

出國報告（出國類別：其他：國際醫療）

2017 高雄榮民總醫院  
柬埔寨茶膠省健康促進計劃  
返國報告

服務機關：高雄榮民總醫院 兒童醫學部

姓名職稱：林彥婷 主治醫師

派赴國家：柬埔寨

出國期間：

2017年08月01日至2017年08月31日

2017年10月06日至2017年11月04日

2017年12月09日至2017年12月19日

報告日期：中華民國2018年2月12日

## 摘要

高雄榮民總醫院肩負「醫療無疆界，送愛到異邦」之社會任務，長期致力於國際醫療援助工作，並配合政府的新南向政策，將醫療軟實力延伸至東南亞的柬埔寨。本計畫延續 105 年度「柬埔寨幼兒健康促進計畫」，106 年度更擴大至與本院簽約的姊妹醫院—巴提醫院，協助其進行醫院醫療品質提升，將本院致力於醫療品質提升的努力，分享至其他發展中國家。

根據 105 年度調查結果，柬埔寨鄉村地區五歲以下嬰幼兒營養不良比例可高達 50%，但政府在鄉村地區醫療人力短缺、兒童資料不齊全、一般民眾對兒童照護知識薄弱，物資取得不易，均是造成柬埔寨鄉村的兒童營養不良比例遠高於其他鄰近國家的原因。

一本人道援助的初衷，為深化柬埔寨地區醫療合作服務，本計畫與當地衛生所、NGO 及醫院合作，致力於減少五歲以下兒童營養不良比例，並致力於提升巴提醫院醫療品質。

## 關鍵字

國際醫療、柬埔寨、五歲以下兒童、營養不良、醫療品質提升

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# 一、目的

## (一)兒童健康醫事人力常駐計畫

### 1. 預期達成目標

- (1) 執行柬埔寨茶膠省兒童健康計畫在地調查與服務。
- (2) 密切交流加強當地專業醫事人力培訓與青年志工醫療教育。

### 2. 完成工作項目

- (1) 以季為服務梯次，每梯次以 1 名兒科專業醫事人員常駐茶膠省，協助兒童健康計畫醫療服務。包含：
  - A. 評估兒童健康狀態、生長發育指標、家庭社經地位、照護者教育程度，及其各項之間的相關性，建立五歲以下兒童公衛資料庫。
  - B. 建立當地五歲以下幼兒電子病歷。
  - C. 降低幼兒營養不良與貧血盛行率。
- (2) 培訓當地醫事人員，協助並指導辦理兒童疾病預防、兒童衛生管理、急救訓練、外傷處理等衛生教學活動與工作坊，強化柬國醫護人員學習各項技能與相關兒童健康成果評值。

## (二)柬埔寨醫事人員訓練計畫

### 1. 預期達成目標

- (1) 培訓柬埔寨專業醫事人員成為兒童健康計畫種子教師，建立完整兒童健康計畫概念，熟悉孩童生長發育時程與健檢項目，進而提升幼兒照護品質、民眾衛生教育。
- (2) 認識疾病防治、感染管制的概念。
- (3) 熟悉基礎急救、外傷處理的步驟。

### 2. 完成工作項目

- (1) 提供 2 名柬埔寨兒科專業相關醫事人員至高榮進行 3 個月訓練課程，受訓單位包含：兒醫部、急診部、護理部、感管室等，學習：兒童照護基本知識與診治，一般外傷處理與急診見習，感控訓練，護理部門管理。
- (2) 將院內醫療照護品質指標，有關病人安全與 BLS 急救方法等觀念推廣至該院並協助其實行：「洗手技術正確率」、「降低點滴注射感染率」、「BLS 測驗合格率」等多項指標。藉由種子教師的培訓推廣至巴提醫院，逐漸提升該院醫療照護品質。
- (3) 結束受訓並返柬的醫事人員，協助在村莊內及巴提醫院執行衛教講座，內容包含：兒科照護、護理管理與院內品質提升、感染控制等，每月一場。

## (三)促進兒童健康計畫之多邊國際合作與交流

### 1. 預期達成目標

- (1) 促進台、柬衛生機關交流，建立合作機制。

- (2)建立台、東與其他周邊國兒童健康計畫執行成果與經驗交流。
- (3)開啟參與國際性衛生組織 (WHO, UNICEF)計畫之契機。
- (4)辦理具規模性的義診，提升國家形象與國際能見度。

## 2.完成工作項目

- (1)邀請東國高階衛生官員及專家來台，促進台灣與東國衛生部門建立合作交流機制。
- (2)藉由雙邊合作，串連其他東協國家共同辦理衛生合作計畫或活動，增加我國參與國際兒童健康促進活動契機。
- (3)提供相關計畫執行成果與經驗予國際性衛生組織 (WHO, UNICEF)，增加台灣在兒童照護上之成果曝光率。
- (4)聯合在柬埔寨國內，也以兒童健康為主要計畫的 NGO，資源共享，已使醫療援助達到最大效益。
- (5)籌辦行動醫療團，統合兒醫部各專科、眼科、口腔醫學部、護理部、營養師、藥師等資源，充分發揮醫學中心級嬰幼兒照護經驗，在當地有限資源下亦能增進柬埔寨醫療人員的學習與技能。主動發覺需進一步治療之個案，經審慎評估後建立後送台灣診治的轉介機制與服務。

## 二、過程

本次柬埔寨健康促進計畫(2017/08/01-2017/12/31)，

奉派公假日期為：

2017年08月01日至2017年08月31日

2017年10月06日至2017年11月04日

2017年12月09日至2017年12月19日

其餘期間，回國工作

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年8月1-4日

填表人：林彥婷

工作地點：村落 醫院內 其他-辦公室

類別	工作內容概要
服務統計	<p>▶衛教服務：</p> <ol style="list-style-type: none"> <li>Village 2 (Khwan Meas)及Village 10 (Kan Dol)五天衛教課程，參與人數分別為20及15位孩童及其家屬。</li> <li>Village 9(Prey Swa)家訪4個家庭。</li> </ol> <p>▶服務量：39人次。</p>
工作事項記要(如特殊病例及其他事項等)	<ol style="list-style-type: none"> <li>週一召開週會，上週工作報告及本週工作計畫。</li> <li>志工的教學需要再加強。</li> <li>照顧者帶孩童來上衛教課程，會受孩童的情況干擾上課專心度。</li> <li>Village 2發現一位發紺性心臟病童，留資料待醫療團時詳細檢查。</li> </ol> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%; text-align: center;">  <p>衛教課程準備上課</p> </div> <div style="width: 50%; text-align: center;">  <p>三大營養素海報教學</p> </div> <div style="width: 50%; text-align: center;">  <p>以食物圖卡認識三大營養素</p> </div> <div style="width: 50%; text-align: center;">  <p>副食品製作教學</p> </div> </div>



小朋友排隊練習洗手



家訪觀察照護者執行情況(V9)



家訪觀察照護者執行情況(V9)



周遭環境



廚房與飲用水



家訪觀察照護者執行情況(V9)



飲用水有煮開並加蓋



家中張貼三大營養素海報

高雄榮總柬埔寨健康促進計畫 工作日志表 Daily Working Report

工作日期：2017年8月7-11日

填表人：林彥婷

工作地點：■村落 □醫院內 ■其他-辦公室

類別	工作內容概要
服務統計	▶衛教服務：

	<p>1. Village 4 (Chambok) Group 1 及 Village 7 (Trov Pang Traw) Group 1 &amp; 2 五天衛教課程，參與人數分別為 20 及 25 位孩童及其家屬。</p> <p>2. Village 2(Khwan Meas)家訪 3 個家庭。</p> <p>▶服務量：48 人次。</p>
<p>工作事項記要(如特殊病例及其他事項等)</p>	<p>1. 週一召開週會，上週工作報告及本週工作計畫。</p> <p>2. Village 7 志工本身是祖母，在上課現場會準備小玩具，因此孩童較不會干擾上課，可作為其他村上課時參考。</p> <p>3. 衛教教學後，需當場針對志工不熟悉的部分做指導，增加印象。</p> <p>4. 志工家訪問卷要再加強熟悉度。</p> <p>5. Village 4 有一母親共有七個孩子，最小的兩個均是唐氏症，其中之一有心臟病，另一為嚴重營養不良，懷疑有基金缺陷。</p>
	
<p>衛教課程上課</p>	<p>針對年紀小的孩童測量身長</p>
	
<p>以食物圖卡認識三大營養素</p>	<p>Village 4 副食品製作教學</p>
	
<p>V4 極度營養不良個案</p>	<p>志工、參與孩童及家屬</p>





志工自行準備玩具，讓孩子不打擾上課



三大營養素教學



Village 7 副食品製作教學



員工協助餵餐



教學後由員工指導志工改進事項



鹽和糖製作電解質水緩解腹瀉



洗手教學



保持良好衛生，剪指甲也是重要的一部分

工作日期：2017年8月14-18日

填表人：林彥婷

工作地點：■村落 □醫院內 ■其他-辦公室

類別	工作內容概要	
服務統計	<p>▶衛教服務：</p> <p>1. Village 1 (Klang Sambat), Village 3 (Tang Rossey)及 Village 8(Krang Por) Group 1 五天衛教課程，參與人數分別為 18, 28 及 12 位孩童及其家屬。</p> <p>2. Village 2, 4, 7, 9, 10 展開個案家訪。</p> <p>▶服務量：58 人次。</p>	
工作事項記要(如特殊病例及其他事項等)	<p>1. 週一召開週會，上週工作報告及本週工作計畫。</p> <p>2. 因為多個村莊同時進行教學與家訪，提醒員工需要妥善安排時間來完成工作。</p> <p>3. 衛教教學後，需當場對志工指導，增加印象。</p> <p>4. 有些村莊有父親或祖父參與衛教課程，對課程反應很好。</p> <div style="display: flex; justify-content: space-around;"> <div data-bbox="371 757 911 1137">  </div> <div data-bbox="954 757 1469 1137">  </div> </div> <div style="display: flex; justify-content: space-around;"> <div data-bbox="371 1137 911 1182"> <p>衛教課程上課</p> </div> <div data-bbox="954 1137 1469 1182"> <p>在村莊利用民宅進行教育訓練</p> </div> </div> <div style="display: flex; justify-content: space-around;"> <div data-bbox="371 1182 911 1641">  </div> <div data-bbox="954 1182 1469 1641">  </div> </div> <div style="display: flex; justify-content: space-around;"> <div data-bbox="371 1641 911 1686"> <p>測量身高體重</p> </div> <div data-bbox="954 1641 1469 1686"> <p>三歲以下要加測量頭圍</p> </div> </div>	



