

April 8, 2014

Dear DHS Program,

Thank you for the opportunity to suggest revisions to the DHS-7 Questionnaires. On behalf of the Diarrhea & Pneumonia Working Group's M&E Subgroup (see below for more information), we would like to suggest the following changes to improve the measurement of ORS and zinc coverage for the treatment of diarrhea:

- Revise Q.522 to include a prompt for zinc tablets or syrup
- Include in the tabulation plan measurements for coverage of ORS and zinc, coverage of ORS without zinc, and coverage of zinc without ORS in children under five with diarrhea

Please find attached the completed guideline form with additional information supporting these changes. If you have any questions, please do not hesitate to contact me. We again thank the DHS Program for taking our recommendation into consideration.

Warm regards,

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#### **About the Diarrhea & Pneumonia Working Group**

*Formed in late 2011, the Diarrhea & Pneumonia Working Group aims to reduce mortality and morbidity from child diarrhea and pneumonia by accelerating treatment scale-up in 10 high-burden countries which account for over 60% of the global burden—Bangladesh, Democratic Republic of Congo, Kenya, India, Niger, Nigeria, Pakistan, Tanzania, and Uganda. The Working Group, co-chaired by the Clinton Health Access Initiative (CHAI) and UNICEF, consists of members from over 40 organizations working in child health including implementing partners, donors, and the private sector. Specifically, the Working Group provides technical assistance, resource mobilization, and monitoring and evaluation support to organizations and governments working to implement national scale-up plans for essential medicines and/or related RMNCH strategies (UN Commission on Life-Saving Commodities, GAPPD, A Promise Renewed, etc). For more information, please visit: <http://ccmcentral.com/related-links/diarrhea-pneumonia-working-group/>*

## The Demographic and Health Surveys Program Revising DHS-7 Questionnaires

### Guidelines for suggesting changes to The DHS Program Core Questionnaires

#### REVISIONS: Making recommendations to revise the wording of existing questions:

Provide the suggested change in question wording or response categories, and the rationale for the change.

#### 1. What is the information needed?

The information needed is whether a child who had diarrhea in the previous two weeks received both ORS and zinc. ORS and zinc is recommended to be taken together by UNICEF and the WHO<sup>1,2</sup>, and the recommendation is included in the new IMCI chart book<sup>3</sup>. Currently, the DHS model questionnaire does not prompt for zinc, as it does for ORS, ORT, and RHF, and the tabulation plan does not include an estimate for the proportion of children under five with diarrhea in the last 2 weeks that received both ORS and zinc.

#### 2. What questions will elicit this information?

Specify the content of the recommended question(s) and, if possible, propose exact wording for each question and the accompanying coding categories, presented in a format as close as possible to that currently in the DHS questionnaires. Indicate whether or not the questions have ever been fielded or validated.

The current questionnaire already captures ORS and zinc coverage in Q.522 and Q.525 of the model questionnaire (Section 5. Child Immunization, Health, and Nutrition). However unlike ORS, zinc is not prompted for by the interviewer which could potentially underestimate its coverage. We recommend revising the question to include zinc tablets and syrup as a prompted response. Exact wording for the questionnaire is provided below (changes highlighted in yellow), and this question has already been fielded by the DHS in Tanzania (2010) and Bangladesh (2011).

522	Was he/she given any of the following to drink at any time since he/she started having the diarrhea:	YES	NO	DK	
a)	A fluid made from a special packet called [LOCAL NAME FOR ORS PACKET]?	FLUID FROM ORS PKT	1	2	8
b)	A pre-packaged ORS liquid? <b>(10)</b>	ORS LQD	1	2	8
c)	A government-recommended homemade fluid? <b>(11)</b>	HOMEMADE FLUID	1	2	8
d)	Zinc tablets or syrup? <b>(12)</b>	ZINC	1	2	8

<sup>1</sup> The Treatment of Diarrhoea – A manual for physicians and other senior health workers (4<sup>th</sup> revision). WHO. 2005 ([http://www.who.int/maternal\\_child\\_adolescent/documents/9241593180/en/](http://www.who.int/maternal_child_adolescent/documents/9241593180/en/))

<sup>2</sup> Diarrhoea Treatment Guidelines (including new recommendations for the use of ORS and zinc supplementation) for Clinic-Based Healthcare Workers. MOST, WHO, UNICEF. 2005 ([http://www.who.int/maternal\\_child\\_adolescent/documents/a85500/en/](http://www.who.int/maternal_child_adolescent/documents/a85500/en/))

