**MULTIPLE INDICATOR CLUSTER SURVEYS**

**Main Fieldwork Training:**

**Recommendations and Template Agenda**

These recommendations are intended to be used as a guide for surveys when preparing for and designing the main fieldwork training schedule for MICS fieldwork staff.

The document is divided in two parts, Part One relates mainly to planning elements to be considered during the survey planning stage and Part Two mainly concerns the preparation and execution of the main fieldwork training itself.

# Part One: Planning the Main Fieldwork Training

## The training venue

The choice of venue will of course depend on the number of field staff, which in turn is determined by sample size, content, and duration of fieldwork. A simple staffing calculator is available here: [mics.unicef.org/tools](http://mics.unicef.org/tools) - MICS Listing and Fieldwork Duration Staff and Supply Estimates Template. The calculator includes an additional 10% of staff to enable selection of best performing trainees or for later replacement.

The overarching recommendations are:

* Fieldwork training should be carried out in a central location and on a residential site, such as a hotel or training/meeting facility, as this encourages interaction and team building. This also makes it easier to get to and from the class room, allowing adequate rest and studying/practising after or before class.
* A relatively small group of trainees is recommended (less than 100) so that training all staff in a single classroom is possible. This is the best way to ensure standardization of data collection (see below for recommendations when this is not possible).
* The venue should have adequate space, ventilation, and light, comfortable seating for all participants, provide quality food and snacks, and be away from distracting sounds and noises. Regardless, it will be necessary to arrange for a microphone.
* Projectors are essential as experience tells that Interviewers learn from visualisation. In the past, use of overhead projectors and questionnaires on transparent sheets was extremely useful, but such materials are often no longer available. Instead, it is recommended to use a tablet/touch screen to show the questionnaires and filling these using the stylus pen. Another option is to use a digital camera or web camera to project to the entire classroom how questionnaires are filled. This requires some experimentation with setup.
* Ideally, there should be additional space or small rooms for participants to spread out when they practice in groups.

#### If training in one room (large group) or even one location (decentralised) is not possible

Very large samples, surveys in very large countries, or in countries with very impractical logistics will make training in one location impossible or inadequate. It is simply not possible to train 200 or more people in one room while keeping track of their development or performance.

The main goal for survey administrators should be to ensure that all trainees receive identical training. This is very difficult to accomplish if training is carried out by different trainers in different locations. Alternatively, if two or more training sessions must be conducted simultaneously, organize communication meetings between all trainers at the end of the day.

In cases when different training locations (separate rooms or separate cities) are necessary, it is important to make sure that training for each team is the same, to the extent possible. It is best to use the same trainers and training materials for all the survey fieldwork training. This means that one group of trainers, who know the requirements of the survey very well, should do all the training, even if this means that they must repeat the training course several times. This requires many very skilled survey trainers, as it is equally important that the trained teams moving into fieldwork are adequately monitoring, particularly in the beginning of fieldwork.

In such circumstances, it is therefore highly recommended that a Training-of-Trainers (ToT) training is conducted. This may be integrated into the pre-test training, but it should be made a clear objective of the pre-test, and not just an anticipated result. Therefore additional time for the pre-test is necessary and training should be conducted by individuals who have experience in ToTs. All the participants in the ToT should develop capacity to be a trainer in the main fieldwork training for any module of any questionnaire.

##### Tips for large group training

Several very large surveys have appropriately decided to split the trainees into several groups. Some larger facilities have been identified and 2-4 large rooms have been utilized for training the individual groups. While identical training is practically impossible, one way to achieve a somewhat harmonious program is to assign certain sessions to the same trainer, who will then circulate through the rooms giving the same presentation. Each room must however have at least one permanent trainer that can monitor the development of the particular group throughout the course.

It would be preferable, if possible, to have a plenary room hosting overall lectures, and a number of rooms able to accommodate the individual groups.

##### Tips for decentralised training

In the least ideal situation where training must be conducted in separate locations, rather than organizing simultaneous training sessions, the same group of trainers should visit the sites separately to ensure a more standardised training, to the extent possible. Data collection may still start after the end of training in each site, but this approach is risky as trainers should be engaged heavily in field monitoring. On the other hand it is equally risky to delay start of fieldwork while conducting several trainings, as the earlier groups quickly forget the training unless they are immediately put to work in the field.

This approach should only be used when all other options are explored and even then, the number of decentralised trainings should be kept to two by all means possible. Conducting training at two or more sites simultaneously is not recommended.

## Recruitment/Selection of pool of field staff

It is key to identify individuals to invite to the training. The practise of recruitment or selection of staff to invite for training differ from country to country and from survey to survey. In some situations, the implementing agency can decide to recruit a brand-new set of staff and in others, select from an existing pool of staff, either from a previous survey or actual staff on payroll.

Here follows some overall recommendations to select the adequate mixture of participants and screen individuals for the training:

* Gender: The protocol demands that the individual questionnaires are administered by an Interviewer of the same sex as the respondent. Depending on the sample of individual men (all households, half, one third, etc.), one or more male Interviewers will be required on each team. If the survey does not include an Individual Questionnaire for Men, then all the Interviewers must be women. However, since it is also recommended, based on experience, that all teams include members of both sexes, it is advised that, the Supervisor or the Measurer is male (if no male interviewers). It is important that all interviews can be observed by the Supervisor, but Supervisors should be advised to leave an individual interview during the most sensitive subjects, such as sexual behaviour and victimisation or other questions where an observer of the opposite sex may make the respondent uncomfortable.
* Education: Normally, secondary education of trainees is a good target to bear in mind when recruiting. There are mixed experiences with university graduates: Recent graduates are often highly motivated and can be excellent Interviewers, but in other cases graduates have proven problematic by developing their own protocols in the field (being too smart). In any case, monitor performance carefully for all field staff.
* Experience: Having worked in the field on other surveys is certainly helpful for Supervisors and can be equally so for other staff. However, please be careful, as other surveys may not pay as much attention to quality as the MICS or may have instituted protocols that are not recommended for MICS and are difficult to “unlearn”. A typical example is for Interviewers that have worked on market research that is not always conducted according to the standards of a national statistical office or MICS.
* Language: All field staff must be completely fluent in the language(s) used for the training, which is typically also the language of the survey documents, such as the instructions and manuals. When deciding on the number of Interviewers fluent in other languages, it is important to have the fieldwork plan in mind, as well as a complete understanding of languages necessary in the different parts of the country. For example, if the fieldwork plan requires that just one team is fluent in a particular language, it is important that more trainees are invited than needed with this particular language skill. The “rule” of 10% is a rule of thumb that applies to total number of trainees, whereas it may be appropriate to invite 1-2 extra with a special language skill.
* Appearance: Fieldwork is demanding, not just on physical fitness, but also, for some, on the ability to dress appropriately.
* Attitude: A good candidate will show a respectful attitude and maturity and take interest in the work.
* Diversity: With the demands for languages above, there is a good chance that recruiting happens across the country. However, for various reasons, there may be a natural bias towards candidates from the capital city or other major urban areas. It is important to ensure that the opportunity to apply is given across the country, perhaps through advertising that covers all regions. Even if the language requirements can be met in the capital, some candidates tend to appear so sophisticated to a rural population that a good rapport can never be established.
* Avoid: It is risky to use staff currently employed for example in the health sector, both because of the issues mentioned under education and experience above and because a large part of the survey is measuring performance of the health sector and thus there is a potential conflict of interest.

An objective set of requirements, based on the above, should always be developed and be transparent applied, so that the pressure the survey managers may feel to hire certain individuals can be eliminated.

It is equally important that all applicants that meet the requirements are interviewed and tested as part of the selection process. This takes a lot of work and therefore planning far in advance is necessary. Very simple testing can be applied, i.e. if the candidate reads well, writes correct answers to simple questions, and can communicate in whatever languages are necessary and indicated by the applicant. There is a further need to at least check if candidates can operate simple functions in a tablet computer. Advanced computer literacy is not necessary, but a certain comfort with computers or smart phones is valuable. Additionally, measures must be able to see well (with glasses if used) as they will be reading out measurements that may be unclear in certain lighting.

# Part Two: Preparing for the Main Fieldwork Training

## Preparing for the training

Training should be planned well ahead of time. Before training the field staff, the following must be in place:

* Final questionnaires, i.e. pre-tests, reviews, and translations are completed as per the MICS Technical Collaboration Framework, and translations completed.
* Final CAPI application adequately tested. Problems will cause significant disruption and delay to training.
* The four documents: 1) Instructions for Interviewers, 2) Instructions for Supervisors, 3) Manual for Anthropometry and 4) Manual for Water Quality Testing must be completely customised and translated if necessary.
* Other field procedure documents, such as the Cluster Control Sheets, necessary accounting documents, or any specific ethical guidelines[[1]](#footnote-1), must also be prepared in advance.
* Logistics for the fieldwork are key and should allow for the fieldwork to commence immediately after the training completes: Payments, accommodation, transport, insurance, etc. are among some of the absolutely key components to have established protocols for. It is well known that unless fieldwork payments are paid on time, the quality of the entire fieldwork is jeopardised.
* Similarly, logistics for the training itself is key, including all monetary matters.
* Identified accessible field locations for practising and piloting household selection and interviews. Ensure that these areas are not selected in the survey sample and that transportation is arranged.
* Identified and arranged locations/institutions and transportation for anthropometric training (pre-schools, day care centres, hospitals, etc.)
* Prepared equipment, visuals, and tools for use in demonstrations during training and for practice and pilot. See appendix A for a typical list of materials.
* Field equipment, i.e. tested tablets and accessories, anthropometry and water quality testing items, first aid kits, flashlights, rainboots, umbrellas, bags, caps, t-shirts, response cards with literacy sentences, smilies, etc., must all be available for distribution.
* Agreed upon agenda and methodology – also for selection of field teams.
* Secretariat support for the duration of the training.