較小的孩童測量身長



以圖卡認識三大類營養素



Village 3 副食品製作教學



副食品製作教學



電解質水製作



洗手教學



家訪觀察照顧者執行情況(V2)



飲用生水、水未加蓋(V2)



有些家庭開小雜貨鋪(V2)



四周環境(V2)



廚房不清潔(V2)，針對環境清潔的項目加強輔導



水未加蓋(V2)



廚房環境(V7)




牲畜多養在住宅旁，有味道且多有蒼蠅(V7)



家訪查看黃卡中的疫苗紀錄(V9)



家中環境(V9)

		
	廚房，食物有加蓋，水有煮沸	水缸未加蓋，地面潮濕

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年8月21-25日

填表人：林彥婷

工作地點：■村落 ■醫院內 ■其他-辦公室

類別	工作內容概要
服務統計	<p>▶▶衛教服務：</p> <ol style="list-style-type: none"> <li>1. Village 5 (Putsor) Group 1 五天衛教課程，參與人數為 21 位孩童及其家屬。</li> <li>2. Village 1, 2, 3, 4, 7, 8, 9, 10 展開個案家訪。</li> </ol> <p>▶▶服務量：21 人次。</p> <p>▶▶巴提醫院教育訓練(8/22,23)</p> <ol style="list-style-type: none"> <li>1. 8/22 進行洗手正確率、洗手五時機教育訓練課程。</li> <li>2. 8/23 BLS 教育訓練課程。</li> </ol> <p>▶▶服務量：每日參與員工 35 人次。</p>
工作事項記要(如特殊病例及其他事項等)	<ol style="list-style-type: none"> <li>1. 週一召開週會，上週工作報告及本週工作計畫。</li> <li>2. 雨季開始，村中以務農為主，志工或村民常需農忙，進度進展變慢。</li> <li>3. 8/22,23 由高榮兒醫部及急診部派出四人至巴提醫院，進行洗手教育訓練、BLS 教育訓練，此均為巴提醫院第一次接受此主題的課程，有重要意義。</li> <li>4. 課程內容需要翻譯，課程進行時間會拉長，常無法按安排時間完成，此為國際醫療安排訓練課程時要注意的重點。解決方式為提前與翻譯人員講解課程內容，增加其了解，在課堂翻譯時會更加流暢。</li> </ol>



V5 衛教課程上課



衛教課程上課



Village 5 副食品製作教學



副食品製作教學



孩子開心品嚐



孩子開心品嚐



巴提醫院課程訓練



巴提醫院課程訓練

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年8月28-31日

填表人：林彥婷

工作地點：■村落 □醫院內 ■其他-辦公室、衛生所

類別	工作內容概要
服務統計	▶▶衛教服務： 1. Village 1, 2, 3, 4, 5, 7, 8, 9, 10 展開個案家訪。

▶▶服務量：106 人次(8 月總計)。

工作事項  
記要(如  
特殊病例  
及其他事  
項等)

1. 週一召開週會，上週工作報告及本週工作計畫。
2. 統整 8 月資料、家訪結果。
3. 拜訪 Health Center(衛生所)討論該村落內黃卡使用、驅蟲藥發放情形。
4. 追蹤志工家訪進度，針對有困難的志工予以協助。
5. 8/31 召開月會，向志工報告目前各村工作進度、詢問志工是否有執行上困難點以及建議。
6. 安排下個月工作進度。



8 月月會，衛生所代表出席並感謝我們在當地的計畫



8 月月會，讓志工熟知計畫和各村進度



8 月月會繼續教育重點-如何帶領現場的家長和孩子參與活動，由 GU 的老師分享



GU 的老師傳授村落教學時可以集中家長和孩子注意力的方式



8 月優良志工表揚



8 月優良志工表揚



	<p>優良志工(V2)分享工作心得與困難解決方式</p>	<p>優良志工(V7)分享工作心得與困難解決方式</p>
		
	<p>優良志工(V9)分享工作心得與困難解決方式</p>	<p>優良志工(V4)分享工作心得與困難解決方式</p>
		
	<p>全體志工員工月會合照</p>	<p>與衛生所開會討論黃卡使用和驅蟲藥發放時程</p>
		
	<p>靠國際經費補助才會有的驅蟲藥</p>	<p>靠國際經費補助才會有的 Vitamin A</p>

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年10月9-13日

填表人：林彥婷

工作地點：■村落 □醫院內 ■其他-辦公室

類別	工作內容概要
服務統計	<p>▶▶衛教服務：</p> <ol style="list-style-type: none"> <li>1. Village 5 (Putsor) Group 4 五天衛教課程，參與人數為 44 位孩童及其家屬。</li> <li>2. Village 1~11 展開個案家訪，家訪戶數 63 戶。</li> <li>3. 第二次身高體重追蹤量測。</li> </ol> <p>▶▶服務量：107 人次。</p>



工作事項  
記要(如  
特殊病例  
及其他事  
項等)

1. 週一召開週會，上週工作報告及本週工作計畫。
2. 10月開始安排各村第二次身高體重追蹤量測。
3. 追蹤各村志工家訪進度。



衛教課程上課



另闢一區讓小小孩玩耍，避免  
打擾照護者上課



利用民宅上課，也藉此機會衛教  
環境衛生



上課民宅



Village 5 副食品製作教學



利用當地米麩製作的點心



電解質水製作



電解質水試喝



洗手教學



洗手教學



身高體重追蹤



身高體重追蹤



身高體重追蹤，無法自行站立者，由照顧者先抱著測量



年齡較小者，仰躺量身長

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年10月16-20日

填表人：林彥婷

工作地點：■村落 □醫院內 ■其他-辦公室

類別	工作內容概要
服務統計	<p>▶▶衛教服務：</p> <ol style="list-style-type: none"> <li>1. 高雄榮總行動醫療團於 10/16-21 至柬埔寨。</li> <li>2. 10/18,19 兩日，在村落進行兒童健檢與衛教活動。</li> <li>3. 衛教主題有：視力保健、牙齒保健、基本救命術、個人與環境衛生。另有藝術治療師帶領四場藝術活動。</li> </ol> <p>▶▶服務量：</p> <ol style="list-style-type: none"> <li>1. 健檢 469 人次。</li> <li>2. 開出處方簽 851。</li> <li>3. 衛教活動四場次、藝術活動四場次。</li> </ol>

工作事項  
記要(如  
特殊病例  
及其他事  
項等)

1. 週一(10/16)召開週會，確認醫療團使用的場地與人力安排。
2. 10/17 拜會 Takeo Provincial Health Center, Baty Hospital, Putsor 衛生所等醫療單位，及在地合作的 NGO—Green Umbrella。彼此肯定在地的醫療教育工作及後續合作。
3. 10/18,19 醫療團進行兒童健檢。
4. 10/20 醫療團在地參訪。



本院張宏泰副院長帶領團隊拜會  
巴提醫院



巴提醫院院長 Dr. Chantha 表  
達歡迎



雙方團隊合照



雙方擬定合作洗手計畫



茶膠省醫療副省長代表歡迎



在茶膠省衛生單位聽取簡報



	<p>茶膠省衛生單位首長互贈紀念品</p> 	<p>共同為推動洗手計畫而努力</p> 
<p>參訪合作 NGO-Green Umbrella</p>	<p>當場展現本院推動的健康操</p>	
		
<p>基本救命術教學</p>	<p>醫師針對五歲以下幼兒健檢</p>	
		
<p>利用課堂推廣戒菸和病人安全</p>	<p>藝術治療師的藝術課程</p>	

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017 年 10 月 23-27 日

填表人：林彥婷

工作地點：■村落 □醫院內 ■其他-辦公室

類別	工作內容概要
服務統計	<p>▶▶衛教服務：</p> <ol style="list-style-type: none"> <li>1. 各村家訪。</li> <li>2. 第二次身高體重追蹤。</li> </ol> <p>▶▶服務量：</p> <ol style="list-style-type: none"> <li>1. 家訪：73 人次。</li> <li>2. 追蹤身高體重：278 人次。</li> </ol>

工作事項  
記要(如  
特殊病例  
及其他事  
項等)

1. 週一召開週會，檢討上週醫療團時協助的工作可改進的部分，報告本週工作進度排程。
2. 10/25 戒菸團加入，於村落推廣無菸家庭。



V1 志工家訪



家禽有隔離開的住所



廚房，食物未蓋，飲水有煮開



居家環境



V3 志工家訪



V3 志工家訪



V4 志工家訪



家庭外觀



廚房，飲用水有煮開另外裝瓶



水缸和廁所



V4 志工家訪



廚房，食物有加蓋



奶瓶存放



戶外水缸



V5 志工家訪



廚房



衣服有陽光曝曬



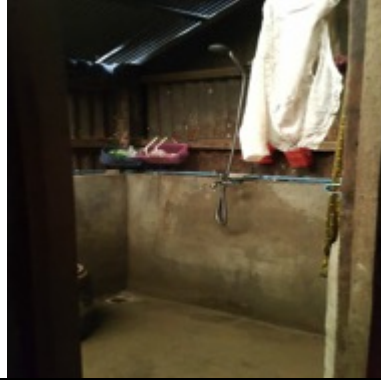
一半茅草一半鐵皮的屋況



V6 家訪



食物保存有放在櫃內



浴廁



浴廁



V8 家訪



廚房



豬圈








V9 家訪



室內環境



屋外環境

		
		
