

# East Sumba Sepsis Study (SSS)

† In memory of **Lery Mardani ButarButar**, whose death reminds us that preventable infections still take lives too early.

**Household Questionnaire** – Final version for translation into Bahasa Indonesia and integration into a field data collection application within the next three weeks

## Fair Future Foundation / Kawan Baik Indonesia

In very rural areas, many infections become severe because care is delayed or not accessible in time. This questionnaire aims to better understand how people become ill, how they seek care, and what challenges they face.

Your answers will help improve early detection, access to care, and prevention for communities in this region.

### 3. Interview record

<b>Survey ID</b>	_____	<b>Date</b>	_____
<b>Village</b>	_____	<b>Hamlet</b>	_____
<b>District</b>	_____	<b>Interviewer</b>	_____
<b>Respondent code</b>	_____	<b>Start / End time</b>	_____
<b>Verbal consent</b>	Yes No	<b>Language used</b>	_____

**Confidentiality note:** names are not required. Use a respondent code if follow-up is needed.

## Theme 1. Household profile, environment, and access to care.

*(These questions describe household conditions that influence infection risk, care-seeking, and survival.)*

### Q1. What is the respondent's role in the household?

**Interviewer note:** If unsure, ask who usually makes decisions when someone is sick.

*Tick one only.*

- Mother
- Father
- Household head or decision maker
- Grandparent
- Other adult relative
- Other

## Q2. What is the highest education level of the respondent?

**Interviewer note:** If unsure, ask about the last level completed (for those *not currently attending*).

*Tick one only.*

- No school
- Primary school
- Junior high school
- Senior high school
- Higher education
- Do not know/prefer not to answer

## Q3. How many people usually live in this household?

**Interviewer note:** Count all people who usually sleep and eat in the household, even if absent today.

*Tick one only.*

- Number: \_\_\_\_\_

## Q4. What is the approximate monthly household income?

**Interviewer note:** Ask gently. If the respondent is uncomfortable, allow “Do not know/prefer not to answer”.

*Tick one only.*

- Less than 500,000 IDR
- 500 – 1,500,000 IDR
- 1,500,000 – 3,000,000 IDR
- More than 3,000,000 IDR

## Q5. How many children under 5 years old live in this household?

**Interviewer note:** Count all children under 5 years living in the household, even if not present today.

*Tick one only.*

- None
- 1
- 2
- 3 or more

**Q6. Are the children under 5 in this household vaccinated according to schedule?**

**Interviewer note:** If unsure, ask whether the child received injections at the health post or during immunisation campaigns.

*Tick one only.*

- Yes, all children
- Some children
- No children
- Do not know

**Q7. Are there any children in this household who are very thin, weak, or not growing well?**

**Interviewer note:** Ask about visible signs (*very thin arms/legs, low energy, not active*).

*Tick one only.*

- Yes
- No
- Do not know

**Q8. What language is mainly spoken in the household?**

**Interviewer note:** If more than one language is used, ask which one is used most often at home.

*Tick one only.*

- Bahasa Indonesia
- Sumbanese (*local language*)
- Both Bahasa Indonesia and Sumbanese
- Other

**Q9. Does anyone in this household have a long-term or chronic illness?**

**Interviewer note:** Explain with simple examples: long-term illness needing regular care or medicine.

*Tick all that apply.*

- High blood pressure
- Diabetes
- Heart disease
- Kidney disease / regular dialysis
- Cancer
- Other
- None

**Q10. Is there anyone aged 60 years or older in this household?**

*Tick one only.*

- Yes, one person
- Yes, more than one person
- No

## Theme 2. Housing and indoor environment *(These questions explore living conditions inside and around the home that may increase the risk of infection and severe illness. Focus on what people actually use and do in their daily life, including water, cooking, hygiene, and exposure to smoke or environmental risks.)*

### Q11. What type of house is this?

**Interviewer note:** Observe if possible. If mixed materials are present, select the main structure.

*Tick all that apply.*

- Permanent wall house
- Raised house/house on stilts
- Bamboo / woven wall house
- Earth floor
- Cement or wooden floor
- Other