## Trainers and Experts

Trainers should be only those who are very familiar with the questionnaires and were involved questionnaire design, in conducting the pre-test, and/or will be involved in coordinating, managing and monitoring fieldwork. Trainers should have good facilitation skills and some subject knowledge. The recommendation is a minimum of two skilled trainers (per room, see below); the ideal trainer/student ratio is one trainer per fifteen trainees and one per thirty is the absolute maximum.

All trainers should be comfortable and thoroughly familiar with the questionnaire, including the skips and the purpose of the questions. If the trainers are not comfortable with the questionnaire, the trainees will pick up on this and doubt the quality of the survey. Similarly, if the trainers themselves begin to question the effectiveness or added value of some questions during the training, the trainees will doubt the survey instruments and will not be motivated to collect the data correctly. The pre-test training is an excellent occasion to establish an understanding of who can or should be a trainer in the main fieldwork training.

Expert speakers specialised in certain module topics should be invited to introduce topics and to clarify any concepts, theory, and technical terms contained in the module. All experts must be familiar with the content of the questionnaires and the indicators collected. It is important that experts do not comment or present their personal views on methodology, questionnaires, or cast doubt on the way questions are asked, as this can undermine the training.

While the template agenda has an expert included in all sessions, experts of the right calibre may not be available. It is however essential that at the very least the following experts come to the training, if the particular modules are included in the questionnaire:

* Education: Often the levels and grades prove difficult to code correctly. An expert, typically from the technical committee/Ministry of Education, would provide immediate answers to questions on coding of certain levels or types of education. This individual has typically been involved in the customisation of the modules (including the Foundational Learning Skills module) and the text/table customised in the Instructions for Interviewers.
* Water and Sanitation/Handwashing: An expert with this knowledge can help answer questions on coding that are typical among Interviewers and will understand what questions that require additional attention.
* Reproductive Health: An expert can provide the Interviewers grounding in concepts, for instance on contraception types and the variety of delivery care providers and culture.
* Dietary intake: A nutritionist with expertise to conduct the training introduction and Q&A on the specific food groups. This could be an individual from the expert group that provided input to the customisation of the module.
* A child health/immunisation expert: It may be necessary to invite several individuals depending on level of expertise. The immunisation expert is particularly critical as it is known that copying immunisation cards and/or probing for responses in the field is difficult. More detailed expertise may be required in surveys that include malaria indicators.
* All other experts listed in the agenda are equally important. It is critically important to only have experts presenting that are conversant in the questionnaire module and topic and have studied the instructions in detail. Experience unfortunately tells that all too often an expert will provide imprecise guidance and trainers will have to deal with both correction and diplomacy.

Special considerations:

* Anthropometry: It is imperative to invite experts in anthropometric measurement as these have the additional responsibility of selecting the Measurers based on their performance – See the template Agenda (starting on Day 12). A team of anthropometric trainers should conduct the training programme for Measurers and supervise the classroom and site practice for the anthropometric module. Ideally these are highly skilled trainers from a national nutrition programme that have experience in national nutrition surveys and who will also participate in field monitoring. Caution must however be taken that such trainers do not implement practises that do not adhere to protocols and practices of the MICS. Ideally, one trainer per 5 measurers should be sought. This team of trainers must be available for field practice and pilot as well (a total of 16 working days).
* Water Quality Testing: It is also imperative to invite experts in Water Quality Testing with experience with the particular methodology (membrane filtration). This is a specialised area that requires meticulous training – See the template Agenda (starting on Day 12). A team of water quality testing experts should conduct the training programme for Measurers and supervise the classroom and site practice for the module. Ideally these are highly skilled trainers from the national water quality regulator and/or laboratory. Caution must however be taken that such trainers do not implement practises that do not adhere to protocols and practices of the MICS. Ideally, one trainer per 6-8 measurers should be sought (10 per trainer is the limit). This team of trainers must be available for a half-day before the main training and the field practice and pilot as well (a total of 10 days).

As per the MICS Technical Collaboration Framework, UNICEF will ensure that the Regional Household Survey Consultant (typically from Day 1) and the Regional Data Processing Consultant (typically from Day 20) working in support of the survey will provide quality assurance and oversight of the training, as well as be available to provide technical assistance. UNICEF will additionally provide consultant for training of Measurers on Water Quality Testing (from Day 20).

It is highly recommended that focal points from the Technical Committee are present during their specialised topics or, depending on their level, are invited as expert speakers.

Names of trainers and experts need to be inserted for each session in the agenda.

## How to use the template for the Fieldwork Training Agenda

* The schedule, included at the end of this document, indicates how much time should be spent on modules and topics. The schedule needs to be adapted to the customised MICS questionnaires. Modules not included in the questionnaires can be deleted (and replaced with non-MICS standard modules if any have been added).
* Removing modules, and consequently training sessions, may allow more time for practice and discussion. It is not recommended that the overall length of the training is shortened even if the specific questionnaires do not contain all the modules contained in this template.
* The schedule is for 25 eight-hour working days, each including a one hour lunch break and two health breaks. Four off days have been inserted and should be placed as culturally or practically appropriate in the survey setting. It is not recommended to train for longer hours.
* Two days have been allocated for paper field practice, one additional for CAPI practice and one day for a full pilot. It is highly encouraged to take stock of performance and add an additional pilot day if necessary and possible.
* The template agenda includes the parallel Measurer Training. The parallel sessions begin of Day 12. In total, the training schedule for Measurers is 16 days (excluding the first eleven days of Interviewer training and off-days). The parallel sessions include training for both anthropometric measurements and water quality testing. If either one is not included, significant adjustments will have to be made to the agenda.

#### Day 1 of the training

The opening day should be kept light, but also set the stage for the task ahead:

* All trainers and members of the survey management should be introduced.
* One or more high level officials should be invited to give opening speeches.
* Each participant should introduce themselves (keep it short).
* The survey should be introduced along with key concepts and norms for the training and the agenda.
* Trainees should be briefed on all logistical arrangements and payments, so that they are not distracted by these details during the training.

## Structuring the individual module sessions

Training sessions for each module should start with an overall short introduction to the module topic conveying why the topic is of importance. This introduction can be done by the topical expert who needs to be instructed to be concise. The session should then proceed by a detailed description of each question with instructions on how to administer the question and follow the skip patterns. This session is done by MICS trainer, who will use examples to illustrate flow of interview. When appropriate, sessions must address established ethical protocols, ranging from how to handle private information or specifically how to deal with respondents volunteering information on unlawful behaviour either by themselves or others, or protocol when observation or measurement reveal critical conditions.

Every session should end with time allocated for questions and answers.

If time allows, trainees can practice administering the module; substantial practice time must be given at the end of each questionnaire.

## Identifying the Interviewer, Measurer, Supervisor, and Data Processing roles

In most cases selections are based on the practise of the implementing agency, which typically have a well-established procedure on this. However, the following is highly recommended:

* Supervisors: In most cases these are predetermined because of experience from previous surveys. It is advisable to remain flexible and not guarantee Supervisor roles to any participants, as some may not be performing up to the standard required. This is particularly relevant with regards to computer literacy and ability to internalise the work processes of supervising a CAPI survey team. Regardless of experience, it is recommended to cover all aspects of their roles in detail to refresh and ensure understanding of all responsibilities. Many supervisory processes have changed and will likely be different from what has been standard practise. As for all other roles, it is advisable to train extra individuals (minimum 10% extra).
* Interviewers: It is strongly recommended that Interviewers are selected as a result of the performance during the training. Some Interviewers need additional time to internalise material and work, so it is recommended to not release any candidates until the end of the full training. Remember that the best Interviewers are not necessarily perfect using the tablet as an interviewing tool, and, vice versa, the most computer literate, i.e. immediately adopting the CAPI approach, may not be good Interviewers.
* Measurers: Two options are prevalent in trainings. Either trainees for the position of Measurer are identified in advance, e.g. from the staff of a nutritional surveillance survey, or they are selected from the overall group of trainees before Day 8, when the separate Measurer training starts. Either way, the best performing should be selected as part of the dedicated anthropometric and water quality training sessions. The assessment should include results of the anthropometry standardisation tests (see appendix B).
* Data Processing Staff: All data processing staff with any role in the survey should participate to familiarise themselves with the questionnaires and to be on call during the CAPI segments and pilot.

Quizzes, small tests, and observations in class and field form the basis for selection. Once all questionnaires have been covered the trainees will be given a final quiz on contents across the questionnaires. The reason for training more staff than needed is so that the best can be selected. Individuals that are not selected can be used as substitutes for those that show poor performance in the field, fall ill, or otherwise need to be replaced.

## Additional training sessions

Supervisors require special training on their roles. In this template, time has been allocated for such training, but the amount of training required obviously differ between experienced Supervisors and those new to the role. Additional sessions are recommended outside training hours to get all up to speed. It is often very useful to integrate predetermined Supervisors into the facilitators meetings.

A facilitator meeting should be held every day, where all facilitators participates and share their views on the progress and discuss the events of the next day.

Measurers will follow a separate training schedule and join the full group taking part in the fieldwork practice and pilot, but also practising anthropometric measurements in a day care centre or equivalent institution where they will be able to perform may measurements on children age less than 5 years old. It is of critical importance that they can train on children of all ages, as particularly the very young – under 6 months – are difficult to measure.

## Supplies required for training

Appendix A lists typical supplies required for the main fieldwork training.

Each participant should be provided with the Instructions for Interviewers, Manual for Anthropometry and Manual for Water Quality Testing. The Instructions for Supervisors should be handed out only to those selected for these roles. If Supervisors are predetermined, the Instructions can be shared immediately and Supervisors can be instructed to provide feedback.

Participants should all receive a blank copy of the questionnaires at the start of the training. As the training proceeds, they should be supplied with further blank copies to be completed in the practice sessions. In total, an estimate of at least 8 sets of questionnaires per participant should be available during the training. Extra full copies will be required for the two field practice days.

Furthermore, it is advisable that extra copies are made of rosters (for targeted training), i.e. List of Household Members, Education module, ITN, Fertility with Birth History, etc. Extra sheets of the Breastfeeding and Dietary Intake, Immunisation, Foundational Learning Skills and Anthropometry modules should also be made available, as should extra copies of cover pages of the individual questionnaires.