	<p>浴廁，乾溼沒有臭味，大部分家庭沒有自來水</p>	<p>使用桶裝水</p>
		
	<p>V11 家訪</p>	<p>雞舍</p>
		
	<p>戶外水缸</p>	<p>周遭環境</p>

高雄榮總東埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年10月30-11月3日

填表人：林彥婷

工作地點：村落 醫院內 其他-辦公室

類別	工作內容概要
服務統計	<p>▶辦公室業務：</p> <ol style="list-style-type: none"> <li>1. 鍵入第二次身高體重資料，計算生長曲線百分比。</li> <li>2. 設計 Check List 追蹤教學成效。</li> <li>3. 10/30 召開月會。</li> </ol>



<p>工作事項記要(如特殊病例及其他事項等)</p>	<p>1.週一召開週會，討論第二次身高體重測量時有無遇到困難，報告本週工作進度排程。 2.向員工說明 Check List 的重要性。 3.於月會時向志工解說 Check List 如何運用。</p>	
		
	<p>11 月月會，衛生所所長參與</p>	<p>衛生所長肯定各村志工在村中的貢獻與幫忙</p>
		
	<p>本月優良志工表揚</p>	<p>本月優良志工表揚</p>
		
	<p>志工分組分享遭遇的困難與解決方式</p>	<p>志工分組分享</p>
		
	<p>員工參與了解志工執行情況</p>	<p>11 月志工合照</p>

高雄榮總東埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017 年 12 月 12-13 日

填表人：林彥婷

工作地點：村落 醫院內 其他-辦公室

類別	工作內容概要
服務統計	▶▶衛教服務：

<p>工作事項 記要(如 特殊病例 及其他事 項等)</p>	<p>1. 於 Village 10, 11 協助衛生所發送驅蟲藥和 Vitamin A。</p>	
	<p>1. 衛生所發送驅蟲藥和 Vitamin A 並未詳實記錄，本計畫村落志工負責通知本計畫孩童到場領藥，並協助記錄在黃卡上。</p>	
		
	<p>衛生所人員至村落發驅蟲藥和 Vitamin A</p>	<p>志工協助發配藥物、核對黃卡</p>
		
	<p>志工確認本計畫個案有來領藥</p>	<p>志工協助發配藥物、核對黃卡</p>
		
	<p>現場直接服藥</p>	<p>現場直接服藥</p>
		
<p>維他命 A</p>	<p>員工協助衛生所人員發藥紀錄</p>	

類別	工作內容概要	
服務統計	▶衛教服務： 1. 於 Village 1~11 量測身高體重。 2. 同時舉辦 Caregiver Workshop，針對每餐餐量、食物安全保存進行教學。	
工作事項記要(如特殊病例及其他事項等)	1. 第二次的身高體重追蹤量測。 2. 利用小組間同為鄰居可互相鼓勵督促，邀請生長有進步的家長分享教學後有執行哪些教學的項目，以利達成成長的目標。	
		
	量測孩童身高	量測體重，旁邊的孩童圍觀
		
	量測體重時，同時教學餐量墊板的用法	生長進步的孩童獎勵品、餐量墊板
		
	發送保鮮盒並教導食物安全保存的重要	不同村落的量測情形



身高體重追蹤量測



身高體重追蹤量測

高雄榮總柬埔寨健康促進計畫 工作日誌表 Daily Working Report

工作日期：2017年12月18日

填表人：林彥婷

工作地點：村落 醫院內 其他-辦公室

類別	工作內容概要	
服務統計	<p>▶▶衛教服務：</p> <ol style="list-style-type: none"> <li>1. 與 Bati Hospital 院長 Dr. Chantha 以及返柬學員開會，組成感控小組。</li> <li>2. 針對感控小組如何運作討論，並制定每月月會、工作進度。</li> <li>3. 針對「洗手正確率」項目討論執行方式。</li> </ol>	
工作事項記要(如特殊病例及其他事項等)	<ol style="list-style-type: none"> <li>1. 利用本院推動洗手運動的經驗，協助巴提醫院推動洗手，增加員工洗手意願。</li> <li>2. 鼓勵感控成員積極度會影響計畫成功與否。</li> </ol>	
	<p>吊掛於醫院門口的洗手提醒大布條，本院院長與該院院長、區及省衛生首長合照</p>	<p>共同致力推動洗手運動</p>
	<p>張貼洗手步驟貼紙提醒洗手</p>	<p>治療車旁的洗手貼紙</p>



洗手五時機海報



於各水槽旁張貼五時機海報提醒洗手



利用識別證互相提醒洗手



識別證標示“請提醒我洗手”標語



捐贈酒精瓶在床邊與病房



仿效本院，每個床邊均學掛酒精瓶

### 三、心得

1. 高榮於去年與柬埔寨茶膠省各層級醫療單位簽署 MOU 並積極邀請對方官員參訪與學員來台受訓，在今年度已逐漸產生正面效果，來訪的長官因為親眼所見台灣醫療的實力，所以在本院提出醫療改善計畫時都樂見與配合。今年度也是第二年提供柬埔寨巴提醫院學員來本院受訓，因為去年的經驗，今年的受訓課程有針對去年受訓結束後再行調整，使學員返國後更能學以致用並配合本院共同推行的醫療品質提升計畫，目前返國後仍能繼續配合計畫進行。

2. 國際醫療計畫執行有其困難度，除了人力的需求，當地參與配合的積極度，是國外執行計畫的重點。為使當地村民更熟識本院工作人員與計畫，需要政府醫療單位參與、在地組織的協助，以及加強本院在村民中的熟識度，才不會貿然闖入當地生活，失去國際醫療計畫促進當地人民健康的美意。

3. 在資源豐富的台灣，很難親見在發展中國家，不論醫療儀器、醫療照護標準化流程、營養品需求、甚至簡單的衛教文宣品，都尚在發展階段，許多計畫執行所需的醫療儀器或是輔助用品，在當地取得上都有困難度，會影響計畫完成的完整性，這部分也需要更周詳的事前訪視、同時考量當地現況、計畫經費，設計出可行的計畫模式，才不至於規劃與成果有落差。

4. 去年度計畫的檢討中，柬籍員工曾提及未有專屬辦公室導致工作心態的調整不易，今年院方特許尋找當地簡易辦公室，除了讓當地員工更重視這份正職工作外，本團隊也應重視員工的適法性、福利等，讓當地員工能夠在安心的情況下工作。

#### 四、建議事項（包括改進作法）：針對出國目標及學習提出對單位或院方品質提升之建議或改善作法。

1. 醫院明年度的柬埔寨計畫需考量員工聘僱、員工保險的問題，建議採用與當地 NGO 合作的方式，除了可讓員工有正式的工作單位依據、薪資憑證、也可正式加入柬政府提供的僱員工作意外保險。但與當地 NGO 合作，需有固定比例作為行政費用，此費用為對方組織向政府申請計畫執行、繳交定期報告、繳納稅務證明、聘請會計公司製作收支報表等行政費用。

2. 本計畫使用當地村莊志工，多數志工是利用家務與農忙的時間協助我們的計畫進行，實屬難得！今年度計畫寫預算時未將志工交通補貼納入考量，若有明年年度計畫，在編寫預算時，志工交通費與家訪費用均應納入。

3. 目前計畫進行到追蹤家訪的階段，我們也逐步增加員工與志工在每一個階段學習的課程。這些醫學的知識雖然在台灣是駕輕就熟的，但將計畫執行到柬埔寨之後，需要很多因時因地制宜，對計畫的規劃與課程設計也是挑戰與學習。因此未來課程規劃時，建議聘請柬埔寨當地來自不同政府部門或是其他國際組織的講者，增加與其他組織的交流與經驗分享。

4. 本年度村莊的兒童營養計畫有與巴提醫院合作，配合血液檢驗項目，但第一次檢驗數值，經評估後發現該院檢驗的正確性有很大誤差，因此影響到計畫的指標達成，後續如何在經費有效運用與獲得有益結果的權衡中獲得最有利本計畫受益者，這也是在國際醫療上需要警惕與注意的課題。醫療團時有醫師建議可以捐贈檢驗儀器，不過考量後續檢驗 Kits 或是維修、電力等問題，暫未納入經費提報。捐贈儀器方面需要更多考察與評估。

5. 本院與巴提醫院合作的醫療品質提升計畫以「洗手運動」作為開始，雙方因文化差異、資源獲得的難易、專業訓練的程度、雙方對計畫的共識與積極度等，仍有很大的努力與進步空間。在台灣或是本院推行提升醫療品質的計畫時，因大家對提升醫療品質有共識，且長官上行下效，容易看到成效。我們在柬埔寨推行時，如何引起當地醫護人員的共鳴，讓對方預期醫療品質進步後對醫院或民眾的利益是什麼，這些深思的功課，在執行計畫初期，花時間與對方有更多的探討，也許更為重要。

# 附錄

1. 訓練講義 (附件 1)
2. 家訪問卷 (附件 2)
3. 三大營養素海報



4. 各年齡餐量參考





# Training Course for Volunteers and Caregivers

Yen-Ting Lin  
2017

## By the end of sessions, we wish they can...

- Assist in **measuring and following** up growth of children
- **Actively participate** in the activities
- Tell caregivers to learn from the positive family, **the solution is already there**
- **Share the messages**
- Conduct household visits to **support caregivers** in application of new behaviors
- **Communicate** progress to community leaders
- Follow-up on the participant children and monitor the program



## Agenda

Day 1	Introduction and meet each others Introduction of food groups and balanced diet
Day 2	Good Nutrition/ Malnutrition Breast milk/ complementary food
Day 3	Food and water safety Washing hand/ hygiene Learn to weigh and measure the kids Standard growth chart (WHO)
Day 4	How to record in the standard growth chart Do the questionnaire to families
Day 5	Learn to analyze and share the results with community
Day 6	Prepare to visit family

## Day 1

Step 1	Welcome everyone, introduce the program, staff and all participants Everyone introduce themselves (the role in family, from which village, etc.) Encourage them to come on time each day for 6 days	10 mins
Step 2	Ask volunteers questions Explain to them: kids in poor family does not necessarily mean they will be malnourished	10 mins
Step 3	Explain the goals: -To rehabilitate malnourished children quickly -To help families keep kids health -To prevent malnutrition in the future Explain the importance of volunteers	10 mins
Step 4	Know the importance of balanced food (use "stone-pot example) Know the food we can get from community (food cards)	10 mins
Step 5	What is good and essential nutrition	20 mins

## Day 1 Step 1

- Welcome everyone
- Introduce the program, staff and all participants
- Everyone introduce themselves (from which village, their role in family, etc.)