### Q12. What is the main fuel used for cooking?

**Interviewer note:** Ask what is used most of the time.

*Tick one only.*

- Firewood
- Kerosene stove
- LPG gas stove
- Other

### Q13. If firewood is used, where is the kitchen?

*Tick one only.*

- Inside the main house
- Separate from the main house, less than 5 m
- Separate from the main house, 5-10 m
- Not applicable

### Q14. Is there anyone who regularly smokes inside the house?

**Interviewer note:** Ask about smoking inside the house, not outside.

- Yes
- No

**Q15. In the last 12 months, has any woman in this household been pregnant, given birth, or had a newborn (less than 1 month old)?**

**Interviewer note:** Explain clearly that this includes any woman who is currently pregnant or who was pregnant at any time in the last 12 months, as well as any recent delivery or the presence of a newborn less than 1 month old. If unsure, ask simple questions, for example, whether there is a very small baby in the household.

*Tick all that apply.*

- No
- Currently pregnant
- Gave birth in the last 12 months
- Newborn less than 1 month old

If any of the following apply (*currently pregnant, gave birth, or newborn less than 1 month*), please answer the following questions:

**Q15a. What is the age of the pregnant woman or mother?**

- Number: \_\_\_\_\_ years

**Q15b. What is the stage of pregnancy (if currently pregnant)?**

**Interviewer note:** If unsure, ask how many months pregnant.

- Less than 3 months
- 3–6 months
- More than 6 months
- Do not know

**Q15c. Did she receive antenatal care (ANC) during pregnancy?**

**Interviewer note:** ANC = any check during pregnancy (*at Pustu, Puskesmas, clinic, or hospital*).

- Yes
- No
- Do not know

**Q15d. Where did she receive care during pregnancy?**

*Tick one only.*

- Pustu / village health post
- Puskesmas
- Hospital
- Private clinic
- Traditional provider
- Other
- Do not know

### Q15e. Who assisted the delivery?

**Interviewer note:** Select who mainly assisted the delivery.

*Tick one only.*

- Family member
- Traditional birth attendant
- Midwife at home
- Midwife at Puskesmas
- Hospital

### Q15f. Who usually decides where to give birth?

**Interviewer note:** Ask who usually decides, not who was present.

*Tick one only.*

- The mother
- Husband
- Family (parents or elders)
- Health worker
- Other

### Q16. What is the main source of drinking water for this household?

**Interviewer note:** If unsure, ask where the water comes from and whether it is covered or protected.

*Tick one only.*

- Covered or protected well / spring
- Open well or surface water
- River or stream
- Rainwater storage
- Delivered or trucked water
- Other

### Q17. What does the household usually do to make water safe before drinking?

**Interviewer note:** Ask what is done most of the time before drinking.

*Tick one only.*

- Boil water
- Filter water
- Use chemical treatment (*chlorine or tablets*)
- Do nothing
- Other
- Do not know

**Q18. What type of toilet does the household mainly use?**

**Interviewer note:** If unclear, ask where people usually go (*toilet, bush, field, river*).

*Tick one only.*

- Private toilet at home
- Shared toilet
- Simple pit latrine
- No toilet (*open defecation/bush/field*)
- Other

**Q19. Is there a place for handwashing with water and soap near the home (*used regularly*)?**

**Interviewer note:** Observe if possible. If unsure, ask if water and soap are available at the same place.

*Tick one only.*

- Yes, water and soap are available.
- Water only
- Soap only
- No

**Q20. How long does it usually take to reach the nearest formal health facility?**

**Interviewer note:** Ask for the usual travel time in normal conditions. If it changes a lot, select “varies by season”.

*Tick one only.*

- Less than 30 minutes
- 30-60 minutes
- 1-2 hours
- More than 2 hours
- Travel time varies greatly by season

**Q21. What is the usual way this household reaches care?**

**Interviewer note:** Select the most common way used when someone is sick.

*Tick one only.*

- Walking
- Motorbike
- Ambulance
- Car
- Public transport (*truck or shared vehicle*)
- No reliable transport
- Other

**Q22. How far is the nearest formal health facility from this household?**

**Interviewer note:** Ask for the usual distance in normal conditions, not during extreme weather.

*Tick one only.*

- Less than 1 km
- 1-5 km
- 5-10 km
- More than 10 km
- Do not know

**Theme 3. Recent severe illness, infection pathways, and probable sepsis events** *(Use symptom language. Do not ask families to define sepsis. Focus on what happened over the past few months)*

**Q23. In the last 6 months, has any household member had an illness or infection that became severe or frightening?**

**Interviewer note:** Explain “severe or frightening” using examples (unable to walk, not waking, very weak, breathing fast, convulsions).