## Training methodology

It is very important that training and practice sessions are conducted in a participatory fashion. Trainers should encourage trainees to ask questions and make sure that everything is clear and understood before the actual fieldwork starts. In addition, trainers should ask questions to trainees, ask them to read the questionnaires and manuals aloud, and practice the administration of questionnaires as much as possible.

Regarding practice in the classroom, there are several ways of ensuring that trainees get experience in asking the questions. These include demonstration interviews, front-of-class interviews and mock interviews. Additionally, real respondents may be brought into the classroom (or in smaller groups) for practice. Volunteers may come from the staff of the training facility or the surrounding area. It is important that they are indeed volunteering and make truly informed consent prior to arriving. It is best to schedule practices for the latter part of the day.

The general format followed is a short introduction to the concepts of module, presented by an expert, followed by a question-by-question walk-through of the module by a trainer. During both sessions, the participants are encouraged to ask questions, but also to be engaged by reading questions out loud or reading from the manual. The idea is to ensure that interviewers ask questions as they are written and refer to the manual when in doubt – and finally in the field, if the manual does not provide an answer, to refer to their Supervisor with questions.

To build trust in the questionnaires, a good exercise is to invite the trainees to name the different response categories, particularly on those that may be difficult to categorise. By illustrating to the class that all possible categories are handled with the existing options, the trainees understand that the tool is comfortable and only a very few responses will fall in the “other” category or requires probing.

Much of the presentation material can be inspired by the PowerPoint presentation provided during the MICS Survey Design Workshop, as well as the actual questionnaires and manuals customised for the survey. The presentations are available at mics.unicef.org/workshops.

Depending on the time available during each modular session, typically several modules are clustered together before the group breaks into practice. A rule of thumb is that most practice on the first days should be in front of class through demonstration, mock interviews, or role play, whereas later, the class can break into groups of three, each playing the part of Interviewer, respondent and observer/Supervisor. This can happen once the trainees are a bit more comfortable with the questionnaires. During this time, the entire team of trainers will roam and observe.

A good practise may also be to assign each trainer to a specific group of participants, so that this trainer gains more detailed knowledge of individual progress. This will depend on the number of skilled trainers available.

Show the participants how to fill out the questionnaires so they can immediately pick up on the flow logic. For this, use a tablet/touch screen pc with a stylus, or even a web camera, and project the paper questionnaire to a large screen. Test the chosen approach before training.

Certain modules or questions, e.g. the Education Module, the ITN Roster, the Birth History, Maternal Mortality, Foundational Learning Skills, etc. require individual training time.

Below follows some good practises obtained through experiences and ideas in past MICS trainings:

* Break-out groups by language to review and practice in individual languages.
* Quizzes – both in plenary with no grading, but also quick 5-question simple written tests. This will help facilitators guide recap sessions and final selection of staff.
* Ice breakers and energisers are very important. They should be short and coordinated, so on-the-spot ideas are less welcome than something that is planned. Different groups among the participants can be asked to deliver an energiser the day before. This will also encourage some team-building early on.
* It should be made clear that it is joint responsibility of all the trainers and facilitators to make the trainees well conversant in all the questionnaires. One single trainer may take overall responsibility for a questionnaire, but she/he is not sufficient to guide one questionnaire to a large group of trainees.
* The filled-in questionnaires in practice sessions and the field practice or piloting should be checked by the trainers/facilitators and feedback can be given to each trainee individually, after hours, and used anonymously in overall plenary feedback sessions.
* If required, split the group into males and females for selected sessions on women’s and men’s questionnaires if the local culture does not permit having males and females discuss issues of contraception, fertility, unmet need, sexual behaviour, attitudes towards domestic violence, female genital mutilation/cutting in a mixed setting.
* Some facilitation teams have found it useful to take a photo of each participant and print these, along with the name, on individual sheets. Facilitators can use this to make easy reference to individuals and for taking notes on observations. This is particularly useful when training large groups.

## Field practice and pilot

The field practice days should cover both urban and rural areas and aim to train all participants through practice with real subjects under field conditions. Thus, the most important goals of those days are to expose the trainees to as many interviews as realistic and for the trainers to observe as many situations as possible. The first field practice will be with paper questionnaires and the second using the CAPI application.

While the pilot also functions as extra field practice for the Interviewers, the objective is to ensure that team roles, logistics, management will function smoothly when the field work starts. This includes, but is not limited to, Supervisors locating and confirming cluster boundaries, assigning work, spot-checking, etc. While working hours are indicated as nine to five, obviously, all participants will have to prepare in advance and complete after the assigned households are completed. This must be treated as a full dress-rehearsal of a typical field day for survey managers to assess the full picture of fieldwork implementation.

## Building team spirit and motivation

Outside a participatory training delivery, the below are some ideas on how to motivate the group. Try using the experience among survey managers of when they themselves felt about the first time they participated in similar trainings:

* Inviting a high-level official to open and close the training course can help ensure that trainees believe in the seriousness of the survey and conduct themselves in a responsible manner. Continue to stress the importance of the survey throughout the training.
* Pick a good time to hand out some of the fieldwork equipment made for the MICS, e.g. hats, t-shirts, bags, etc. An option is to not give all at once.
* Use the media. Over the four-week period of the training, one or two stories in the news will make participants excited.
* Use name tags to allow for all to get to know each other – including trainers.
* Issue certificates showing course completion.
* Do not underestimate the difficulty of the job that the teams will perform. Fieldwork is very hard, with long hours under strenuous conditions. Make sure that the participants understand this without scaring anyone. It is good practise to weave in real life experiences with the lectures, while of course maintaining the seriousness of the work.
* Set the example for appropriate behaviour.
* Do not name individuals when referring to mistakes made.

# Appendix A: List of typical materials for main fieldwork training

Materials needed will vary between surveys due to the different content of questionnaires. The following is a broad list that will need to be customised. It does generally not include materials that should be provided for fieldwork:

## Instructions and Questionnaires

One copy for each participant and facilitator of:

* Instructions for Interviewers
* Manual for Anthropometry
* Manual for Water Quality Testing
* Interviewer’s Cluster Control Sheet
* Training Agenda

Some additional copies are recommended to have at hand.

One copy for each Supervisor and all facilitators of the Instructions for Supervisors and the Supervisor’s Cluster Control Sheet.

Eight copies of all questionnaires for each participant (excluding the Water Quality Testing and GPS Data Collection Questionnaires, which are only distributed to appropriate trainees). One copy of all for each facilitator. Extra copies should be at hand. This does not include copies needed for field practices. The numbers needed for these field days will depend on coverage and time in the field, as well as estimated number of eligible individual respondents. However, ten copies of each questionnaire per participant should be more than adequate in most cases.

Note that the required number of copies are in total and does not consider questionnaires in multiple languages, which may or may not be required in field practice locations.

Furthermore, it is advisable that extra copies are made of rosters (for targeted training), i.e. List of Household Members, Education module, ITN, Fertility with Birth History, Foundational Learning, etc. Extra sheets of the Breastfeeding and Dietary Intake, Immunisation, and Anthropometry modules should also be made available, as should extra copies of cover pages of the individual questionnaires. Sheets for the anthropometric standardisation tests should also be copied in adequate amounts (see appendix B).

Arrangements for rapid photo copying services are advised.

Do note that all teams must carry paper questionnaires to the field (approximately 5% of total sample) as back-up for tablets malfunctioning. Also remember that Anthropometry and Water Quality Testing forms are filled by hand before being entered on the tablet and an adequate amount of copies must be with teams.

## Training visuals and tools

Household questionnaire: Pictorials or photos of building materials of dwelling (please send to the Regional MICS Coordinator for inclusion into global repository)

Pictorials or photos of water, sanitation and hygiene facilities (please send to the Regional MICS Coordinator for inclusion into global repository)

Samples of insecticide treated nets and other nets

Salt test kits

Iodized and non-iodized salt (materials for testing practice)

Individual Women’s Questionnaire: Immunization/Health cards provided during pregnancy

Types of preventive anti-malarials

Child health cards for recording birth weights

Questionnaire for children under 5: Example of birth certificate(s)

Examples (many, the more the better) of filled in immunization cards for children (those in use for the three years prior to the fieldwork)

Weighing scales (MICS recommended brand)

Height boards (MICS recommended brand)

Calibration weights (see manual)

Types of ORS, antibiotics, anti-malarials, zinc, anti-diarrhoea, and anti-motility medicines

Water Quality Testing Questionnaire: Water testing kits (at least one for each two measurers) and consumables for 30 tests. Please refer to calculations done using the MICS Listing and Fieldwork Duration Staff and Supply Estimates Template

 Contaminated and uncontaminated water for practice tests

Logistics tools: Examples of maps and household lists, expense tracking sheets, and similar for the Supervisor training.

Facilitation tools: A/V system with multiple microphones

 Tablet/Laptop for presentations

 Projector(s) and screen(s)

For the purpose of showing how to fill questionnaires, either a high-end touch screen laptop/tablet with pen allowing fairly precise writing on screen or a high definition (external) webcam able to clearly project filling a questionnaire.

Flipcharts with large tipped pens in multiple colours. Blackboards or whiteboards are also recommended, similarly with chalk/pens of multiple colours.

Administration tools: Daily attendance sheets

 Name tags and ID badges

List of attendants with space for note-taking (perhaps with photo) by facilitators.

## Stationary

Each participant should receive two blue ball point pens and a note book (in addition to clip board and bag for fieldwork).

Each Supervisor and all facilitators should additionally receive one red ball point pen.

It is recommended to not distribute pencils or erasers, since the participants are instructed to avoid pencils when filling questionnaires.

# Appendix B: Anthropometric standardisation test

Standardisation tests are integral to anthropometric training and time is allocated for two tests in the standard agenda. The concept is to measure the performance of each measurer against him/herself, against the whole group and against measurements performed by the expert trainers.

