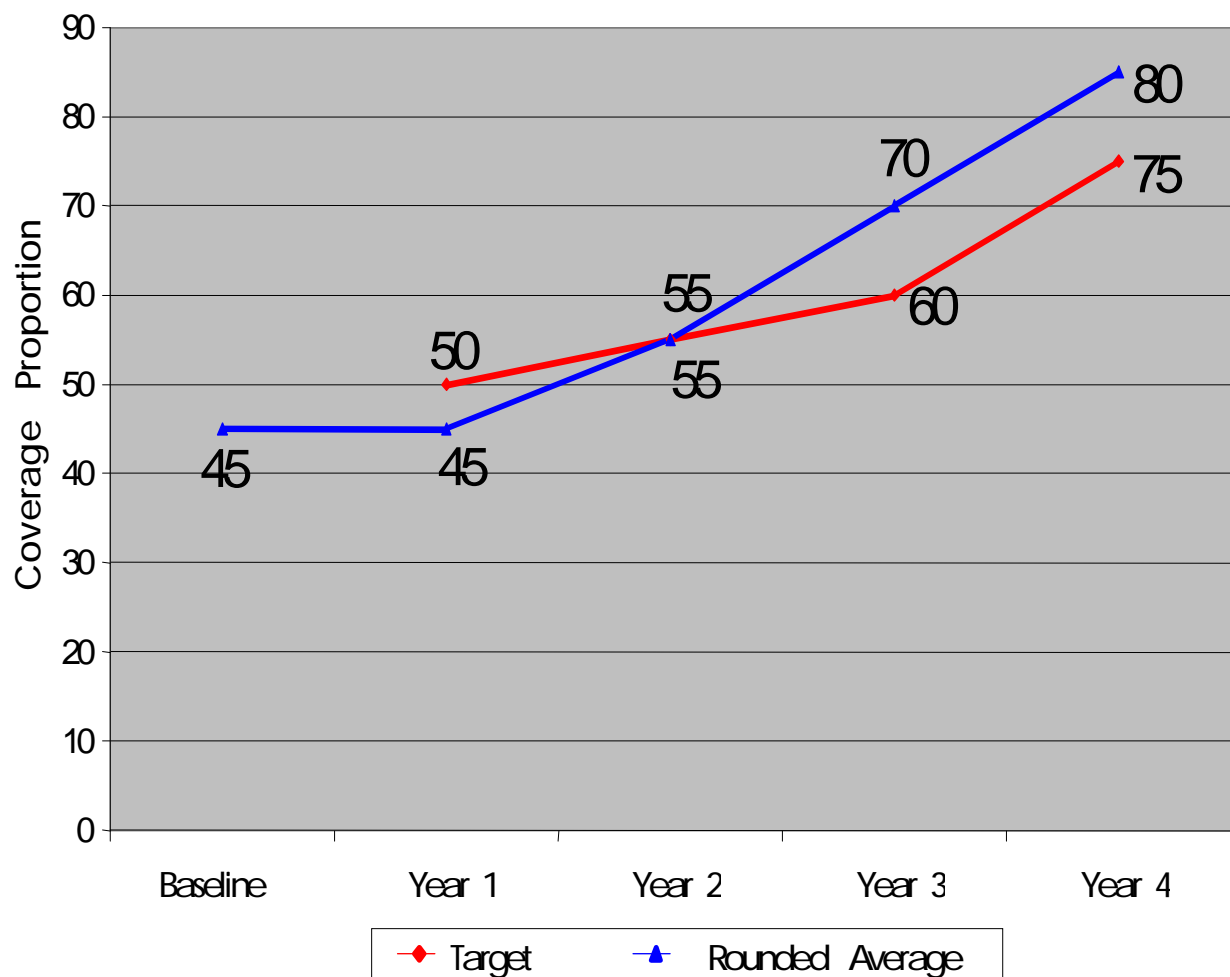
SA Classification Results		Priority Status
Below the Coverage Target	Below Average	Highest
Below the Coverage Target	Not Below Average	Second Highest
Not Below the Coverage Target	Below Average	Second Highest
Not Below the Coverage Target	Not Below Average	Not a Priority

## Using LQAS to Assess One Indicator Over the Life of a Project

	BASE-LINE	Year 1	Year 2	Year 3	Year 4
Target		50	55	60	75
<i>Decision Rule</i>		7	8	9	12
Rounded Average	45	45	55	70	80
<i>Decision Rule</i>	6	6	8	11	13
SA 1	12	13	14	12	12
SA 2	7	6*	7*	14	12
SA 3	6	9	12	11	17
SA 4	10	11	11	10	13
SA 5	5	5*	10	14	16
SA 6	6	5*	11	15	18
Average	40.4%	43.0%	50.9%	66.7%	77.2%

Which SAs are below average?  
 ... and which have reached the coverage target?