*Tick one only*

- Yes
- No
- Do not know

**⚠ If No or Do not know, skip to Q33**

**Q24. If yes, how many severe illness episodes occurred in the household during that period?**

**Interviewer note:** Count only episodes that were severe or frightening (*very weak, unable to stand, breathing problems, etc.*).

*Tick one only.*

- 1
- 2
- 3
- 4 or more

**Q25. For the most recent or most severe case, which age group was affected?**

**Interviewer note:** Ask about the person who was most affected in the most recent or most severe case.

*Tick one only.*

- Newborn under 1 month
- Infant 1-11 months
- Child 1-4 years
- Child 5-14 years
- Adult 15-49 years
- Older adult 50 or more

**Q26. What type of illness best describes the most recent or most severe case?**

**Interviewer note:** Ask about what was seen (*fever, cough, wounds, etc.*), not medical names. Let the person describe in their own words.

*Tick up to 3.*

- Fever (*hot body*) or strong shaking chills
- Fever with headache and strong body pain
- Cough or difficulty breathing
- Diarrhoea (*frequent loose stools*) or vomiting
- Wound, injury, or skin problem with swelling or pus
- Problem during pregnancy, after delivery, or with a newborn
- Pain or burning when urinating
- Other
- Do not know

**Q27. What was the first problem you noticed at the beginning?**

**Interviewer note:** Ask what happened first before the person became very sick (*for example: fever onset, wound, cough, diarrhoea, pregnancy or childbirth complications*). Focus on the first signs, not the cause.

*Tick one only.*

- Fever (hot body)
- Wound, bite, or injury
- Burn
- Cough or difficulty breathing
- Diarrhea or vomiting
- Problem during pregnancy, childbirth, or after delivery
- Pain or burning when passing urine
- Other
- Do not know

**Q28. Which danger signs were present in that case?**

**Interviewer note:** If needed, explain each sign with simple examples (*e.g. “not waking up”, “breathing very fast”*).

*Tick all that apply, up to 4.*

- Very high fever or strong shaking
- Not waking up, confused, or behaving strangely
- Very weak, unable to stand, or unable to eat or drink
- Fast breathing or difficulty breathing
- Seizures (body shaking or convulsions)
- Very little or no urine
- Wound with a bad smell, swelling, or pus

**Q29. Did the person stop normal activity or stay in bed for more than 3 days?**

**Interviewer note:** Ask if the person was unable to work, walk, or do usual daily activities for more than 3 days, or stayed mostly in bed.

*Tick one only.*

- Yes
- No
- Do not know

**Q30. Did the person seek care at a Pustu, Puskesmas, clinic, or hospital?**

**Interviewer note:** Include any attempt to get care, even if the person was not admitted or not treated.

*Tick one only.*

- Yes
- No
- Tried but could not reach care
- Tried care, but the condition did not improve
- Do not know

**Q31. In the last 12 months, did any household member die after an illness, infection, childbirth problem, or newborn illness?**

**Interviewer note:** Ask gently and respectfully. If needed, reassure that no names are required.

*Tick one only.*

- Yes
- No
- Do not know

**Q32. What was the outcome of the most recent or most severe case?**

**Interviewer note:** Ask about the final result of the illness, not the current condition if it changed later.

*Tick one only.*

- Recovered at home
- Recovered after formal care
- Still ill or not fully recovered
- Permanent weakness or disability
- Died
- Do not know

## Theme 4. Care-seeking, referral, and the role of Primary Medical Care. *(These questions follow the pathway from the first danger sign to help, referral, and facility care.)*