Usually, a test involves setting up stations each with a child and caregiver. A station includes a length/height measurement board and a scale (to be used in survey). Each Measurer should at minimum measure 10 children twice and be the assistant to 10 measurements twice. A “measurement” here and in the following referring to both a height/length and weight measurement, in effect two measurements.

Example 1: With twelve trainees, for a survey with ten teams, 6 measurements can be performed at a time (2 Measurers involved with one child at a time), leaving 4 stations unoccupied and allowing children a small rest. Each child will be measured twice by each measurer, i.e. 24 times plus the measurement of the Anthropometric Measurement Experts.

Example 2: In much larger surveys, e.g. 30 teams with 36 trainees, the recommendation remains at minimum 10 measurements. However, since only 20 measurers would be engaged at a time on 10 children, the recommendation is to increase to number of stations (and children), in this case to 18, so that all Measurers can be engaged. In this case, if all children are to be measured twice by each Measurer, this would result in 72 measurements of height/length and weight, plus the Expert measurement. For most children, this number is much too high. As the recommendation is minimum 10 measurements per Measurer, each child does not need to be measured by all measurers, as this would result in 18 x 2 measurements per Measurer. The recommendation is to find an appropriate number of measurements that allows the test to run smoothly. In this scenario, perhaps 12 x 2 measurements per Measurer is what could work, resulting in 12 x 2 x 36 trainees = 864 measurements / 18 children = 48 measurements per child. This is still a high number, and reducing further to the minimum recommendation is suggested.

The recommendation is for children to be of varying ages and half the group to be below age two and the other half above. Stress to children should be avoided and the test should be conducted in a spacious location, preferably indoors.

Before starting the test, and out of sight of the trainees, the anthropometric expert trainers measure each child and record their results on a form based on Appendix B1.

On arranging the process, the most practical way is to have half the measurers rotate clockwise between the stations, each starting one on every station and the other half rotating counter-clockwise, also starting one on each station. In the first full rotation, one half acts as measurers and the other half as assistants. In the second rotation, the roles are switched. After completion of two rounds, all trainees will have measured each child once (and acted as assistant on each child once), that is, if the number of teams are closer to example 1 above. In very large surveys, Measurers will not be measuring all children.

Each measurer will be carrying a sheet (see Appendix B2) to record measurements of the children assigned to them. After completing all measurements, the sheets are handed to the trainers.

Following this and a break, new sheets are handed to measurers and the exercise is repeated (on the same children). All data are entered in a simple spreadsheet for analysis. Please note that during the first standardisation test, Measurers (and assistants) should be corrected by the expert trainers. While the test is designed to measure performance, it is still also a training exercise and any error in protocol should be addressed immediately. In the second test, the trainees should not be corrected, but notes taken by the Experts for later address.

Please note that a large survey, with many trainees, will extend the length of the test, despite Measurers not measuring all children. This should be addressed in the agenda. It is not recommended to have more than 20 children participate in the test. Some incentive for participating children and mothers is recommended.

In the following appendices are included:

* Expert measurement (reference measurement) sheet
* Measurer sheet (one for each of the two rounds)
* Example data entry sheet

The expert trainers will be analysing the data. This can be done in a variety of ways and is not described here. In general, analysis should investigate difference to expert measurement, between measurements and between measurers. The technical error of measurement (TEM) should be estimated and be used as the basis for decisions about re-training and selection of Measurers. WHO/UNICEF will be publishing an ebook detailing this method in late 2017. The reference will be included here in an updated version, as soon as available. In the meantime, please contact the Regional MICS Coordinator to hear news on availability.

## Appendix B.1

**EXPERT MEASUREMENTS FORM**

**Date of test: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s ID number** | **Name** | **Date of birth** | **Sex** | **Weight** | **Length/Height** |
| **DD** | **MM** | **YYYY** | **M** | **F** | **XX.X** | **XXX.X** |
| 01 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 02 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 03 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 04 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 05 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 06 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 07 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 08 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 09 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 10 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| … | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | \_ \_ | \_ \_ \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |

Note: Please ensure each child has a unique ID number (for instance by putting a sticker with the number on the wall by the child or on the board). In some settings, not all children will be measured by every Measurer, in which case the Measurer will only fill information for the children (IDs) assigned on the Appendix B2 forms.

## Appendix B.2A

**MEASURER FORM (Measurement #1)**

**Date of test: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_**

**Name/ID of Measurer: \_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_ \_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s ID number** | **Name** | **Age** | **Sex** | **Weight** | **Length/Height** |
| ***Copy*** | ***Copy*** | ***Copy*** | **XX.X** | **XXX.X** |
| 01 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 02 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 03 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 04 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 05 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 06 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 07 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 08 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 09 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 10 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| … | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |

## Appendix B.2B

**MEASURER FORM (Measurement #2)**

**Date of test: \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_**

**Name/ID of Measurer: \_\_\_\_\_\_\_\_\_\_\_\_ \_\_ \_\_ \_\_**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s ID number** | **Name** | **Age** | **Sex** | **Weight** | **Length/Height** |
| ***Copy*** | ***Copy*** | ***Copy*** | **XX.X** | **XXX.X** |
| 01 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 02 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 03 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 04 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 05 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 06 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 07 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 08 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 09 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| 10 | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |
| … | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_ \_ | M | F | \_ \_ . \_ | \_ \_ \_ . \_ |

## Appendix B.3

|  |
| --- |
| **Example data entry sheet for standardisation test** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Date of measurement: | DD/MM/YYYY |  |  |  |  |  | **Test results** |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Child identifiers** |  | **Expert measurement** |  | **Measurer 001 - name** |  | **Measurer 002 - name** |  | **Measurer 00X - name** |
| ID number | Name | Date of birth | Age in years | Sex |  | Weight | Length/ Height |  | Weight 1 | Length/ Height 1 | Weight 2 | Length/ Height 2 |  | Weight 1 | Length/ Height 1 | Weight 2 | Length/ Height 2 |  | Weight 1 | Length/ Height 1 | Weight 2 | Length/ Height 2 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| … |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

**SURVEY NAME, YEAR**

**Main Fieldwork Training Agenda, date – date, venue**

|  |
| --- |
| **Day 1 – Weekday, date** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 08.30 - 09.00 | Registration |  |  |
| 09.00 – 09.30 | Welcome: What is a Multiple Indicator Cluster Survey? | MICS CoordinatorNational MICS Consultant | MICS VideoPT |
| 09.30 – 10.30 | The importance of MICS for Country. | High level OfficialUNICEF Management | Speeches |
| 10.30 – 11.00 | *Health Break* |  |  |
| 11.00 - 11.30 | Introduction of trainers/workshop participants. | Trainer | ExerciseIce breaker |
| 11.30 – 12.00 | Overview, administration and workshop norms of the training. | Trainer | PT & Q&A |
| 12.00 – 12.30 | **MICS Framework*** Sample Modules and topics.
* How indicators are constructed
* Management of fieldwork
* Why PAPI training for CAPI survey?
 | Trainer | PT & Q&A |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 15.00 | **The Survey Instruments*** Questionnaires and eligibility for each questionnaire.
* General rules and conventions of MICS questionnaires.
* Maintaining flow and integrity of questions.
* Guidance on how to fill the questionnaires and how to correct errors.
* Using the manual.
 | Trainer | PT & Q&A |
| 15.00 - 15.15 | *Health Break* |  |  |
| 15.15 - 17.001:45h | Household Questionnaire: Household Information Panel* How and when to fill in the information panel.
* Seeking consent/Ethical interviewing
* Background on sample design and sample selection.
* Team assignments (designated roles and coding).
* Dwelling/Household/Family.
* Result of the Interview.
* Revisits and recording of revisits.
* Importance of recording time.
 | Trainer | PT & Q&A |
|  |
| **Homework** | Study the Household Questionnaire and Manual. |

|  |
| --- |
| **Day 2 - Weekday, date** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.45 | Recap of previous day. | Trainer | Q&A |
| 9.45 – 10.451:00h | Household Questionnaire: List of Household Members* Importance of the roster.
* Defining usual residents (de jure) and prompting for inclusion of all members.
* Defining head of the Household and establishing relationships.
* Importance of date of birth/age. Introduction to calendar of events.
* Use of HL7 for ITN.
* Importance of line numbers and eligibility.
* Identifying primary caretaker.
* Procedure for filling the roster and use of continuation sheets.
* Introduction to Information Panels of individual questionnaires.
 | Trainer | PT & Q&A |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 – 11.450:45h | Household Questionnaire: List of Household Members* Practice on filling in the household listing form.
 | Trainers | DemoPaired work |
| 11.45 – 13.001:15h | Household Questionnaire: Education* Introduction by Education Expert: Description of education system(s) in the country.
* Eligibility for and contents of the two pages of the module.
* Defining current and previous school year.
* Defining grade and level.
* What is meant by completion and attendance?
* Importance of background characteristic.
 | Education ExpertTrainer | PT & Q&A |
| 13.00 – 14.00 | *Lunch* |  |  |
| 14.00 - 15.151:15h | **Household Questionnaire: Household Characteristics*** Sensitivities of language, religion and/or ethnicity issues.
* How to ensure only rooms used for sleeping are counted.
* Importance of observation before and during the interviews.
* How to classify when different floor, walls and/or roof types are observed within the same household.
* Possessions/Assets: Making respondents comfortable.
 | Trainer | PT & Q&APictorials |
| 15.15 - 15.30 | *Health Break* |  |  |
| 15.30 - 16.150:45h | **Household Questionnaire: Social Transfers*** Introduction by Social Transfers Expert: Definition and description of programmes in country, as well as details of those specifically targeted in questionnaire.
* Linking the module to Social Transfer questions in Education Module.
* How to deal with sensitivities around social sector support issues.
 | Social Transfers ExpertTrainer | PT & Q&A |
| 16.15 – 17.00 | Practice. | Trainer | Paired workRole play |
|  |
| **Homework** | Practice Education, Household Characteristics and Social Transfers Modules. Use manual. |

|  |
| --- |
| **Day 3 - Weekday, date** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. | Trainer | Q&A |
| 9.30 – 10.301:00h | **Household Questionnaire: Household Energy Use*** Introduction by Energy Expert: Overview of household energy use in the country, for cooking, lighting and heating.
* Presentation of pictorials/catalogue in Instructions.
* How to differentiate between the different types of fuel use.
* How to probe for chimneys and fans.
 | Energy ExpertTrainer | PT & Q&APictorials |
| 10.30 – 11.150:45h | **Household Questionnaire: Insecticide Treated Nets*** Introduction by Malaria Expert: Overview of nets used in country, how to distinguish, and what to expect. Where is there an IRS programme in place?
* Importance of observing all nets.
* How to differentiate between the different types of bed-nets using samples.
* Re-treated nets.
* Use of the roster for recording.
* Precise identification of who slept under the ITN.