## Monitoring Targets and Average Coverage Over Time In a Catchment Area



## How to Analyze Data and Identify Priorities Using the Summary Tables

### Group Work

1. Discuss within your group the following (25 minutes):
  - Priorities among Supervision Areas for each indicator in a group of related indicators
  - Priorities within one Supervision Area among a group of related indicators
2. Report main findings to all workshop participants (10 minutes each)



## Monitoring Survey Report Format

CONTENT	MAXIMUM PAGES (13, Excluding Appendix)
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Program Overview (locations, objectives, main activities, beneficiaries, etc.)	1
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Main Findings: Accomplishments, Priorities by Supervision Area and for the Program as a Whole	5
Action Plans and Goals/Coverage Targets for Key Indicators	2
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Appendix (Photocopy Summary Tabulation Tables)	1

## Methodology (Illustrative of aspects that could be included)

- Ø Training in LQAS (principles and concepts).
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ü **Priorities:** Specify the program priorities by indicator, by Supervision Area and by type of respondent (e.g., men, women, and/or mothers with children of different age groups).

For example:

The percentage of women who know danger signs during pregnancy (that indicate the need to seek care) is below average only in Supervision Areas 3 and 5. We need to focus on Areas 3 and 5 in our efforts to improve this indicator.

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## Action Plans and Goals/Coverage Targets for Key Indicators

- Ø For each priority, list the main activities that your organization will implement to reduce the identified problems.
  
- Ø For example, a priority activity could be to identify terms, perceived causes, preferred treatments and preferred providers for the danger signs during pregnancy that women in the community recognize. Then we can further build upon the local understanding of pregnancy danger signs to develop appropriate strategies for improving recognition and care seeking .
  
- Ø Report key indicators, coverage targets, and goals for your future planning. Revise coverage targets as needed.



### Results of Monitoring Survey, Coverage Targets, and End of Project Goals (Men 15-49 Years)

Key Indicators	Baseline Average Coverage	Year 1 Coverage		Projected Coverage Target Year 2	Projected Coverage Target Year 3	End of Project Goal Year 4
		Observed	Target			

Bring This Table With You to Use in the Field or for Easy Reference.

LQAS Table: Decision Rules for Sample Sizes of 12-30 and Coverage Targets/Average of 10%-95%																		
Sample Size*	Average Coverage (Baselines) / Annual Coverage Target (Monitoring and Evaluation)																	
	10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%	80%	85%	90%	95%
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19	N/A	N/A	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
20	N/A	N/A	1	2	3	4	5	6	7	8	9	11	12	13	14	15	16	17
21	N/A	N/A	1	2	3	4	5	6	8	9	10	11	12	13	14	16	17	18
22	N/A	N/A	1	2	3	4	5	7	8	9	10	12	13	14	15	16	18	19
23	N/A	N/A	1	2	3	4	6	7	8	10	11	12	13	14	16	17	18	20
24	N/A	N/A	1	2	3	4	6	7	9	10	11	13	14	15	16	18	19	21
25	N/A	1	2	2	4	5	6	8	9	10	12	13	14	16	17	18	20	21
26	N/A	1	2	3	4	5	6	8	9	11	12	14	15	16	18	19	21	22
27	N/A	1	2	3	4	5	7	8	10	11	13	14	15	17	18	20	21	23
28	N/A	1	2	3	4	5	7	8	10	12	13	15	16	18	19	21	22	24
29	N/A	1	2	3	4	5	7	9	10	12	13	15	17	18	20	21	23	25
30	N/A	1	2	3	4	5	7	9	11	12	14	16	17	19	20	22	24	26

N/A: not applicable, meaning LQAS can not be used in this assessment because the coverage is either too low or too high to assess an SA. This table assumes the lower threshold is 30 percentage points below the upper threshold.

-  : shaded cells indicate where *alpha* or *beta* errors are  $\geq 10\%$ .
-  : hashed cells indicate where *alpha* or *beta* errors are  $> 15\%$ .





