

**Research Title: Effects of climatic and non-climatic factors on water-borne diseases in
Nepal
Kathmandu University, Dhulikhel, Kavre**

Objective 3: perception and practices of local people on climate change and prevention and control of water-borne diseases.

Background Information

1. Serial no----- Date of interview----- Name of interviewer-----
2. Name of participant.....
3. Name of district----- Name of Rural Municipality-----Ward Number-----
4. Sex a. Male ☐ b. Female ☐
5. Complete age (In years) -----
6. Marital Status: Single ☐ Married ☐ Divorced ☐ Widow ☐
7. Family Type: Single ☐ Joint ☐ Extended ☐
8. Religion: Hindu ☐ Buddhist ☐ Islam ☐ Others ☐
Christianity ☐ Others (Specify).....
9. Education Status:
Illiterate.....1 Primary.....2
Secondary.....3 Higher education.....4
10. Occupation:
Service.....1 Business.....2
Agriculture.....3 Labor.....4
Others (specify).....5
11. Annual income

Questions related to Climate change

12. Do you know about Climate change?

a. Yes b. No c. Don't know d. No response

13. If yes, what changes have you observed due to climate change?

Parameters	Rising/Increasing	Decreasing	Constant
1. Temperature			
2. Precipitation			
3. Drought			
4. Flood			

14. Do you think climate change is happening because of ?

1. Humans 2. Natural causes 3. Both 4. Don't know

15. Are you aware of what is happening in the world due to climate change?

1. Yes 2. No 3. Don't know 4. No response

16. Are you worried about climate change?

1. Yes 2. No 3. Don't know 4. No response

17. Do you believe climate change could affect your way of life or lifestyle?

1. Yes 2. No 3. Don't know 4. No response

18. Do you think recent floods, extreme heat, and unusual weather patterns are due to climate change?

1. Yes 2. No 3. Don't know 4. No response

19. Do you think that you have the ability and power to protect yourself from the impact of climate change?

1. Yes 2. No 3. Don't know 4. No response

20. Do you think the Nepal government is doing enough to address climate change?

1. Yes 2. No 3. Don't know 4. No response

Questions related to water-borne diseases (diarrhea)

21. Have you heard about Water-borne diseases?

1. Yes 2. No 3. Don't know 4. No response

22. What is Diarrhea?

a. Loose stools less than 5 times per day

b. Loose stool for more than 5 times per day

23. Knowledge of Signs and symptoms associated with diarrhea?

Frequent loose, watery stools	Yes....1	No.....2
Abdominal cramps	Yes....1	No.....2
Abdominal pain	Yes....1	No.....2
Fever	Yes....1	No.....2
Bleeding	Yes....1	No.....2

Lightheadedness or dizziness from dehydration	Yes....1	No.....2
Don't know	3	
No response	4	

24. Do you know bacteria and virus transmit diarrheal diseases?

1. Yes 2. No 3. Don't know 4. No response

25. Does microbes or pathogens transmit diarrhea?

1. Yes 2. No 3. Don't know 4. No response

26. Does contaminated food or beverages transmit diarrhea?

1. Yes 2. No 3. Don't know 4. No response

27. Knowledge on the mode of transmission?

Diarrhea		
Contaminated food or drinking water	yes....1	No.....2
From person-to-person	yes....1	No.....2
Poor hygiene	yes....1	No.....2
Transmission by flies that have crawled on feces	yes....1	No.....2
Contaminated object or surface	yes....1	No.....2
Don't know	yes....1	No.....2

Questions related to climatic factors and diarrhea

28. Do you believe that climatic change increase diarrheal diseases?

1. Yes 2. No 3. Don't know 4. No response

29. If yes, what climatic factors increase diarrhea disease ?

1.	Rise in temperature
2.	Increase/Decrease in precipitation
3.	Dry season
4.	Others
5.	Don't know

30. Which season of the year influences the variability of diarrhea disease?

Increased case year round	Yes....1	No.....2
Increased cases in the summer season (April-June)	Yes....1	No.....2

Increase cases in the rainy season (June – Sept.)	Yes....1	No....2
Increase cases in the winter season	Yes....1	No.....2
All of the above	3	
None of the above	4	
Don't know	5	

Preventive practice against diarrheal disease

31. What preventive measures are you practicing to prevent from Water borne diseases (Diarrhea)?

preventive measures			Remarks
Access to safe drinking-water	Yes....1	No....2	
Use of improved sanitation facilities	Yes....1	No....2	
Practice good personal and food hygiene	Yes....1	No....2	
Obtain health education on diarrhea spread	Yes....1	No....2	
Rotavirus vaccination	Yes....1	No....2	
Others preventive measures	Yes---1	No....2	

32. Do you immediately visit health institutions if you are suffering from diarrheal diseases?

1. Yes 2. No

33. What are Oral rehydration solutions (ORS)?

a. Salt b. Anti-diarrheal c. Water d. Drug e. Don't know

34. Is Diarrhea a serious public health problem in this area?

1. Yes 2. No 3. Don't know

35. Can Diarrhea be prevented?

1. Yes 2. No 3. Don't know

36. Do you think that maintenance of clean surroundings can prevent diarrhea disease?

1. Yes 2. No 3. Don't know

37. Do you make your household surrounding clean?

1. Yes 2. No

38. Do you cover the drinking water container?

1. Yes 2. No 3. Don't know

39. Types of water sources used for drinking purposes?

1. Tube well 2. Spring 3. River 4. Others

40. Distances of drinking water Sources?

1. Within the premises 2. Outside the premises (.....min/hr)

41. What method do you use for water purification?

1. Boiling 2. Cloth filter 3. Steel filter 4. Sand filter
5. Others (Chlorine tablet RO System) 6. None

42. Distance of toilet from the house?

1. Within the premises 2. Outside the premises

43. Do you wash your hand after defecation?

1. Yes 2. No 3. Don't know

44. What do you use to wash your hand after defecation?

1. Soap 2. Plain water 3. Ash, Mud 4. None

Thank you!