**Household Questionnaire: Indoor Residual Spraying*** Identifying a regular programme for IRS and not spraying by others.
 | Malaria ExpertTrainer | PT & Q&ADemo. |
| 11.15 – 11.30 | *Health Break* |  |  |
| 11.30 – 12.301:00h | **Household Questionnaire: Water and Sanitation** * Introduction by WASH Expert: What are the most typical installations, what do they look like and what are they called?
* Explanation of concept of source of water.
* Water treatment at home vs. treatment at source.
* Time to source (return journey + waiting time) and implications on water use.
* What is sufficient water.
* Improved sanitation – Sewerage and disposal systems.
* Determining shared facilities.
* Brief introduction to Water Quality Testing.
 | WASH ExpertTrainer | PT & Q&APictorials |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 14.000:30h | **Household Questionnaire: Hand Washing*** Introduction by WASH Expert: Review of any previous data and common practises across the country.
* How and when to observe place of handwashing and presence of water and of soap or cleaning agent.
* When not to observe.
 | WASH ExpertTrainer | PT & Q&A |
| 14.00 – 15.001:00h | **Household Questionnaire: Salt Testing*** Introduction by Micronutrient Expert: What is the purpose of iodisation and what can be expected in the field.
* Demonstration with video and practice.
* Closing the HH questionnaire and next steps.
 | Micronutrient ExpertTrainer | PTDemo.Q&APractice |
| 15.00 - 15.15 | *Health Break* |  |  |
| 15.15 – 17.00 | **Household Questionnaire** Practice. | Trainer | Paired workRole play |
|  |
| **Homework** | Study the Questionnaire for Individual Women/Men and Manual. |

| **Day 4 - Weekday, date** |
| --- |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day, the Household Questionnaire. | Trainer | Q&A |
| 09.30 - 10.150:45h | **Questionnaire for Individual Women/Men*** Preparing for the interview for women and men.
* Differences between questionnaires for women and men.
* How to ensure privacy and confidentiality.
* Obtaining cards and documentation.

**Questionnaire for Individual Women/Men: Information Panel*** Obtaining consent.
* Consent for Girls/Boys age 15-17
* What is refusal, partially completed, and incapacitated?
* Procedure for dealing with refusals.
* Importance of revisits, what constitutes a revisit, how to record the revisit.

**Questionnaire for Individual Women/Men: Background*** Importance of age – ensuring month and year.
* Use of local calendar.
* When and how to change the information in the List of Household Members.
* Questions on education.
* Literacy sentences: How to test.
* How to get information on grade and level.
* Migration and health insurance questions.
 | Trainer | PT |
| 10.15 – 10.450:30h | **Collecting age data*** Obtaining age data from the proxy respondent in Household questionnaire vs. in the individual questionnaires.
* The calendar of events.
 | Trainer | PT & Q&A |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 11.300:30h | **Questionnaire for Individual Women/Men: Mass Media and ICT*** Interpreting the response codes.
* Differentiate between computing and communication devices, e.g. smart phones for internet use but not for computer use.
* Understanding computer skills
 | Trainer | PT & Q&A |
| 11.30 – 12.301:00h | **Questionnaire for Individual Women/Men: Fertility/Birth History*** Live births.
* Importance of probing for first birth.
* Importance of obtaining date of birth.
* Definition of living away.
* Differentiate between own, foster and step children.
* Dealing with impatience and annoyance due to repetitive questions.
* Reconfirming all births.
* Differences to Fertility module for Men.
 | Trainer | PT & Q&A |
| 12.30 - 13.30 | *Lunch (agenda continues next page)* |  |  |
| 13.30 - 15.001:30h | **Questionnaire for Individual Women: Fertility/Birth history*** Need for recording and verifying details.
* Importance of complete birth dates for all children.
* How to fill out the module, demonstration.
* Recording age at death.
* How to correct the entries in the BH module.
* Use of additional questionnaire.
* Need for cross checking women’s age and birth intervals.
 | Trainer | PT & Q&A |
| 15.00 - 15.15 | *Health Break* |  |  |
| 15.15 – 17.00 | **Questionnaire for Individual Women: Fertility and Birth history** Practice on Fertility/Birth History module. | Trainer | Paired workDemo.  |
|  |
| **Homework** | Study the Questionnaire for Individual Women/Men and Manual. |

| **Day 5 - Weekday, date** |
| --- |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. | Trainer | Q&A |
| 09.30 – 09.450:15h | **Questionnaire for Individual Women: Desire for Last Birth*** Introduction: The complex met need indicator.
* Eligibility for the module – using the name of the last-born child.
* Changing the question based on earlier response.
 | Reproductive Health ExpertTrainer | PT & Q&A |
| 09.45 – 10.451:00h | **Questionnaire for Individual Women: Maternal and Newborn Health*** Introduction by Maternal and Newborn Health Expert: Expected answers, variety across country, terminology, national targets.
* Importance of probing.
* Definition of antenatal care visits.
* Classification of providers.
* Number of antenatal visits and checks.
* Asking to see Health Card.
* Difficulty of recall for Tetanus Toxoid.
* Medications for malaria and other preventive drugs, explain with samples.
* Need to arrive at preventative treatment not curative.
* Definition of skilled attendant.
* Identifying place of birth.
* Difference between C-section and other types of deliveries such as with forceps, vacuum.
* Definition of skin-to-skin contact, using the picture
* Wiping vs. bathing and probing for time.
* Importance of cord-care.
* Examples of applications relevant across country.
* Importance of getting mother’s perception of birth weight and avoiding interviewer’s perception/bias.
* Ever breastfeeding and timing of first breastfeeding.
* Categories of liquids given to newborns.
 | Maternal and Newborn Health ExpertTrainer | PT & Q&A |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 12.301:30h | **Questionnaire for Individual Women: post-natal health checks*** Difference between check and visit.
* Health checks separately for baby and for mother.
* Timing, place and provider of first check.
* Timing, place and provider of visit.
* PN30: Information from provider
 | Maternal and Newborn Health ExpertTrainer | PT & Q&A |
| 12.30 - 13.30 | *Lunch (agenda continues next page)* |  |  |
| 13.30 - 14.150:45h | **Questionnaire for Individual Women: Contraception*** Need and ways to ensure privacy.
* Probing for use of one or more ways of contraception.
* Explain different methods of contraception and classifying them according the time/effectiveness of the use.
* Explain use of Lactational Amenorrhoea Method.
 | Reproductive Health ExpertTrainer | PT & Q&A |
| 14.15 – 15.000:45h | **Questionnaire for Individual Women: Unmet Need*** Filtering for female or male sterilisation.
* Modifying the questions based on earlier responses (UN6).
* Focus on physical ability to get pregnant or conceive (UN10).
* Defining menopause, hysterectomy, fatalistic.
* Menstrual Hygiene Management materials.
 | Reproductive Health ExpertTrainer | PT & Q&A |
| 15.00 - 15.15 | *Health Break* |  |  |
| 15.15 – 17.00 | Practice on Questionnaire for Individual Women. | Trainer | Paired workRole play |

|  |
| --- |
| **Day 6 - Weekday, date** |
| All day | *Off-day* |  |  |

| **Day 7 - Weekday, date** |
| --- |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. | Trainer | Q&A |
| 09.30 - 10.150:45h | **Questionnaire for Individual Women: Female Genital Mutilation/Cutting*** Introduction by FGM/C Expert: Cultural practises and prevalence.
* Dealing with sensitive subjects. Ensuring neutrality.
* Delink culture and give importance to the medical reasons for exploring the issue.
* Determining age at the time of the intervention; Linking fertility module for verification; How to fill the roster.

Demonstration/practice on filling the roster. | FGM/C ExpertTrainer | PT & Q&A |
| 10.15 – 10.450:30h | **Questionnaire for Individual Women/Men: Attitudes Towards Domestic Violence*** What does this Module measure?
* Avoiding interviewer bias and maintaining neutrality.
* Differentiating attitude from approval or personal experience.
 | Domestic Violence ExpertTrainer | PT & Q&ADisc. |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 12.001:00h | **Questionnaire for Individual Women/Men: Victimisation*** Ethical considerations. Ensuring privacy.
* Module exclusively on personal experiences and feelings.
* Defining events recorded in VT1.
 | Trainer | PT & Q&A |
| 12.00 - 12.300:30h | **Questionnaire for Individual Women/Men: Marriage/Union*** Introduction by Early Marriage Expert: Understanding cultural practices and definitions.
* Different forms of marriage and informal arrangement (unions) within the local cultural context; Defining cohabitation (differentiating marriage and living together).
* Age of partner; Asking/probing for age at first marriage/union.
* Cultural sensitivities and defining difference between divorce and separation.
 | Early Marriage ExpertTrainer | PT & Q&A |
| 12.30 - 13.30 | *Lunch (agenda continues next page)* |  |  |
| 13.30 – 14.150:45h | **Questionnaire for Individual Women/Men: Adult Functioning*** Introduction by Disability Expert: Development of concept of disability/functioning difficulties. Expected prevalence.
* Ethical considerations; interviewing people with disabilities.
* Probing for use of glasses.
 | Disability ExpertTrainer | PT & Q&A |
| 14.15 – 15.000:45h | **Questionnaire for Individual Women/Men: Sexual behaviour*** Introduction by HIV/AIDS Expert: Development of various prevalences in country. Other studies. Rapport.
* Ensuring privacy; Avoiding interviewer bias.
* Sexual behaviour regardless of sex of partner; Age at first sex irrespective of marital status; How to deal with questions when multiple partners are involved; Probing for date, partner at last sex, and use of condom.
 | HIV/AIDS ExpertTrainer | PT & Q&A |
| 15.00 - 15.15 | *Health Break* |  |  |
| 15.15 – 16.000:45h | **Questionnaire for Individual Women/Men: HIV/AIDS*** Understanding the terms HIV and AIDS.
* Explore interviewers’ knowledge. Correct misconceptions.
* Obtaining information as opposed to providing information.
* When and how to correct respondent’s knowledge (how interviewers can indicate correct answers).
* Getting information on testing and not the HIV status of the respondent. Asking stigma questions
 | HIV/AIDS ExpertTrainer | PT & Q&A |
| 16.00 – 16.150:45h | **Questionnaire for Individual Men: Circumcision*** Defining circumcision.
 | HIV/AIDS ExpertTrainer | PT & Q&A |
| 16.15 – 17.00 | Practice on Questionnaire for Individual Women. | Trainer | Paired workRole play |
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| **Homework** | Study the Questionnaire for Individual Women/Men and Manual. |