**Q33. What is usually the first action taken when someone in the household becomes very sick?**

**Interviewer note:** Ask about usual behaviour in the household, not only one specific case.

*Tick one only.*

- Waited at home
- Treated at home (*medicine, herbs, or care at home*)
- Went first to Kawan Sehat, or the health agent
- Went first to a traditional healer
- Went first to Pustu or Puskesmas
- Went directly to the hospital
- Other

**Q34. After the illness became serious, how long did it take for the household to seek help from outside?**

**Interviewer note:** Ask after the illness became serious (not from the first symptoms).

*Tick one only.*

- Same day
- The next day
- 2–3 days later
- More than 3 days later
- No outside help was sought
- Do not know

**Q35. Who was asked for help first outside the household?**

**Interviewer note:** If no outside help was sought in Q34, select “No one”.

*Tick one only.*

- Kawan Sehat
- Other local health worker (*kader*)
- Traditional healer
- Pharmacy/shop
- Midwife or nurse
- Pustu / Puskesmas
- Hospital
- No one
- Other

**Q36. Did a Kawan Sehat health agent provide any action or support in this case?**

*Tick one only.*

- No
- Yes, advice only
- Yes, basic care such as wound care or fever advice
- Yes, checked danger signs or vital signs
- Yes, advised urgent referral
- Yes, more than one of the above
- Do not know

**Q37. Was referral to a higher level of care recommended?**

*Tick one only*

- Yes
- No
- Do not know

**! If No or Do not know, skip to Q39 (no referral completed)**

**Q38. If a referral was recommended, was it completed?**

**Interviewer note:** Ask if the person actually reached the referred place (clinic or hospital).

*Tick one only.*

- Yes, the same day
- Yes, but later
- No
- Do not know

**Q39. What was the main reason for the delay or difficulty in getting care?**

**Interviewer note:** Ask for the main reason only. If several reasons, ask which one was the most important.

*Tick one only.*

- No money
- No health insurance / BPJS / KIS
- Too far
- No transport available
- Bad road, weather, or difficult terrain
- Cost of staying near the hospital
- Thought the illness was not serious
- Thought the illness was related to spiritual or non-medical causes
- The family waited or delayed the decision
- The health facility was not available or too crowded
- Other

**Q40. Before going to a health centre or hospital, what was given to the sick person?**

**Interviewer note:** Ask what was actually given (*show with hands if needed: tablets, injection, syrup*).

*Tick all that apply, up to 3.*

- Nothing was given
- Tablets or pills (*medicine to swallow*)
- Injection (*medicine given with a needle*)
- Syrup or liquid medicine
- Medicine bought locally (*shop, kiosk, or market*)
- Traditional or herbal medicine
- Wound cleaning or dressing
- Water, fluids, or oral rehydration
- Other
- Do not know

**Q41. Before reaching formal care, were any medicines bought directly from a kiosk, small shop, market seller, or pharmacy without a prescription?**

**Interviewer note:** Ask if any medicine was bought without seeing a doctor or health worker.

*Tick one only*

- Yes
- No
- Do not know

**⚠ Q41 → If No → skip to Q43**

**Q42. If yes, what kind of medicine was bought?**

**Interviewer note:** Ask only about medicines that were bought directly (not given by a health worker).

*Tick up to 2*

- Tablets or pills (*medicine to swallow*)
- Injection (*medicine given with a needle*)
- Syrup or liquid medicine
- Pain or fever medicine
- Strong medicine (*for pain, swelling, or inflammation*)
- Traditional or herbal medicine
- Other
- Do not know
- If known, write the name of the medicine: \_\_\_\_\_

**Q43. At the first formal health facility, what happened first?**

**Interviewer note:** If the person went to more than one place, ask about the first place reached. Ask what happened first upon arrival (*not later during care*).