<sup>3</sup> Integrated Management of Childhood Illnesses (IMCI) – Chart Booklet. WHO. 2014 ([http://www.who.int/maternal\\_child\\_adolescent/documents/IMCI\\_chartbooklet/en/](http://www.who.int/maternal_child_adolescent/documents/IMCI_chartbooklet/en/))

**(10)** Include in the question the common names/brands for pre-packaged ORS liquids. If pre-packaged ORS liquids are not available in the country, this item should be deleted.

**(11)** This item should be adapted to include the terms used locally for the recommended home fluid. The ingredients promoted by the government for making the recommended home fluid should be reflected in the category. If the government does not recommend a homemade fluid, then the word "government" should be dropped from the question.

**(12)** Include in the question the common names/brands for zinc tablets or syrups. If zinc tablets or syrups are not available in the country, this item should be deleted.

### 3. How will the resulting information be used?

Explain how the data will be used. A clear but brief description of how the requested data will be used as an indicator, in programs, or in critical analysis helps to make the case for inclusion. If the data are to be used to estimate an indicator, fully define the numerator and denominator of the indicator. Describe how the data should be tabulated and presented in the final report.

As stated above, the data will provide evidence on adherence to the WHO and UNICEF recommendations on the usage of both ORS and zinc for treatment of diarrhea in children under five. The table below describes three indicators that will be estimated using the data gathered from the revised questions.

Indicator	Definition	Numerator	Denominator
Coverage of ORS and zinc in children under five with diarrhea	Proportion of diarrhea in children under five in the last two weeks that received both ORS and zinc	Children under five with diarrhea in the last two weeks that received either fluid made from ORS packets or pre-packaged ORS fluids AND zinc tablets or syrup.	Children under five with diarrhea in the last two weeks
Coverage of ORS without zinc in children under five with diarrhea	Proportion of diarrhea in children under five in the last two weeks that received ORS but not zinc	Children under five with diarrhea in the last two weeks that received either fluid made from ORS packets or pre-packaged ORS fluids AND no zinc tablets or syrup	Children under five with diarrhea in the last two weeks
Coverage of zinc without ORS in children under five with diarrhea	Proportion of diarrhea in children under five in the last two weeks that received zinc but not ORS	Children under five with diarrhea in the last two weeks that received zinc tablets or syrup AND no fluid made from ORS packets or pre-packaged ORS fluids	Children under five with diarrhea in the last two weeks

A tabulation plan is offered below and is modeled after the tabulation plan from Bangladesh's 2011 DHS report.

Table X Diarrhea treatment with ORS and zinc				
Among children under age five who had diarrhea in the two weeks preceding the survey, percentage who received fluid made from ORS packets but not zinc syrup or tablets, percentage who received zinc but not ORS, and percentage who received both ORS and zinc, by background characteristics. [country, year]				
Background characteristic	ORS but not zinc	Zinc syrup / tablet but not ORS	ORS and zinc	Number of children
<b>Age in months</b>				
<6				
6-11				
12-23				
24-35				
36-47				
48-59				
<b>Sex</b>				
Male				
Female				
<b>Type of diarrhea</b>				
Nonbloody				
Bloody				

**Residence**

Urban  
Rural

**Region**

Region 1  
Region 2  
Region 3  
Region 4

**Mother's education**

No education  
Primary  
Secondary  
More than secondary

**Wealth quintile**

Lowest  
Second  
Middle  
Fourth  
Highest

Total

Note:

4. What is the priority of suggested additions compared with what is already in the questionnaires? Anyone recommending additions is requested to suggest what existing questions in that topical area can be removed (indicate priority). If the recommended new questions will obviate the need for other questions currently being asked, please indicate. Requests for additions to the questionnaires that are accompanied by a list of questions suggested for deletion will have a better chance of receiving favorable consideration.

No additions are being suggested. The suggestion is to revise the questionnaire to prompt for zinc.

5. If suggesting more than one addition, what is the priority among the suggested additions?

No additions are being suggested.

6. Should the additional data be collected in all countries, or only in selected types of countries (e.g., countries with a particular type of program, countries with prevalence of a particular infection >5% or 10%)?

All countries.