## Day 1 Step 2 Ask the volunteers questions

- Use the questions to let volunteers know the basic concept of what they are going to survey in the project

## Day 1 Step 2 Ask the volunteers questions

- Are there children who are **growing well**? (yes)
- How can you tell? (*happy, active, play, growing taller, not thin*)
- Why do you think these children are growing well? (*eat well, mother cares, grandmother helps, not too many children, family has more land to grow things*)
- Are there children in your community who are **not growing well**? (yes)
- How can you tell? (*small, sickly, too thin, do not walk, do not play, cry a lot*)
- Why do you think these children are not growing well? (*not enough food, father not present, unsafe water, mother works, too many children in family*)
- Are all the children from poorer families ill and not growing well? (no)
- Are all the children from non-poor families healthy? (no)

## Day 1 Step 3-1 the Goal of the project

- To help the malnourished children gain weight quickly
- To help families keep kids health
- To prevent malnutrition in the future

## Day 1 Step 3-2

### The Importance of volunteers

As a volunteer, you will...

- discover how poorer families feed and care for their children
- learn how to help caregivers whose children are not growing well
- guide them and teach to feed and care for their children
- For two weeks you will spend about two hours with the caregivers and their children cooking together and feeding their children

## Day 1 Step 3-3

### The Importance of volunteers

As a volunteer, you will...

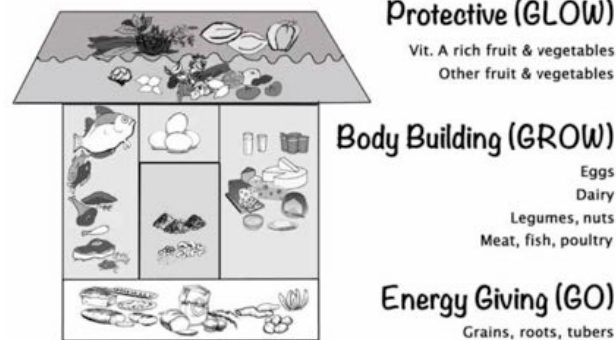
- an additional two weeks, you need about half an hour each day to visit the caregivers in their homes to see if they are continuing the practices
- visit each home every two to three days
- If caregivers are facing challenges at home, it is part of your responsibility to together find solutions
- track and monitor the children during the 2 weeks of home visits and then again at 3 months, 6 months, and 1 year. We will go through the monitoring forms later on in the training

## Day 1 Step 4

### Know the concept of food groups

- Prepare:
  - 3 stones
  - Big cooking pot
- What food can we get from community?
  - Food cards
  - Healthy and unhealthy snacks

## 3 Food Groups



## Besides meals, snacks are also important

- (Lead a discussion)
- Why are snacks important for children?
  - Stomachs are small so they can only eat small amounts at once
  - It's a chance to give a variety of foods
- What snacks are healthy and what are unhealthy?

## Day 1 Step 5

### What else is also important but not included?

- Hint: Important to babies and small children, what is it?



## The importance of breast milk (1)

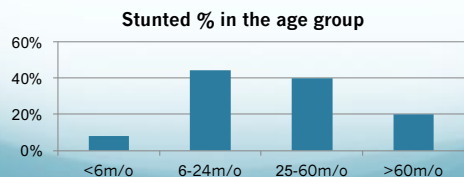
- Why is breast milk important?
  - It contains exactly what a baby needs to be healthy and grow.
  - For 6 months a baby does not need any other food or water.
- Why not give a baby other food or water before 6 months?
  - Baby will take less breast milk and cause the supply of breast milk to decrease
  - is more likely to get diarrhea from other food

## The importance of breast milk (2)

- When do babies start to eat other foods?
  - At 6 months
- How long do babies need breast milk?
  - Up to 2 years old
- Why do babies need food at six months?
  - They are more active after 6-month-old
  - Need more energy and nutrients than they can get from breast milk
  - They can digest other food because gut has developed

## The importance of breast milk (3)

- What happens if baby does not get other food since 6 months?
  - Stop gaining weight
  - Can not grow well
  - May not be interested in other food later



## The End of Day 1 Session

Any question or discussion?

## Review of today

- What will a malnourished child look like?
- Why are volunteers important to this program?
- What can volunteers help in the program?
- What are 3 food groups? What are they used for?
- What is important food to small babies?
- When does a baby need other food besides breast milk?



## Day 2

Step 1	Review 3 group foods Review the importance of breast milk to babies before 6 months Review the timing and reasons babies need other foods when they are older than 6 months complementary food since 6 months old	5 mins
Step 2	Weigh and measure	15 mins
Step 3	What is malnutrition? Why is malnutrition a problem? What causes a child to not grow well? Lead a discussion about the causes of not growing well	20 mins
Step 4	Nutritional status v.s. illness Diarrhea How to make oral rehydration solution	20 mins

## Day 2 Review

- What is 3 food groups? (use food card)

## Breast feeding

- What food is important to babies under 6 months old? The reason?
- The reasons babies need other foods when they are older than 6 months



## Breast feeding



## Complementary food at 6 month



### 6 – 9 months old

From 6 up to 9 months

5-6 times

၅/၆ကြိမ်တန်းစားစားပွားရမည်

### 9 – 12 months

From 9 up to 12 months

5-6 times

၅/၆ကြိမ်တန်းစားစားပွားရမည်

### 12 - 24 months

From 12 up to 24 months

Don't stop

၅/၆ကြိမ်တန်းစားစားပွားရမည်

## Day 2 Step 2-1

From the appearance, how do you identify a child who is malnourished

### What are malnourished children look like?

- No energy, always sleepy
- Not active, no response
- Cry often
- More likely to be ill with infection (diarrhea, pneumonia, tuberculosis and malaria)
- More likely become serious and cause death

Photo copied from World Vision

The most important time is earliest years of life.

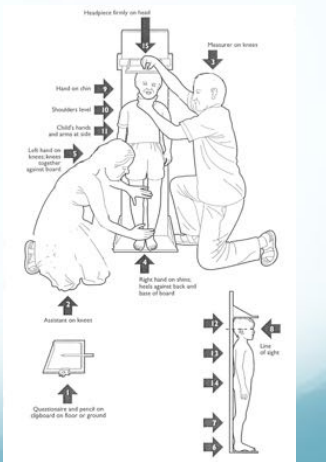
Besides observing from their appearance, what technical skill can help us to identify a malnourished child?

Body weight  
Body height

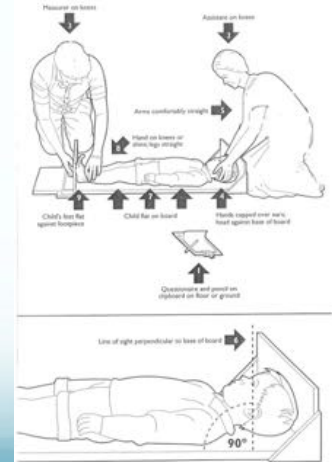
### Weighing a child who can stand and cooperate

### Weighing a child who can't stand

Measuring the height of a child who can stand and cooperate



Measuring the height of a child who can't stand



Measuring head circumference if child younger than 3-year-old

Measuring Head Circumference



Proper positioning of measuring tape:  
 Widest circumference, avoiding ears

**Baby head circumference median reference chart:**

month	median (cm)	month	median (cm)	month	median (cm)
0	35.0	9	46.0	22	49.5
1	37.0	10	46.5	24	49.5
2	38.5	11	46.5	24	49.5
3	41.0	12	47.0	26	49.5
4	42.0	12	47.0	28	50.0
5	42.5	14	47.5	30	50.0
6	43.5	16	48.0	32	50.0
7	44.0	18	48.5	34	50.0
8	45.0	20	49.0	36	50.0

Day 2 Step 3-1 Scenario

- A mother works in the field, father works in the city
- 3 kids, 5, 3 year-old and 15-month-old
- When mother goes to work in the field, kids eat tea, watery porridge and sweet snacks bought by older siblings
- The youngest one always has diarrhea and runny nose
- Because mother is too tired to cook after back home, they eat rice soup added with some crabs picked in the river
- They can not afford meat or beans or milk

Day 2 Step 3-2 Discussion the possible causes of the family

- Do you see your neighbor have similar situation in your village?
- What was their problem?
- Conclusion: There are many reasons children might not grow well, could related to:
  - Food
  - Care
  - Hygiene
  - Health seeking behaviors

Your own experience?

Feeding/Food	Caring	Hygiene	Health

Feeding/Food	Caring	Hygiene	Health
Continued, frequent breastfeeding of infants up to 24 months	Positive interaction between child and others	Use of latrine and latrine cover	Complete immunisations (preventive)
Introduce other foods at six months	Supervision at all times	Hand washing with soap or ash after toilet, before eating, before food preparation	Mosquito nets used in malaria endemic areas
Feed 3-5 times / day	Father providing attention / affection	Safe water (boiled, covered)	Regular deworming , wearing of shoes
Variety in food; giving snacks between meals	Grandmother supports caregiver with good advice and practical care	Use of drying rack	Home treatment of sick child for minor illnesses
Active feeding	Father provides money to buy good foods for children	Keeping kitchen clean	Use of oral rehydration solution during diarrhoea
Continued breastfeeding along with appropriate liquids and foods during and after diarrhoea		Using windows and doors to air out the rooms during the day	Child is promptly taken to the health post for illnesses not responding to home treatment

Day 2 Step 3-3 The bad results of malnutrition

- More likely to be enrolled in school late
- Have difficulty to learn
- Do not do well at school
- Lack knowledge and skills to become independent adults
- Not able to do as much work and earn less
- Malnourished girls have difficulty with pregnancy and have smaller babies

Day 2 Step 4-1 How nutritional status relate with illness?