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| **Day 8 - Weekday, date** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. | Trainer | Q&A |
| 09.30 – 10.150:45h | **Questionnaire for Individual Women: Maternal Mortality*** Definition of maternal mortality.
* Importance of the total number of births to mother (MM1).
 | Trainer | PT & Q&A |
| 10.15 – 10.45 | Practice Maternal Mortality roster/module. | Trainer | Paired workRole play |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 11.300:30h | **Questionnaire for Individual Women/Men: Tobacco and Alcohol Use*** Identify tobacco products in use, including smokeless products.
* Establishing ever use, frequency of use and extent of use.
* Defining “one drink” i.e. establishing quantities of various forms to alcoholic drinks which would constitute one drink.
 | Trainer | PT & Q&A |
| 11.30 – 11.450:15h | **Questionnaire for Individual Women/Men: Life satisfaction*** Differentiate perception of wellbeing (satisfaction) from happiness.
* Use of the response card as an interviewing aid.
 | Trainer | PT & Q&A |
| 11.45 - 12.30 | Practice on questionnaires for individual women/men. | Trainer | Paired work |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 14.30 | Practice on household questionnaire | Trainer | Paired work |
| 14.30 – 15.30 | Test on Household questionnaire and questionnaires for individual women/men | Trainer | Written test |
| 15.30 - 15.45 | *Health Break* |  |  |
| 15.45 – 17.00 | Free practice | Trainer | Paired work |
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| **Homework** | Study the Questionnaire for Children Age 5-17 and Manual. |

| **Day 9 - Weekday, date** |
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| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 10.45 | Recap of test results. | Trainer | Q&A |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 11.300:30h | **Questionnaire for Children Age 5-17: Selection of one child*** Revisiting the Household Questionnaire.
* Concept of bias and importance of random selection.
* Demonstrate use of the Kish table.
* Emancipated 15-17 year olds.
 | Trainer | PT & Q&A |
| 11.45 – 12.000:15h | **Questionnaire for Children Age 5-17: Information Panel*** When to interview child caretaker.
* Recording the respondent to this questionnaire.
* Need to obtain complete information, additional information from other respondents.
 | Trainer | PT & Q&A |
| 12.00 – 12.300:30h | **Questionnaire for Children Age 5-17: Child’s Background*** Importance of correct and complete age recording.
* Use of local calendar.
* Need for respondent’s confirmation if documentation (birth certificate, health cards, and/or immunisation cards) is available.
* Common errors of age reporting (heaping/digit preference and out transference).
* Ensuring consistency between date and age in completed years.
* Procedure for correcting age and ensuring consistency of reporting within U5 questionnaire and HH questionnaire.
* Early Childhood Education attendance and definitions.
* Health insurance questions.
* Practice
 | Trainer | PT & Q&A |
| 12.30 - 13.30 | *Lunch (agenda continues next page)* |  |  |
| 13.30 – 14.301:00h | **Questionnaire for Children Age 5-17**: **Child Labour*** Introduction by Child Labour Expert: Defining work and labour, dealing with denial issues of child labour.
* Defining Economic Activity and Household Chores.
* Importance of time calculation – recall issues.
* Explain “since last (*day of the week*)”.
* Hazardous work and work environment (focus on health and safety and exposure to accidents - not protection issues).
* Age and gender dimensions of child work and labour. Seasonality considerations.
* “Special” Economic Activity/Chore: Fetching water and firewood.
 | Child Labour ExpertTrainer | PT & Q&A |
| 14.30 - 15.150:45h | **Household Questionnaire: Child Discipline*** Introduction by Child Discipline Expert: Disciplinary practises and customs, legal framework.
* De-personalisation, focus on any adult discipline, reference period.
* Concepts: Violent disciplining methods, Physical and psychological aggression
* Sequence of the questions.
* Interviewing technique: Neutrality.
 | Child Discipline ExpertTrainer | PT & Q&A |
| 15.15 - 15.30 | *Health Break* |  |  |
| 15.30 – 16.150:45h | **Questionnaire for Children Age 5-17: Child Functioning*** Introduction by Child Disability Expert: Development of concept of disability/functioning difficulties. Expected prevalence.
* Ethical considerations; interviewing on disabilities.
* Probing for use of assistive devices.
* Clarification often needed in interviews.
 | Child Disability ExpertTrainer | PT & Q&A |
| 16.15 – 17.00 | Practice  |  |  |
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| **Homework** | Study the Questionnaire for Children Age 5-17 and Manual. |

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| **Day 10 - Weekday, date** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. | Trainer | Q&A |
| 09.30 – 10.150:45h | **Questionnaire for Children Age 5-17: Parental Involvement*** Introduction by Expert: Outcomes of parental involvement in children’s education. School governing bodies: Frequency and terminology
* Request to keep child around.
* Books excluding school books and holy books.
* Meetings/Events: Respondent and any other adult household member
* PR15: If more than one occasion, record for any
 | Parental Involvement ExpertTrainer | PT & Q&A |
| 10.15 – 10.45 | **Questionnaire for Children Age 5-17: Foundational Learning Skills*** Introduction by Expert: Age-range, relation to grade 2 curriculum, literacy and math skills acquired.
* Obtaining consent and assent
* Building rapport.
* Identifying appropriate location.
* The booklet.
 | Learning Assessment ExpertTrainer | PT & Q&A |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 12.301:30h | **Questionnaire for Children Age 5-17: Foundational Learning Skills*** Overview of Module: Reading skills and comprehension questions.
* Overview of Module: Number skills.
* Demonstration video.
* Probing.
* Interviewer behaviour.
 | Learning Assessment ExpertTrainer | PT & Q&ADemo video |
| 12.30 - 13.30 | *Lunch* |  |  |
| Demo | **Questionnaire for Children Age 5-17: Foundational Learning Skills*** Front-of-class interviews with live children
 | Learning Assessment ExpertTrainer | Demo |
| 14.30 - 15.150:45h | **Questionnaire for Children Age 5-17: Foundational Learning Skills*** Practice interviews with live children
 | Learning Assessment ExpertTrainer | Practice |
| 15.15 - 15.30 | *Health Break* |  |  |
| 15.30 – 16.150:45h | **Questionnaire for Children Age 5-17: Foundational Learning Skills*** Practice interviews with live children
 | Learning Assessment ExpertTrainer | Practice |
| 16.15 – 17.00 | Feedback from practice. |  | Disc.Q&A |
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| **Homework** | Study the Questionnaire for Children Under Five and Manual. |

| **Day 11 - Weekday, date** |
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| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 10.45 | Recap of previous day and experiences with interviewing children. | Trainer | Q&A |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 - 11.150:15h | **Questionnaire for Children Under Five: Information Panel*** When to interview child caretaker.
* Recording the respondent to this questionnaire.
* Need to obtain complete information, additional information from other respondents.
 | Trainer | PT & Q&A |
| 11.15 – 12.301:15h | **Questionnaire for Children Under Five: Under-Five’s Background*** Importance of correct and complete age recording.
* Use of local calendar.
* Need for respondent’s confirmation if documentation (birth certificate, health cards, and/or immunisation cards) is available.
* Common errors of age reporting (heaping/digit preference and out transference).
* Ensuring consistency between date and age in completed years.
* Procedure for correcting age and ensuring consistency of reporting within U5 questionnaire and HH questionnaire.
* Early Childhood Education attendance and definitions.
* Practice
 | ECE/ECD ExpertTrainer | PT & Q&A |
| 12.30 - 13.30 | *Lunch (agenda continues next page)* |  |  |
| 13.30 – 13.450:15h | **Questionnaire for Children Under Five: Birth Registration*** Introduction by Birth Registration Expert: System of country, expected prevalence, birth notification.
* Importance of observation of birth certificates.
* What is registered without certificate?
 | Birth Registration ExpertTrainer | PT & Q&A |
| 13.45 – 14.300:45h | **Questionnaire for Children Under Five: Early Childhood Development*** Introduction by ECD Expert: Background of the ECD module components and the index.
* Defining books and toys/objects for play for ECD.
* Establishing children being left alone (time, lack of physical presence of mother or caretaker, and age of caregiver in the case of absence).
* Requirement accept both biological and step/foster parents in EC5.
* EC6-EC15 Looking at developmental milestones and expected behaviour of children of this age; Looking out for “yes” answers.
 | ECD ExpertTrainer | PT & Q&A |
| 14.30 - 15.150:45h | **Household Questionnaire: Child Discipline*** Introduction by Child Discipline Expert: Disciplinary practises and customs, legal framework.
* De-personalisation, focus on any adult discipline, reference period.
* Concepts: Violent disciplining methods, Physical and psychological aggression
* Sequence of the questions.
* Interviewing technique: Neutrality.
 | Child Discipline ExpertTrainer | PT & Q&A |
| 15.15 - 15.30 | *Health Break* |  |  |
| 15.30 – 16.150:45h | **Questionnaire for Children Under Five: Child Functioning*** Introduction by Child Disability Expert: Development of concept of disability/functioning difficulties. Expected prevalence.
* Ethical considerations; interviewing on disabilities.
* Probing for use of assistive devices.
* Clarification often needed in interviews.
 | Child Disability ExpertTrainer | PT & Q&A |
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| **Homework** | Study the Questionnaire for Children Under Five and Manual. Measurers study Manual for Anthropometry (if measurers have been participating in main training) |