*Tick one only*

- Seen and treated quickly
- Waited a long time before being seen
- Referred onward immediately
- Given medicine only and sent home
- No treatment or supplies available
- Do not know

**! If the person did not reach a health facility, skip to Q45 (no facility care)**

**Q44. If care was delayed or difficult, what seemed to be the main problem at the facility?**

**Interviewer note:** Ask what made care difficult at the facility (*waiting, no medicine, no staff, etc.*).

*Tick one only.*

- The patient was not seen quickly
- Medicines were not available
- Equipment or treatment was not available
- Not enough staff or no doctor
- The patient was sent to another place
- Do not know

**Theme 5. Broader rural health, public health education, and program value.** (*This short block uses the interview opportunity to capture data beyond sepsis alone*)

**Q45. Has the household heard of or met a Kawan Sehat health agent in this village or the nearby area?**

**Interviewer note:** If unsure, ask if they know or have seen the Kawan Sehat health agent in the village.

*Tick one only.*

- Yes
- No
- Do not know

**Q46. In the last 6 months, has anyone in the household received advice or help through Primary Medical Care or from Kawan Sehat?**

**Interviewer note:** Ask if any support was received (advice, treatment, or help), even if small.

*Tick one only.*

- Yes
- No
- Do not know

**Q47. If yes, what kind of support was received?**

**Interviewer note:** Select what was actually received (*not what was expected*).

*Tick up to 3*

- Health advice only
- Wound care or infection advice
- Child illness care
- Pregnancy, postpartum, or newborn advice
- Referral advice
- Medicine or supplies
- Other

**⚠ If No or Do not know in Q46, skip to Q48**

**Q48. In the last 6 months, has the household seen or heard any health messages (posters, talks, village sessions)?**

**Interviewer note:** Give simple examples (posters, talks, meetings in the village).

*Tick one only.*

- Yes
- No
- Do not know

**Q49. What kind of health advice or information has your household seen or heard recently?**

**Interviewer note:** Ask what they remember seeing or hearing, not what they think is correct.

*Tick up to 3.*

- How to prevent malaria or mosquito bites
- How to use clean water, wash hands, or stay clean
- How to clean and care for wounds
- Danger signs during pregnancy, after birth, or in newborns
- How to feed children or keep them healthy
- How to use medicines safely
- Other
- None / do not remember

**Q50. Did this advice change anything in what your household does?**

**Interviewer note:** Ask about real changes in daily life (water, hygiene, care-seeking, etc.).

*Tick one only.*

- Yes, clearly
- Yes, a little
- No
- Do not know

### Q51. What changed the most in your household?

**Interviewer note:** If several changes, ask which one changed the most.

*Tick one only.*

- Going sooner to seek care when someone is sick
- Cleaning wounds better
- Boiling or treating drinking water
- Washing hands more often
- Using mosquito nets or protection
- Seeking care sooner for pregnancy or newborn problems
- Feeding children better
- No real change
- Other

### Q52. Apart from severe infections, what are the main health problems in this household or village?

**Interviewer note:** Ask about common problems in the household or village, not only one person.

*Tick up to 3.*

- Frequent fever or suspected malaria
- Dengue (fever with severe pain)
- Diarrhea (frequent loose stools)
- Cough or breathing problems (including long cough)
- Problems during pregnancy or with newborns
- Children are not growing well, stunting, or severe malnutrition
- Skin problems, wounds, or infections
- Injuries, accidents, or snake bites
- Long-term illness (for example, long illness or chronic disease)
- Other

### Q53. Which topics most need more health education in this area?

**Interviewer note:** Ask what people feel is most needed for health education in their area.

*Tick up to 3.*

- Danger signs of severe infection
- Safe water and hygiene
- Wound care
- Pregnancy, postpartum, and newborn care
- Malaria or dengue prevention
- Nutrition and child feeding
- How to use medicines safely
- When to go to the hospital
- Healthy living and hygiene behaviour
- Dangers of smoking and alcohol
- Other

**Q54. In your opinion, what one action would help prevent deaths from serious illness in this area?**

**Interviewer note:** Ask for one main idea only. If needed, give simple examples (water, transport, care).

*Tick one only.*

- Better clean water and sanitation
- Faster transport to care
- More medicines at the local level
- Better-trained health agents
- Better maternal and newborn care
- Faster triage and treatment at facilities
- More community health education
- Better road access
- Other
- Do not know

**Theme 6. Trust in health services, satisfaction, and barriers to confidence.** *(These final questions explore whether families feel that formal health services can truly help when severe illness occurs, and what may reduce confidence in seeking care.)*

**Q55. When someone in your household becomes seriously ill, how much confidence do you have that the nearest health centre or hospital can really help?**