- Body needs food to fight infection
- Illness make children not want to eat
- When kids eat less, illness lasts longer

## Day 2 Step 4-2 Illness in the community

- What illnesses usually seen in the community?
  - diarrhea
  - cough
  - fever
  - runny nose
  - skin infection
  - Any else?

## Day 2 Step 4-3 How can we help children not get sick?

- Do by family
  - Breast feeding
  - Nutritious food
  - Good hygiene
  - Safe water and food
- Do by health center
  - Immunization (check if volunteers know the immunization schedule on the yellow card)
  - Vitamin A supplement (every 6 months)
  - De-worm (every 6 months)

## Day 2 Step 4-4 When a child get sick, how to help the kid?

- (Lead a discussion)
- Continue breast feeding
- Enough and clean food and liquid
- Seek help from health service

## Day 2 Step 4-4 How to help children with diarrhea



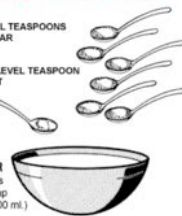
### Home - made ORS

6 LEVEL TEASPOONS  
of SUGAR

HALF LEVEL TEASPOON  
of SALT

1 LITRE  
OF WATER

5 cupsfuls  
(each cup  
about 200 ml.)



## The End of Day 2 Session

## Any question or discussion? Experience sharing?

## Review of today

- What will a malnourished child look like?
- How to weigh and measure a child?
- Why malnutrition is a problem?
- What cause a child to not grow well ?
- How to help a child not get sick?

## Day 3

Step 1	Review how to weigh and measure body weight and height (ask volunteers to demonstrate) What causes a child to not grow well? (volunteer observe from 4 aspects: feeding/food, care, hygiene, health seeking)	10 mins
Step 2	Wash hands	10 mins
Step 3	Hygiene	10 mins
Step 4	Food and water safety	20 mins
Step 5	Discuss good and positive behavior	15 mins

## Day 3 Step 1-1 Review check the body weight and measure body height

Ask volunteers to demonstrate



## Step 1-2

What causes children not grow well?

Feeding/ Food	Caring	Hygiene	Health

Feeding/Food	Caring	Hygiene	Health
Continued, frequent breastfeeding of infants up to 24 months	Positive interaction between child and others	Use of latrine and latrine cover	Complete immunisations (preventive)
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## Step 2 Hand Washing



## Hand Washing

- When do we need to wash hands?
  - After using latrine
  - After changing diaper
  - After helping a child use the toilet
  - After helping sick child
  - After touching animals or garbage
  - After blowing nose, coughing, sneezing
  - Before preparing food
  - Before eating



## Hand Washing

- How do we wash hands?
  - Wet hands with water, soap, rub, rinse, dry (clean towel or shake water off)
- How long do we need to wash hands?
  - At least 20 seconds (happy birthday song twice)
- Why should we wash hands?
  - To keep germs from spreading or getting into our food, mouths

## Step 3 Hygiene

- Environmental hygiene
- Personal hygiene

## Environmental Hygiene



## Environmental Hygiene



# Personal Hygiene



# Step 4-1 Food safety

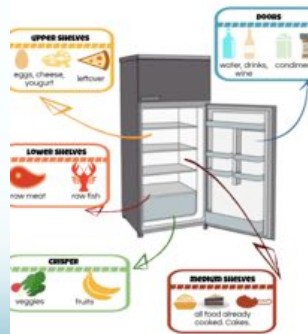
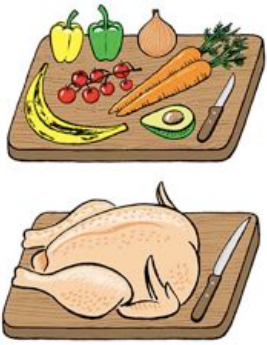


# Step 4-1 Food safety

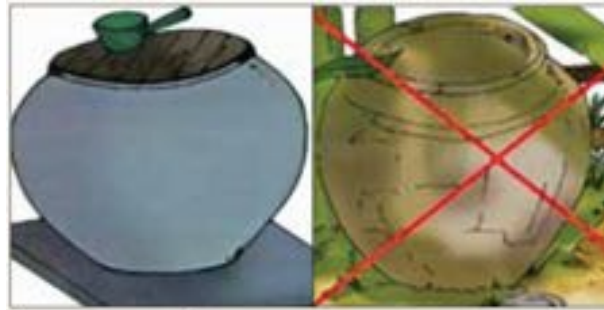


Always cover food

# Step 4-1 Food safety



# Step 4-2 Water safety



Cover your water jar

# Step 4-2 Water safety



Always drink safe water (From safe source or boiled)

# Step 5

Discuss the good and not good behaviors

Feeding/ Food	Caring	Hygiene	Health

# Volunteer Training Day 4

15 May 2017

# Day 4

Step 1	Yellow Vaccination card Standard Growth Chart	10 mins
Step 2	How to make a record on Standard Growth Chart	15 mins
Step 3	Do the questionnaire to family	30 mins





បញ្ជីវិស័យគ្រួសារ  
Household Visit Form

លេខរៀង Chart No. \_\_\_\_\_

ភូមិ Village: \_\_\_\_\_

1. ព័ត៌មានជាមូលដ្ឋាន Basic Information

ឈ្មោះអ្នកឆ្លើយសំណួរ The Respondent's Name		ត្រូវជាអ្វីនឹងកុមារ Relationship to the child	
ឈ្មោះកុមារ ជាភាសាខ្មែរ Child's Name (in Khmer)		ឈ្មោះកុមារ ជាភាសាអង់គ្លេស Child's Name (in English)	
ថ្ងៃ ខែ ឆ្នាំកំណើត Date of Birth (DD/MM/YYYY)		ភេទ Gender	<input type="checkbox"/> ប្រុស Male <input type="checkbox"/> ស្រី Female
កុមារមានបងប្អូនប្រុសស្រី ប៉ុន្មាននាក់?(មិនរាប់កុមារទេ) How many brothers/sisters of the child?		ជាកូនទី The order of the child	
អ្នកណាមើលថែរក្សាកុមារ Main Caregiver	<input type="checkbox"/> យាយឬតា grandparents <input type="checkbox"/> ម្តាយ mother <input type="checkbox"/> ឪពុក father <input type="checkbox"/> ឪពុកម្តាយ both mother and father <input type="checkbox"/> កូនច្បង older siblings <input type="checkbox"/> សាច់ញាតិ relatives <input type="checkbox"/> អ្នកជិតខាង neighbors		
សមាជិកគ្រួសារ Family members	តើសមាជិកគ្រួសារផ្សេងទៀត មានតួនាទីអ្វីក្នុងការមើលថែរក្សាកុមារ? What roles do "other family members" play in caring the child?  តើនរណាខ្លះនៅផ្ទះពេលថ្ងៃ ក្រៅពីកុមារនិងអ្នកមើលថែកុមារ? Who else is in the house during the day besides the child and main caregiver?		
សភាពទូទៅខាងក្រៅ និងការ ពិនិត្យរាងកាយខាងក្រៅ General Appearance and Physical Examination			
ប្រវត្តិជម្ងឺ(ធ្លាប់ឈឺអ្វីខ្លះ) Past Health History			
សូមមើលប័ណ្ណល្បែង Please check the vaccination card	តើកុមារបានបញ្ចប់ការចាក់វ៉ាក់សាំងបង្ការរោគ គ្រប់អាយុឬទេ? Does the kid finish the vaccine immunization of his/her age? <input type="checkbox"/> បាន Yes <input type="checkbox"/> ទេ No តើកុមារបានទទួល វីតាមីន A រៀងរាល់ ៦ខែម្តង ឬទេ? Does the child get Vitamin A every 6 months? <input type="checkbox"/> បាន Yes <input type="checkbox"/> មិនបាន No តើកុមារបានទទួល ថ្នាំទម្លាក់ដង្កូវព្រូនរៀងរាល់ ៦ខែម្តង ឬទេ? Does the child get de-worm every 6 months? <input type="checkbox"/> បាន Yes <input type="checkbox"/> មិនបាន No		

2. កំណត់ត្រាទម្ងន់ និងកម្ពស់របស់ក្មេង Records of weight and height

ថ្ងៃ Date (ថ្ងៃ DD/ខែMM/ឆ្នាំ YYYY)	ទម្ងន់ (គីឡូ) BW (Kg)	កម្ពស់ BH/BL (សង់ទីម៉ែត្រcm)	រង្វាស់ក្បាល HC (សង់ទីម៉ែត្រcm) បើក្មេងមានអាយុ < 3-៥ ឆ្នាំ if <3-y-o

3. កំណត់ត្រាការពិនិត្យឈាម Records of blood tests

កាលបរិច្ឆេទ Date ថ្ងៃ / ខែ / ឆ្នាំ DD/MM/YYYY	គ្រាប់ឈាម Hb/MCV	ជាតិសាច់ Albumin	ជាតិដែក Ferritin	តំរង់នោម BUN/Cr	ថ្លើម GPT	កាល់ស្យូម Calcium	ស្ករ Glucose