| **Day 12 - Weekday, date** |  | **Parallel Measurer Training** |
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| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day | Trainer | Q&A |  | 08.30 – 09.00 | Registration. |  |  |
| 09:30 – 10:451:15h | **Questionnaire for Children Under Five: Breastfeeding and dietary intake*** Introduction by Nutrition Expert: Customisation of the module. National considerations. What to expect in different regions.
* Method of interviewing.
* How to classify liquid and food groups; Classifying mixed foods.
* Practice
 | Nutrition ExpertTrainer | PT & Q&A |  | 09.00 – 09.30 | Welcome and introductions |  |  |
| 09.30 – 10.45 | Pre-test of Measurers* Instructions.
* Written test (30 minutes).
* Instructions.
* Measurement test (30 minutes).
 | TrainerAnthropo-metric Measurement Experts | Indiv. and paired tests |
| 10.45 - 11.00 | *Health Break* |  | 10.45 - 11.00 | *Health Break* |
| 11.00 – 12.30 | **Questionnaire for Children Under Five: Immunisation*** Introduction by Immunisation Expert: Cards in circulation, specific vaccine names, immunisation campaigns.
* The national immunisation schedule and recent changes.
* What is recorded on the health/immunisation cards?
* Reading and filling out the information.
* How to deal with non-conforming entries; How to ensure complete information; Actual and not planned dates; Verification and cross checking; Inconsistent age on health card, questionnaire and other documents (e.g. Birth certificates); Recall issues.
* Practice
 | Child Health ExpertTrainer | PT & Q&A |  | 11.00 - 11.300:30h | **Overview of course*** Flow of individual days and practice.
* Integration into main training.
 | Trainer | PT & Q&A |
| 11.30 – 12.301:00h | **Anthropometry in MICS*** Measures and equipment.
* Roles and responsibilities.
 | TrainerAnthropo-metric Measurement Experts | PT & Q&A |
| 12.30 - 13.30 | *Lunch (agenda continues next page)* |  | 12.30 - 13.30 | *Lunch (agenda continues next page)* |
| 13.30 - 14.301:00h | **Questionnaire for Children Under Five: Care of Illness*** Introduction by Child Health Expert: Facilities, providers, services. Common ORS, drugs, policies and practise.
* What is diarrhoea? Are there seasonality issues?
* Establishing the time frame for recall.
* Recording consumption vs. “given”/offered food and drinks.
* Ensuring that all fluids and food consumed is reflected whether given by respondent or someone else.
* What does seeking advice or treatment mean?
* Identifying the different forms of ORS, ORT, and zinc.
* Classification of anti-diarrhoeal, anti-motility drugs, antibiotics, and using samples of locally available drugs.
* Ensuring that all treatments are correctly recorded.
* Demonstration/explanation of how a heel/finger test for malaria is administered.
* Establishing illness with a cough as a cold or ARI with a cough.
* Establishing danger signs of pneumonia.
* Identifying the different forms of drugs given to treat malaria and pneumonia and show samples.
* Getting the time of administering first dose of anti-malarials.
* Background to solid waste management. How to code diapers?
 | Child Health ExpertTrainer | PT & Q&A |  | 13.30 – 14.301:00h | **Procedures in MICS (1)*** Manual and steps.
* Questionnaire.
 | TrainerAnthropo-metric Measurement Experts | PT |
| 14.30 - 15.000:30h | Practice U5 questionnaire. | Child Health ExpertTrainer | PT & Q&A |  | 14.30 – 15.150:45h | **Overview of common errors**Pictures. | TrainerAnthropo-metric Measurement Experts | Disc. |
| 15.00 - 15.15 | *Health Break* |  |  |  | 15.00 - 15.15 | *Health Break* |  |  |
| 15.15 – 16.15 | Test on all questionnaires. | Trainer | Quiz |  | 15:30 – 17:001:30h | **Procedures in MICS (2)*** Step by step instructions using equipment (incl. how to direct mothers).
* Practising with equipment (incl. identification of appropriate locations for measurement in the field).
* Showing common errors using equipment.
 | TrainerAnthropo-metric Measurement Experts |  |
| 16.15 – 17.00 | Free practice. |  |  |  |
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|  |  |  | **Homework** | Study the Manual for Anthropometry. |

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| **Day 13 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| All day | *Off-day for interviewers* |  | 09.00 – 10.451:45h | Paired practice with children age 2-4 in appropriate facility | TrainerAnthropometric Measurement Experts |  |
|  | 10.45 - 11.00 | *Health Break* |
|  | 11.00 – 12.301:00h | Continued practice with same age group | TrainerAnthropometric Measurement Experts |  |
|  | 12.30 - 13.30 | *Lunch* |
|  | 13.30 – 15.151:00h | Paired practice with children age 0-1 in appropriate facility | TrainerAnthropometric Measurement Experts |  |
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|  | 15.15 – 15.30 | *Health Break* |
|  | 15:30 – 17:001:30h | Continued practice with same age group | TrainerAnthropometric Measurement Experts |  |
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|  |  |  | **Homework** | Study the Manual for Anthropometry. |

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| **Day 14 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09:00 – 09:30 | Recap of previous day. | Trainer | Q&A |  | 09.00 – 10.45 | Feedback session (all) | TrainerAnthropometric Measurement Experts |  |
| 09.30 - 10.45 | Interview Skills and Techniques.* Dos and Don’ts of good interviewing.
* Ethical issues/considerations.
* Dealing with non-response/difficult situations.

Assignment of roles:* Roles and responsibilities of Supervisors, Interviewers, and Measurers.
 | Trainer | PTDisc. |  |
| 10.45 - 11.00 | *Health Break* |  | 10.45 - 11.00 | *Health Break* |
| 11.00 - 12.30 | Sample design* Identifying households in the field/reading maps.
* Maintaining cluster tracking forms and interviewer assignment sheets – Supervisor and Interviewer Cluster Control Sheets.
 | Trainers | Q&A |  | 11.00 – 12.301:00h | Feedback session (individual coaching) | TrainerAnthropometric Measurement Experts |  |
| 12.30 - 13.30 | *Lunch (Measurers join main training)* |  |  |
| 13.30 - 15.001:30h | **Questionnaire for Children Under Five: Anthropometry*** Introduction by Anthropometric Measurement Expert: Introduce facilitator team, Measurers and training. Why is precise measurement so crucial?
* How to measure weight - demonstration
* How to measure length/height – demonstration
* How not to measure – pictorials
* Roles and responsibilities of Measurer and Assistant

See separate manual and agenda | Anthropometric Measurement ExpertsTrainer | PT & Q&ADemo. |
| 15.15 - 15.30 | *Health Break* |  |  |
| 15.30 – 17.001:30h | Anthropometry class room practice with focus on assistant measurer. | Anthropometric Measurement ExpertsTrainer | Practice |
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| **Homework** | Study the Manual for Anthropometry. |  |  |  |

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| **Day 15 - Weekday, date** |
| 09.00 – 12.30 | Anthropometry field measurements in institution. | TrainersAnthropometric Measurement Experts | Practice |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 17.00 | Field practice. |

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| **Day 16 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.451:45h | Field practice feedback. | Trainer | Disc. |
| 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | Field practice feedback. | Trainer | Disc. |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 15.151:45h | Supervisors only training – see manualInterviewer self-study | Trainer | PT & Disc. |  | 13.30 – 15.151:45h | Measurer Field practice feedback. | Anthropometric Measurement Experts | Disc. |
| 15.15 – 15.30 | *Health Break* |  |  |  | 15.15 – 15.30 | *Health Break* |  |  |
| 15.30 – 17.001:30h | Supervisors only training – see manualInterviewer self-study | Trainer | PT & Disc. |  | 15.30 – 17.001:30h | How to ensure quality measurements – focus on continued training of assistants in the field. | Anthropometric Measurement Experts | Disc. |
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| **Homework** | Supervisors: Study the Manual for Supervisors. |  | **Homework** | Study the Manual for Anthropometry. |

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| **Day 17 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.45 | Field practice. |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 17.00 | Field practice. |  | 13.30 – 17.003:30h | Standardisation test #1. | Anthropometric Measurement Experts | Test |

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| **Day 18 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.451:45h | Field practice feedback. | Trainer | Disc. |
| 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | Field practice feedback. | Trainer | Disc. |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 15.151:45h | Supervisors only training – see manualInterviewer self-study | Trainer | PT & Disc. |  | 13.30 – 15.151:45h | Measurer Field practice feedback. | Anthropometric Measurement Experts | Disc. |
| 15.15 – 15.30 | *Health Break* |  |  |  | 15.15 – 15.30 | *Health Break* |  |  |
| 15.30 – 17.001:30h | Supervisors only training – see manualInterviewer self-study | Trainer | PT & Disc. |  | 15.30 – 17.001:30h | Measurer Field practice feedback. | Anthropometric Measurement Experts | Disc. |
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| **Homework** | Supervisors: Study the Manual for Supervisors. |  | **Homework** | Study the Manual for Anthropometry. |

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| **Day 19 - Weekday, date** |
| All day | *Off-day* |  |  |

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| **Day 20 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.451:45h | Water Quality Testing – Plenary introduction to questionnaire and process. | Water Quality Testing ExpertTrainer | PTDemo. |
| 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | **CAPI Introduction:*** The tablet: On/Off, battery life, care, charging.
* Dos and Don’ts of tablet use.
* The interview: Is there a difference in a face-to-face interview with a tablet?