**Interviewer note:** Ask about real confidence based on experience, not what they think is expected.

*Tick one only.*

- Full confidence
- Some confidence
- Little confidence
- No confidence
- Do not know

**Q56. What is the main reason families may not go quickly to a health centre or hospital when someone is very sick?**

**Interviewer note:** Ask for the main reason only.

*Tick one only.*

- Cost of transport or treatment
- Distance or no transport available
- Fear that treatment will not help
- Lack of medicines or equipment
- Long waiting time or too few staff
- Preference to stay in the village or try something else first
- Other
- Do not know



# FIELD GUIDE – HOUSEHOLD SURVEY

## For Kawan Sehat Agents and Survey Interviewers

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### Purpose

We are not diagnosing diseases.

We want to understand:

- How people become sick
- How they react
- What delays care
- What happens before reaching health services
- What can be improved

👉 Your role is to **listen carefully and record reality**, not to judge or correct.

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### Structure of the Questionnaire

The survey follows a logical order:

1. Household profile and vulnerability
2. Housing and indoor environment
3. Access to care
4. Recent severe illness
5. Care-seeking and referral
6. Public health and prevention
7. Trust and perception of care

👉 Follow the order. Do not skip sections unless instructed.

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### Key Skip Rules (VERY IMPORTANT)

- **If no severe illness (Q23 = No or Do not know)**
  - Skip Q24 to Q32
  - Continue at Q33
- **If referral was NOT recommended (Q37 = No or Do not know)**
  - Skip Q38
  - Continue at Q39
- **If no medicines were bought without prescription (Q41 = No or Do not know)**
  - Skip Q42
  - Continue at Q43

- **If the person did NOT reach a health facility (Q43 condition)**
  - Skip Q44
  - Continue at Q45
- **If no support from Kawan Sehat (Q46 = No or Do not know)**
  - Skip Q47
  - Continue at Q48

👉 If unsure: continue forward. Do not go back.

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## **How to Ask Questions**

- Speak slowly and clearly
- Use simple words
- Use local language if needed
- Explain with examples
- Ask about **what people saw or did**, not medical terms

👉 If they don't understand:

✓ rephrase

✗ do not repeat the same sentence

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## **How to Listen**

- Let the person speak
- Do not interrupt
- Do not suggest answers
- Do not correct them

👉 There are no wrong answers

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## **If the person does not know**

✓ Select: **Do not know**

✗ Do not guess

✗ Do not answer for them

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## **Important Concepts to Explain Simply**

- **“Very sick”** = cannot walk, cannot wake up, very weak, breathing fast
  - **“Infection”** = fever, wound, cough, diarrhea, childbirth problem
  - **“Help from outside”** = health agent, nurse, clinic, hospital
-



## Household & Environment Questions

👉 Focus on real daily life:

- What they use for water
- How they cook
- Where they live
- Smoke exposure
- Hygiene

- ✓ Observe when possible
  - ✓ Ask what is done **most of the time**
- 



## Pregnancy and Children (Q15 block)

- Ask only if relevant
- Keep it simple
- Do not ask medical details

👉 Focus on:

- Pregnancy
  - Delivery
  - Care received
  - Who decides
- 



## Severe Illness Block (Q23–Q32)

👉 This is the most important part.

- Ask about **real events**
- Focus on **one case (most recent or most severe)**
- Use symptom language

- ✗ Do not ask for diagnosis
  - ✓ Ask what happened
- 



## Medicines Questions (Q40–Q42)

Do NOT use medical words.

Instead ask:

- tablets
- injections
- syrup
- traditional medicine

👉 Ask what they saw or gave, not names

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## Health Facility Questions

- Ask what happened **first**
  - Not what happened later
  - Not what should have happened
- 

## Attitude

- Be respectful
- Be neutral
- Do not judge beliefs
- Do not judge traditional practices

👉 Your role is to understand, not to change behaviour during the interview

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## Final Step

Complete:

- All questions
- Interviewer observations (if useful)

👉 Observations are important:

- condition of the house
  - visible hygiene
  - anything unusual
- 

## Remember

This survey helps improve:

- Early detection
- Access to care
- Prevention
- Survival

👉 Your work matters.

👉 Your work can help save lives.