4. លក្ខណៈជីវភាពគ្រួសារ Family Socioeconomic condition

<p><b>A. តើគ្រួសារមានបណ្ណាត្រីក្របូទេ?</b> Does the family have Equity Card (ID Poor)?</p>	<input type="checkbox"/> មាន Yes, <input type="checkbox"/> ក្រកំរិត ១ (ក្រណាស់) Poor Level 1 (Very poor) <input type="checkbox"/> ក្រកំរិត ២ (ក្រ) Poor Level 2 (Poor)	<input type="checkbox"/> គ្មាន No
<p><b>B. តើគ្រួសារមានដីផ្ទាល់ខ្លួនឬទេ?</b> Does the family have own land?</p>	<input type="checkbox"/> មាន Yes (បន្តសំណួរ a.) (Continue question a.) <b>a. តើគាត់បានដាំអ្វីខ្លះ?</b> What do you grow on your land? <input type="checkbox"/> ស្រូវ Rice <input type="checkbox"/> ពោត Corn <input type="checkbox"/> បន្លែបៃតង Green leaves vegetables <input type="checkbox"/> ផ្លែឈើ Fruits <input type="checkbox"/> ប៉េងប៉ោះ Potato / ក្លូច Cassava/ ដំលូងជ្វា Sweet Potato/ ល្ពៅ Pumpkin <input type="checkbox"/> គ្មានអ្វីទាំងអស់ Nothing <b>b. ពេលបានផលតើគាត់យកទៅណាខ្លះ?</b> How do you deal with the plants? <input type="checkbox"/> ប្រើប្រាស់ Self-use <input type="checkbox"/> លក់ Sale <input type="checkbox"/> ទាំងពីរ(ប្រើប្រាស់ __: លក់ __) Both (Self- use : Sale = __: __%)	<input type="checkbox"/> គ្មាន No
<p><b>C. តើគ្រួសារមានសត្វចិញ្ចឹមដែរឬទេ?</b> Does the family have their own livestock?</p>	<input type="checkbox"/> មាន (បន្តសំណួរ a និង b) Yes (Continue question a & b) <b>a. គាត់ចិញ្ចឹមសត្វអ្វី?</b> What livestock do you have? <input type="checkbox"/> គោ Cow/ ក្របី Buffalo <input type="checkbox"/> ជ្រូក Pig <input type="checkbox"/> ពពែ Goat <input type="checkbox"/> មាន់ Chicken <input type="checkbox"/> ត្រី Fish <input type="checkbox"/> ទា Duck/ ក្លាន Goose <b>b. គាត់យកសត្វចិញ្ចឹមទៅធ្វើអ្វី?</b> How do you deal with the livestock? <input type="checkbox"/> ទុកបរិភោគ Self-use <input type="checkbox"/> លក់ Sale <input type="checkbox"/> ធ្វើការ work <input type="checkbox"/> ទាំងពីរ(ប្រើប្រាស់ __: លក់ __) Both (Self- use : Sale = __: __%)	<input type="checkbox"/> គ្មាន No
<p><b>D. នរណាជាអ្នកផ្គត់ផ្គង់គ្រួសារ?</b> Who is the main money supporter?</p>	<input type="checkbox"/> តាយាយ grandparents <input type="checkbox"/> ម្តាយ mother <input type="checkbox"/> ឪពុក father <input type="checkbox"/> ឪពុកម្តាយ both mother and father <input type="checkbox"/> កូនច្បង older siblings <input type="checkbox"/> សាច់ញាតិ relatives	<input type="checkbox"/> គ្មាន None

5. ព័ត៌មានអំពីឪពុកម្តាយ Parents Information:

	ឪពុក Father	ម្តាយ Mother	កំណត់ត្រា Note
ឈ្មោះ Name			
អាយុ Age			
ទម្ងន់ BW (គីឡូក្រាម Kg)			
កម្ពស់ BH (សង់ទីម៉ែត cm)			
សមាមាត្រទម្ងន់នឹងកម្ពស់តាមរយៈកុំព្យូទ័រ BMI (by computer)			ទម្ងន់/(កម្ពស់) <sup>២</sup> BW(Kg) / BH <sup>2</sup> (m <sup>2</sup> )

	ឪពុក Father	ម្តាយ Mother	កំណត់ត្រា Note
<b>រៀនបានថ្នាក់ទី៖</b> Academic Level: 1. មិនបានចូលរៀន Not go to school 2. មិនចប់សាលាបឋមសិក្សា Not finish Primary School 3. ចប់ត្រឹមបឋមសិក្សា Primary School 4. អនុវិទ្យាល័យ Middle School 5. វិទ្យាល័យ High School 6. សាកលវិទ្យាល័យ University			
<b>មុខរបរ</b> Occupation : 1. មិនមានមុខរបរ No occupation 2. កសិករ Farmer 3. ធ្វើការដោយកំលាំង Labor worker 4. កម្មកររោងចក្រ Factory worker 5. អ្នកនេសាទ Fisherman 6. អ្នកតម្បាញ Craft person 7. ម្ចាស់ហាង Shop owner 8. មន្ត្រីរាជការ Government officer 9. ប៉ូលីស ឬ ទាហាន Military or police 10. ផ្សេងៗ Others			

6. ការវាយតម្លៃនៃការញ៉ាំអាហារ Assessment of eating behaviors

<b>A. អាហារ ៣ពេលរបស់កុមារ</b> Frequency of 3 meals of the child	1. រាល់ថ្ងៃ every day (៧ថ្ងៃ/១សប្តាហ៍ 7 days/week), 2. ញឹកញាប់ often (៥-៦ ថ្ងៃ/១សប្តាហ៍ 5-6 days/week), 3. ម្តងម្កាល sometimes (៣-៤ថ្ងៃ/១សប្តាហ៍ 3-4 days/week), 4. តិចតួច a few (១-២ថ្ងៃ/១សប្តាហ៍ 1-2 days/week), 5. មិនធ្លាប់ never
អាហារពេលព្រឹក Breakfast	<input type="checkbox"/> រាល់ថ្ងៃ every day <input type="checkbox"/> ញឹកញាប់ often <input type="checkbox"/> ម្តងម្កាល sometimes <input type="checkbox"/> តិចតួច a few <input type="checkbox"/> មិនធ្លាប់ never
អាហារថ្ងៃត្រង់ Lunch	<input type="checkbox"/> រាល់ថ្ងៃ every day <input type="checkbox"/> ញឹកញាប់ often <input type="checkbox"/> ម្តងម្កាល sometimes <input type="checkbox"/> តិចតួច a few <input type="checkbox"/> មិនធ្លាប់ never
អាហារពេលល្ងាច Dinner	<input type="checkbox"/> រាល់ថ្ងៃ every day <input type="checkbox"/> ញឹកញាប់ often <input type="checkbox"/> ម្តងម្កាល sometimes <input type="checkbox"/> តិចតួច a few <input type="checkbox"/> មិនធ្លាប់ never
<b>B. នរណារៀបចំអាហារសម្រាប់កុមារ?</b> Who prepares the food for the child?	<input type="checkbox"/> តាយាយ grandparents <input type="checkbox"/> ឪពុក father <input type="checkbox"/> ម្តាយ mother <input type="checkbox"/> សាច់ញាតិ relatives <input type="checkbox"/> កូនច្បង older siblings <input type="checkbox"/> អ្នកជិតខាង neighbors
<b>C. តើមាននរណាជួយផ្តល់អាហារឲ្យកុមារ ញ៉ាំ ក្រៅពីអ្នកមើលថែក្មេង?</b> Does someone else help the child eat besides main caregiver?	<input type="checkbox"/> តាយាយ grandparents <input type="checkbox"/> ឪពុក father <input type="checkbox"/> ម្តាយ mother <input type="checkbox"/> សាច់ញាតិ relatives <input type="checkbox"/> កូនច្បង older siblings <input type="checkbox"/> អ្នកជិតខាង neighbors
<b>D. តើអ្នកមើលថែទាំក្មេងបានលើកទឹកចិត្ត ក្មេងអោយញ៉ាំអាហារឬទេ?</b> Does the caregiver encourage the child to eat when he/she does not want?	<input type="checkbox"/> មាន Yes, _____ <input type="checkbox"/> មិនមាន No
<b>E. តើកុមារញ៉ាំប៉ុន្មានដងក្នុងមួយថ្ងៃ(បញ្ចូល ទាំងអាហារពេល, អាហារបន្ថែម, ឬក៏ទឹក ដោះគោ)?</b> How many times does your kid eat per day (including meals, snacks, milk)?	<input type="checkbox"/> ១-២ ដង 1-2 times <input type="checkbox"/> ៣ ដង 3 times <input type="checkbox"/> ៤-៥ ដង 4-5 times <input type="checkbox"/> ច្រើនជាង ៥ដង more than 5 times

<b>F. អាហារពេលមួយណាដែលសំខាន់ជាង គេ? Which meal is the most nutritious in daily life?</b>	<input type="checkbox"/> អាហារព្រឹក breakfast <input type="checkbox"/> អាហារថ្ងៃត្រង់ lunch <input type="checkbox"/> អាហារល្ងាច dinner <input type="checkbox"/> ផ្សេងៗ others
<b>G. តើគ្រួសារបានម្ហូបនិងបន្លែមកពីណា ចម្លើន?</b> Where does the family get food to cook?	<input type="checkbox"/> ទិញនៅផ្សារ buy in the market <input type="checkbox"/> ដាំខ្លួនឯង from my own garden <input type="checkbox"/> បានពីអ្នកជិតខាង from neighbors <input type="checkbox"/> ពីទន្លេ / បឹងប្តូរ from rivers/lakes <input type="checkbox"/> ផ្សេងៗ others
<b>H. នរណាអ្នកទិញម្ហូប?</b> Who buys the food?	<input type="checkbox"/> តាយាយ grandparents <input type="checkbox"/> ឪពុក father <input type="checkbox"/> ម្តាយ mother <input type="checkbox"/> សាច់ញាតិ relatives <input type="checkbox"/> កូនច្បង older siblings <input type="checkbox"/> អ្នកជិតខាង neighbors
<b>I. ក្នុងមួយថ្ងៃៗតើត្រូវចំណាយលុយទិញម្ហូប អាហារអស់ប៉ុន្មាន?</b> How much money is spent on eating each day?	