Roles and responsibilities of Supervisors, Interviewers and Measurers. | TrainerDP Expert | PT & Q&A |  | 11.00 – 12.301:30h | Presentation "Water Quality Intro".First demonstration. | Water Quality Testing Expert | PTQ&ADemo. |
| 12.30 – 13.30 | *Lunch* |  |  |  | 12.30 – 13.30 | *Lunch* |  |  |
| 13.30 – 15.151:45h | **General CAPI Procedures:*** Preparing to interview. Data collecting system and procedures in CAPI.
* Introducing CAPI MENU system.
* Recording responses. Type of responses set.
* Correcting mistakes.
* Following instructions.
* Other interviewer menu options.
* Utilities menu.
* Special key combinations.
* Troubleshooting the tablet
 | TrainerDP Expert | PT & Q&A |  | 13.30 – 15.151:45h | Second demonstration.Practice. | Water Quality Testing Expert | DemoQ&A |
| 15.15 – 15.30 | *Health Break – EVENT: Tablets are distributed.* |  | 15.15 – 15.30 | *Health Break* |  |  |
| 15.30 – 17.001:30h | **Hands-on session:**Example-based walk-trough of * Menu system
* Assignments
* Opening household interview and completing List of Household Members
 | TrainerDP Expert | PT & Disc. |  | 15.30 – 17.001:30h | Practice.Incubation. | Water Quality Testing Expert |  |
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| **Homework** | Copy a filled paper Household Questionnaire to the tablet. |  | **Homework** | Study the Manual for Water Quality Testing. |

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| **Day 21 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. | TrainerDP Expert | Q&A |  | 09.00 – 09.30 | Recap of previous day. | Water Quality Testing Expert | Q&A |
| 09.30 – 10.451:15h | **Household Questionnaire:*** Example-based walkthrough
* Error messages
* Taking notes
* Writing text where needed, e.g. “Other” category
* Partial save
 | TrainerDP Expert |  |  | 09.30 – 10.451:15h | Collecting samples.Household and source samples.Blank testing. | Water Quality Testing Expert |  |
| 10.45 – 11.00 | *Health Break* |  | 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | **Household Questionnaire:**Interviewers copy filled paper Household Questionnaires. | TrainersDP Expert | PT |  | 11.00 – 12.301:30h | Questionnaire.Roles and Responsibilities.Ethics. | Water Quality Testing Expert |  |
| 12.30 – 13.30 | *Lunch* |  |  |  | 12.30 – 13.30 | *Lunch* |  |  |
| 13.30 – 14.000:30h | **Household Questionnaire:**Feedback from Household Questionnaire exercise. | TrainerDP Expert | PT |  | 13.30 – 15.151:45h | Reading and interpreting results.Recording results. | Water Quality Testing Expert |  |
| 14.00 – 15.151:15h | **Individual Questionnaire for Women and Men:*** Selection of Households for Men
* Example-based walkthrough of Questionnaire for Women
* Error messages
 | TrainerDP Expert | PT & Q&A |  |
| 15.15 – 15.30 | Health Break |  | 15.15 – 15.30 | *Health Break* |  |  |
| 15.30 – 16.301:00h | **Individual Questionnaire for Women and Men:**Continued: Example-based walkthrough of Questionnaire for Women | TrainerDP Expert | PT & Q&A |  | 15.30 – 17.001:30h | Practice sample collection. | Water Quality Testing Expert |  |
| 16.30 – 17.000:30h | **Individual Questionnaire for Women and Men:**Interviewers copy filled paper Questionnaire for Women. | TrainersDP Expert | PT |  |
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| **Homework** | Copy a filled paper Questionnaire for Men to the tablet. |  | **Homework** | Study the Manual for Water Quality Testing. |

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| **Day 22 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 – 09.30 | Recap of previous day. Feedback from Individual Questionnaire for Women and Men exercise. | TrainerDP Expert | Q&A |  | 09.00 – 17.00 | Practice testing, reading and entering results.Blank test exam.Reading exam.Disposal of used tests.Prepare for fieldwork. |
| 09.30 – 10.451:15h | **Questionnaire for Children Age 5-17:*** Random selection of one child.
* Emancipated 15-17 year old children.
* Example-based walkthrough
* Error messages
 | TrainerDP Expert | PT |  |
| 10.45 – 11.00 | *Health Break* |  |
| 11.00 – 12.301:30h | **Questionnaire for Children Age 5-17:*** Interviewers copy filled paper questionnaire for children age 5-17.
* Feedback from exercise.
 | TrainersDP Expert | PT |  |
| 12.30 – 13.30 | *Lunch* |  |
| 13.30 – 14.451:15h | **Questionnaire for Children Under Five:*** Example-based walkthrough
* Error messages
 | TrainerDP Expert | PT & Q&A |  |
| 14.45 – 15.150:30h | **Questionnaire for Children Under Five:**Interviewers copy filled paper questionnaire for children under 5. | TrainersDP Expert | PT & Q&A |  |
| 15.15 – 15.30 | *Health Break* |  |
| 15.30 – 16.000:30h | **Questionnaire for Children Under Five:**Feedback from exercise. | TrainerDP Expert | PT & Q&A |  |
| 16.00 – 17.000:30h | **Anthropometry Form and Water Quality Testing Questionnaire*** Why paper and not directly in tablet?
* Roles and responsibilities
* Field procedures
 | TrainerDP Expert | PT |  |
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| **Homework** | Interviewers: Study the Instructions for Interviewers.Supervisors: Study the Instructions for Supervisors. |  | **Homework** | Study the Manual for Water Quality Testing. |

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| **Day 23 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.451:45h | **Anthropometry Form and Water Quality Testing Questionnaire*** Interviewers and Measurers copy filled forms to application.
* Error messages.
* Feedback from exercise.
 | Water Quality Testing ExpertAnthropometric Measurement ExpertsTrainerDP Expert | PTDemo. |
| 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | **CAPI procedures:*** Revisit procedures.
* Syncing data with Supervisor.
* Q&A.
 | TrainerDP Expert |  |  | 11.00 – 17.00 | Field practice water quality testing.Anthropometry standardisation test #2 | Water Quality Testing ExpertAnthropometric Measurement Experts |  |
| 12.30 – 13.30 | *Lunch* |  |  |  |
| 13.30 – 15.151:45h | Supervisors only training* Introducing the supervisor CAPI menu.
* Household assignment.
* Distributing HH assignments.
* Syncing data with the interviewer tablets.
* Structure checks.

Interviewer CAPI practice. | TrainersDP Expert |  |  |
| 15.15 – 15.30 | *Health Break* |  |
| 15.30 – 17.001:30h | Supervisors only training* Closing a cluster.
* Syncing data with Central Office.
* Introduction to the utilities.

Interviewer CAPI practice. | TrainersDP Expert |  |  |

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| **Day 24 - Weekday, date** |
| 09.00 – 17.00 | Field practice. |

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| **Day 25 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.451:45h | Field practice feedback. | Trainer | Disc. |
| 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | Field practice feedback. | Trainer | Disc. |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 15.151:45h | Supervisors only training* Preparation for pilot.
* Team assignments

Interviewer self-study | Trainers | PT & Disc. |  | 13.30 – 15.151:45h | Measurer Field practice feedback. | Anthropometric Measurement ExpertsWater Quality Testing Expert | Disc. |
| 15.15 – 15.30 | *Health Break* |  |  |  | 15.15 – 15.30 | *Health Break* |  |  |
| 15.30 – 17.001:30h | Supervisors only training – see manualInterviewer self-study | Trainers | PT & Disc. |  | 15.30 – 17.001:30h | Measurer Field practice feedback. | Anthropometric Measurement ExpertsWater Quality Testing Expert | Disc. |

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| **Day 26 - Weekday, date** |
| All day | *Off-day* |  |  |

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| **Day 27 - Weekday, date** |
| 09.00 – 17.00 | Pilot Study – full simulation of fieldwork. |

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| **Day 28 - Weekday, date** |  | **Parallel Measurer Training** |
| ***Time*** | **Session** | ***Facilitator*** | ***Method*** |  | ***Time*** | **Session** | ***Facilitator*** | ***Method*** |
| 09.00 - 10.451:45h | Pilot feedback. | Trainers | Disc. |
| 10.45 – 11.00 | *Health Break* |  |  |
| 11.00 – 12.301:30h | Questionnaire feedback from data processing. | TrainersDP Expert | Disc. |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 15.151:45h | Supervisors only trainingPilot debriefingField monitoring* Monitoring visits
* Field Check Tables

Interviewers enter WQT results with Measurers | Trainers | PT & Disc. |  | 13.30 – 15.151:45h | Read and enter WQT results with Interviewers | Water Quality Testing Expert | Disc. |
| 15.15 – 15.30 | *Health Break* |  |  |
| 15.30 – 17.00 | Preparing for Fieldwork:* Logistics and schedule
 | Trainer | PTDisc. |
|  |
| **Day 29 - Weekday, date** |
| 09.00 – 10.45 | Preparing for fieldwork:* Team Assignments
* Equipment and supplies
 | Trainers | PTTeam work |
| 10.45 - 11.00 | *Health Break* |  |  |
| 11.00 – 12.30 | Closing ceremony - Certificate distribution | High level OfficialSurvey Coordinator |  |
| 12.30 - 13.30 | *Lunch* |  |  |
| 13.30 – 17.00 | Half day for additional Supervisor training/instructions – suggested content:* Monitoring field performance: Field Check Tables, Spot checks, Reinterviews, Observations.
* Sample quality: Getting familiar with maps, identifying mapped objects in the cluster (parks, religious objects), boundary walk, identification of households (finding the structure regardless of the name of the household head), listing quality.
* Ethics: Unlawful observations, critical health, abuse, inappropriate behaviour.
* Logistics: Money, Communication, Drivers and car maintenance, syncing.
* Morale and security: Breaks, Accommodation, Security, Women, Health/insurance, First Aid.
 | Trainers | Q&ADisc. |

1. If appropriate or required by institutional/ethical review board. For example, this could be alerting health authorities if a certain number of children are without immunization in clusters, medical referral for wasted children, etc. [↑](#footnote-ref-1)