**7. ប៉ាន់ស្មាន អាហាររូបត្ថម្ភក្នុងអាហារមួយពេលរបស់កុមារ (រំលឹកម្សិលមិញ)**

Assessment of each group of nutrition in one meal of the kid (Recall yesterday)

<b>A. អាហារពេលព្រឹក Breakfast</b>	
<b>អាហារថាមពល</b> Energy Food	<input type="checkbox"/> បាយ Rice ___ ចាន bowl <input type="checkbox"/> មី Noodles ___ ចាន bowl <input type="checkbox"/> បបរ Porridge ___ ចាន bowl ( <input type="checkbox"/> ខាប់ sticky <input type="checkbox"/> រាវ watery ) <input type="checkbox"/> ដំឡូងជ្វា Sweet potato ___ <input type="checkbox"/> ពោត Corn ___ <input type="checkbox"/> នំបាំង Bread ___
<b>អាហារសាងសង់</b> Body building Food	<input type="checkbox"/> ស៊ុត egg ___ <input type="checkbox"/> សណ្តែក beans ___ ស្លាបព្រា spoon <input type="checkbox"/> ត្រី fish ___ ស្លាបព្រា spoon <input type="checkbox"/> សាច់ meat ___ ស្លាបព្រា spoon <input type="checkbox"/> កំពីស/ក្តាម/ខ្យង shrimp/crabs/snails ___ ស្លាបព្រា spoon <input type="checkbox"/> ទឹកដោះម្តាយ Breast milk _____ <input type="checkbox"/> ម្សៅទឹកដោះគោ Powder milk ___ bottle(s) <input type="checkbox"/> ទឹកដោះគោផ្អែម Sweet milk <input type="checkbox"/> ទឹកដោះគោកញាប់ Packed milk
<b>អាហារការពារ</b> Protective Food	_____ ប្រភេទបន្លែ kinds of vegetable _____ ស្លាបព្រា spoon _____ ប្រភេទផ្លែឈើ kinds of fruit ចំនួន how much _____
<b>B. អាហារថ្ងៃត្រង់ Lunch</b>	
<b>អាហារថាមពល</b> Energy Food	<input type="checkbox"/> បាយ Rice ___ ចាន bowl <input type="checkbox"/> មី Noodles ___ ចាន bowl <input type="checkbox"/> បបរ Porridge ___ ចាន bowl ( <input type="checkbox"/> ខាប់ sticky <input type="checkbox"/> រាវ watery ) <input type="checkbox"/> ដំឡូងជ្វា Sweet potato ___ <input type="checkbox"/> ពោត Corn ___ <input type="checkbox"/> នំបាំង Bread ___
<b>អាហារសាងសង់</b> Body building Food	<input type="checkbox"/> ស៊ុត egg ___ <input type="checkbox"/> សណ្តែក beans ___ ស្លាបព្រា spoon <input type="checkbox"/> ត្រី fish ___ ស្លាបព្រា spoon <input type="checkbox"/> សាច់ meat ___ ស្លាបព្រា spoon <input type="checkbox"/> កំពីស/ក្តាម/ខ្យង shrimp/crabs/snails ___ ស្លាបព្រា spoon <input type="checkbox"/> ទឹកដោះម្តាយ Breast milk _____ <input type="checkbox"/> ម្សៅទឹកដោះគោ Powder milk ___ bottle(s) <input type="checkbox"/> ទឹកដោះគោផ្អែម Sweet milk <input type="checkbox"/> ទឹកដោះគោកញាប់ Packed milk
<b>អាហារការពារ</b> Protective Food	_____ ប្រភេទបន្លែ kinds of vegetable _____ ស្លាបព្រា spoon _____ ប្រភេទផ្លែឈើ kinds of fruit ចំនួន how much _____
<b>C. អាហារពេលល្ងាច Dinner</b>	
<b>អាហារថាមពល</b> Energy Food	<input type="checkbox"/> បាយ Rice ___ ចាន bowl <input type="checkbox"/> មី Noodles ___ ចាន bowl <input type="checkbox"/> បបរ Porridge ___ ចាន bowl ( <input type="checkbox"/> ខាប់ sticky <input type="checkbox"/> រាវ watery ) <input type="checkbox"/> ដំឡូងជ្វា Sweet potato ___ <input type="checkbox"/> ពោត Corn ___ <input type="checkbox"/> នំបាំង Bread ___
<b>អាហារសាងសង់</b> Body building Food	<input type="checkbox"/> ស៊ុត egg ___ <input type="checkbox"/> សណ្តែក beans ___ ស្លាបព្រា spoon <input type="checkbox"/> ត្រី fish ___ ស្លាបព្រា spoon <input type="checkbox"/> សាច់ meat ___ ស្លាបព្រា spoon <input type="checkbox"/> កំពីស/ក្តាម/ខ្យង shrimp/crabs/snails ___ ស្លាបព្រា spoon <input type="checkbox"/> ទឹកដោះម្តាយ Breast milk _____ <input type="checkbox"/> ម្សៅទឹកដោះគោ Powder milk ___ bottle(s) <input type="checkbox"/> ទឹកដោះគោផ្អែម Sweet milk <input type="checkbox"/> ទឹកដោះគោកញាប់ Packed milk
<b>អាហារការពារ</b> Protective Food	_____ ប្រភេទបន្លែ kinds of vegetable _____ ស្លាបព្រា spoon _____ ប្រភេទផ្លែឈើ kinds of fruit ចំនួន how much _____

8. ការប៉ាន់ប្រមាណក្រុមអាហារប្រចាំថ្ងៃ Assessment of each group of nutrition everyday

<p>A. កុមារញ៉ាំក្រុមអាហារថាមពលរាល់ថ្ងៃឬទេ? Does the kid eat energy food every day?</p>	<input type="checkbox"/> មាន yes	<input type="checkbox"/> អត់ no
<p>B. កុមារញ៉ាំក្រុមអាហារសាងសង់រាល់ថ្ងៃឬទេ? Does the kid eat body building food every day?</p>	<input type="checkbox"/> មាន yes	<input type="checkbox"/> អត់ no
<p>C. កុមារញ៉ាំក្រុមអាហារការពាររាល់ថ្ងៃឬទេ? Does the kid eat protective food every day?</p>	<input type="checkbox"/> មាន yes	<input type="checkbox"/> អត់ no
<p>D. អាហារទាំងបីក្រុមនេះ តើកុមារចូលចិត្តញ៉ាំមួយណាជាងគេ? What's the kid's favorite group of food?</p>	<input type="checkbox"/> អាហារថាមពល Energy food <input type="checkbox"/> អាហារសាងសង់ Body building food <input type="checkbox"/> បន្លែ Vegetables <input type="checkbox"/> ផ្លែឈើ Fruits <input type="checkbox"/> ភេសជ្ជៈ Drink <input type="checkbox"/> អាហារសម្រន់ Snacks	<input type="checkbox"/> អត់ no
<p>E. ក្រៅពីអាហារទាំងបីពេល តើកុមារមានញ៉ាំអាហារសម្រន់ឬទេ? Does the kid get snacks besides 3 meals</p>	<input type="checkbox"/> មាន yes, <input type="checkbox"/> ស្ករគ្រាប់ candy <input type="checkbox"/> នំផ្អែម cakes <input type="checkbox"/> ទឹកស្ករផ្អែមៗ sugar contained drinks <input type="checkbox"/> ផ្លែឈើ fruits <input type="checkbox"/> ផ្សេងៗ others _____	<input type="checkbox"/> អត់ no
<p>F. តើមានអាហារអ្វីខ្លះដែលក្រុមគ្រួសារមិនបានផ្តល់អោយកុមារ? Are there any foods the family does not give the child?</p>	<input type="checkbox"/> មាន yes, ប្រភេទអ្វី? What kind? _____	<input type="checkbox"/> អត់ no
<p>G. តើកុមារធ្លាប់បានបៅដោះម្តាយឬទេ? Have this kid ever be fed with breast milk?</p>	<input type="checkbox"/> មាន (បន្តទៅសំណួរ a និង b) yes (continue to question a & b) <b>a. កុមារចាប់ផ្តើមបៅដោះម្តាយនៅពេលណា?</b> When did the kid start to be fed with breast milk? <input type="checkbox"/> ភ្លាមៗបន្ទាប់ពីសំរាល ឬ ក្នុង ១ ម៉ោងដំបូងក្រោយសំរាល immediately (after giving birth or within one hour after childbirth) <input type="checkbox"/> ក្នុងថ្ងៃ ទី១បន្ទាប់ពីសំរាល within one day after childbirth <input type="checkbox"/> ក្នុង១សប្តាហ៍ដំបូងបន្ទាប់ពីកើត within one week after childbirth <input type="checkbox"/> ក្រោយ ១សប្តាហ៍ដំបូងបន្ទាប់ពីកើត one week after childbirth <b>b. ម្តាយនៅបន្តបំបៅដោះកូនឬទេ?</b> Do you still feed breast milk? <input type="checkbox"/> មាន (បន្តទៅសំណួរ c, d & e) yes (continue question c, d & e) <input type="checkbox"/> អត់ (បន្តទៅសំណួរ e.) No (continue to question e.) <b>c. ក្នុង ១ថ្ងៃបំបៅដោះកូនប៉ុន្មានដង?</b> How many times do you breastfeed every day? _____ <b>d. ការបំបៅដោះរាល់ថ្ងៃ៖</b> Current breast feeding condition: <input type="checkbox"/> បៅតែដោះ៖ only breast feeding <input type="checkbox"/> បៅដោះ៖ breast milk _____ ដង times ជាមួយម្សៅទឹកដោះគោ with powder milk _____ ដង times <input type="checkbox"/> បៅដោះ៖ breast milk _____ ដង times លាយអាហារផ្សេងទៀត with other foods <b>e. ម្តាយឈប់បំបៅដោះកុមារនៅអាយុប៉ុន្មាន?</b> At what age of the child did the mother stop breastfeeding? _____	<input type="checkbox"/> អត់ no មូលហេតុ Reasons: <input type="checkbox"/> ម្តាយរវល់ខ្លាំង mother is too busy <input type="checkbox"/> ម្តាយមិនដឹងពីរបៀបបំបៅដោះកូន mother doesn't know how to do breastfeeding <input type="checkbox"/> ម្តាយមិនមានទឹកដោះ mother doesn't have breast milk <input type="checkbox"/> ម្តាយមិនបានដឹងថាទឹកដោះគឺល្អសំរាប់ទារក mother doesn't know breast milk is good for baby <input type="checkbox"/> ម្តាយមានជំងឺប្រចាំកាយ mother is not healthy <input type="checkbox"/> ម្តាយបានស្លាប់ mother has passed away
<p>H. ពេលណាដែលម្តាយចាប់ផ្តើមផ្តល់អាហារបន្ថែមក្រៅពីការបំបៅដោះ និងទឹកដោះគោ? When do you start to add additional food besides breast milk or powder milk?</p>	<input type="checkbox"/> ក្រោមអាយុ ៤ខែ younger than 4-month-old <input type="checkbox"/> ៤-៦ខែ 4-6 month-old <input type="checkbox"/> ៦-១២ ខែ 6-12 month-old <input type="checkbox"/> ធំជាង ១២ ខែ older than 12-month-old <input type="checkbox"/> កំពុងបន្តបៅដោះ៖ still only breast milk	<input type="checkbox"/> អត់ no

9. អាហាររបស់ម្តាយដែលកំពុងបំបៅដោះកូន (រំលឹកម្សិលមិញ) Nutritional status of Breastfed mother (Recall yesterday)

A. អាហារពេលព្រឹក Breakfast	
អាហារថាមពល Energy Food	<input type="checkbox"/> បាយRice ___ ចានbowl <input type="checkbox"/> មីNoodles ___ ចានbowl <input type="checkbox"/> បបរPorridge ___ ចានbowl ( <input type="checkbox"/> ខាប់sticky <input type="checkbox"/> រាវwatery ) <input type="checkbox"/> ដំលូងជ្វាSweet potato ___ <input type="checkbox"/> ពោតCorn ___ <input type="checkbox"/> នំបាំងBread ___
អាហារសាងសង់ Body building Food	<input type="checkbox"/> ស៊ីតegg ___ <input type="checkbox"/> សណ្តែកbeans ___ <input type="checkbox"/> ត្រីfish ___ <input type="checkbox"/> សាច់meat ___ <input type="checkbox"/> កំពឹស/ក្តាម/ខ្យងshrimp/crabs/snails ___ <input type="checkbox"/> ទឹកដោះគោMilk ___
អាហារការពារ Protective Food	_____ ប្រភេទបន្លែkinds of vegetable ចំនួនhow much _____ _____ ប្រភេទផ្លែឈើkinds of fruit ចំនួនhow much _____
B. អាហារថ្ងៃត្រង់ Lunch	
អាហារថាមពល Energy Food	<input type="checkbox"/> បាយRice ___ ចានbowl <input type="checkbox"/> មីNoodles ___ ចានbowl <input type="checkbox"/> បបរPorridge ___ ចានbowl ( <input type="checkbox"/> ខាប់sticky <input type="checkbox"/> រាវwatery ) <input type="checkbox"/> ដំលូងជ្វាSweet potato ___ <input type="checkbox"/> ពោតCorn ___ <input type="checkbox"/> នំបាំងBread ___
អាហារសាងសង់ Body building Food	<input type="checkbox"/> ស៊ីតegg ___ <input type="checkbox"/> សណ្តែកbeans ___ <input type="checkbox"/> ត្រីfish ___ <input type="checkbox"/> សាច់meat ___ <input type="checkbox"/> កំពឹស/ក្តាម/ខ្យងshrimp/crabs/snails ___ <input type="checkbox"/> ទឹកដោះគោMilk ___
អាហារការពារ Protective Food	_____ ប្រភេទបន្លែkinds of vegetable ចំនួនhow much _____ _____ ប្រភេទផ្លែឈើkinds of fruit ចំនួនhow much _____
C. អាហារពេលល្ងាច Dinner	
អាហារថាមពល Energy Food	<input type="checkbox"/> បាយRice ___ ចានbowl <input type="checkbox"/> មីNoodles ___ ចានbowl <input type="checkbox"/> បបរPorridge ___ ចានbowl ( <input type="checkbox"/> ខាប់sticky <input type="checkbox"/> រាវwatery ) <input type="checkbox"/> ដំលូងជ្វាSweet potato ___ <input type="checkbox"/> ពោតCorn ___ <input type="checkbox"/> នំបាំងBread ___
អាហារសាងសង់ Body building Food	<input type="checkbox"/> ស៊ីតegg ___ <input type="checkbox"/> សណ្តែកbeans ___ <input type="checkbox"/> ត្រីfish ___ <input type="checkbox"/> សាច់meat ___ <input type="checkbox"/> កំពឹស/ក្តាម/ខ្យងshrimp/crabs/snails ___ <input type="checkbox"/> ទឹកដោះគោMilk ___
អាហារការពារ Protective Food	_____ ប្រភេទបន្លែkinds of vegetable ចំនួនhow much _____ _____ ប្រភេទផ្លែឈើkinds of fruit ចំនួនhow much _____

10. ទឹកស្អាត និងអាហារដែលមានសុវត្ថិភាពនៅតាមផ្ទះ household water and food safety

A. តើគ្រួសាររបស់អ្នកបានទឹកហូបមកពីណា? Where does your family get the drinking water?	<input type="checkbox"/> ទឹកជុង Tank/Bottle water <input type="checkbox"/> ទឹកពីទុយោ Tap water <input type="checkbox"/> ទឹកភ្លៀងចម្រោះ rain water after settle the sediment <input type="checkbox"/> ទឹកអណ្តូង well water <input type="checkbox"/> ទឹកទន្លេ/បឹង river or lake water	
B. មុននឹងហូបទឹក តើមានដាំឬច្រោះទឹកឬទេ? Does the water be boiled or filtered before drinking?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
C. រយៈពេលប៉ុន្មានដែលគាត់ប្តូរស្នូលជុងចម្រោះម្តង? How often does your family change the filter?	<input type="checkbox"/> _____ ម្តង each time	<input type="checkbox"/> មិនដែល never
D. មុនលាយម្សៅទឹកដោះគោ បានដាំទឹកឬច្រោះឬទេ? Does the water be boiled or filtered before using for powder milk?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
E. កុមារញ៉ាំដោយខ្លួនឯងឬ? Does the child eat from own bowl?	<input type="checkbox"/> បា/បាទ yes	<input type="checkbox"/> ទេ no
F. តើមានកាំបិតផ្សេងគ្នា និងជ្រុញផ្សេងគ្នា សម្រាប់ម្ហូបអាហារនៅនិង ឆ្អិនឬទេ? Are there different knife and cutting board for raw food and cooked food?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
G. តើម្ហូបអាហារទុកដាក់នៅឯណា? Where does the food store (raw food and leftover)?		
H. (ចូរអ្នកសង្កេតមើលObservation) តើសមាជិកគ្រួសារមានលាងសំអាតដៃបន្ទាប់ពីប្រើសបង្គន់ឬទេ? Do the family members wash hands after using latrine?	<input type="checkbox"/> លាង yes	<input type="checkbox"/> មិនលាង no

<b>I. (ចូរអ្នកសង្កេតមើល Observation)</b> តើអ្នកថែទាំក្មេងបានលាងសំអាតដៃមុនពេលចម្អិនម្ហូប ទេ? Does the caregiver wash hands before cooking?	<input type="checkbox"/> លាង yes	<input type="checkbox"/> មិនលាង no
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**11. វាយតម្លៃការថែទាំសុខភាពកុមារ** Evaluation the health care of the child

<b>A. តើអ្នកដឹងបានយ៉ាងដូចម្តេចថាកុមារនោះមានជម្ងឺ ឬឈឺ?</b> How do you know when the child gets sick?		
<b>B. តើកុមារមានឈឺឬទេក្នុងរយៈពេល 6 ខែកន្លងមក?</b> Was the child sick in the past 6 months?	<input type="checkbox"/> ឈឺ , ប៉ុន្មានដង? _____ yes, How many times?	<input type="checkbox"/> មិនឈឺ no
<b>C. តើកុមារឈឺអ្វី?</b> What illnesses has the child had?		
<b>D. ពេលកុមារឈឺ តើកុមារញ៉ាំបានដូចមុនឬទេ?</b> When the child was sick, did he/she be fed differently?	<input type="checkbox"/> ដូច yes, _____	<input type="checkbox"/> មិនដូច no

**12. វាយតម្លៃទម្លាប់នៃការរស់នៅ** Evaluation of Living Habit

<b>A. តើក្នុងគ្រួសារ មានអ្នកជក់បារី ឬទេ?</b> Does any family member smoke in the household?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
<b>B. ពេលដែលមានផ្ទៃពោះម្តាយហូបស្រាឬទេ?</b> Did the Mother drink alcohol during pregnancy?	<input type="checkbox"/> មាន yes, ហូបប៉ុន្មានក្នុងមួយថ្ងៃ How much per day _____	<input type="checkbox"/> មិនមាន no
<b>C. តើពេលមានផ្ទៃពោះម្តាយមានជក់បារីឬទេ?</b> Did the Mother smoke during pregnancy?	<input type="checkbox"/> មាន yes, ហូបប៉ុន្មានក្នុងមួយថ្ងៃ How much per day _____	<input type="checkbox"/> មិនមាន no
<b>D. តើអ្នកថែទាំកុមារមានគិតថា កុមារនឹង ស្គមជាងកុមារដទៃ          ឬទេ? Do main caregivers think the kid is thinner or smaller than other kids?</b>	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
<b>E. តើកុមារបានដុសធ្មេញរាល់ថ្ងៃឬទេ?</b> Does the child brush teeth every day?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
<b>F. (ចូរអ្នកសង្កេតមើល Observation)</b> កុមារមានពាក់ស្បែកជើងឬអត់? Does the child wear shoes?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
<b>G. (ចូរអ្នកសង្កេតមើលសត្វចិញ្ចឹម Observation)</b> ជ្រូក, ឆ្កែ, ឆ្កា, សត្វស្លាប(មាន់, ទា...) មានចូលក្នុងក្នុងផ្ទះឬទេ? Do pigs, dogs, cats or other poultry (chicken, duck) go in and out of the house?	<input type="checkbox"/> មាន yes	<input type="checkbox"/> មិនមាន no
<b>H. (ចូរអ្នកសង្កេតមើលសមាជិកគ្រួសារ Observation Family members)</b> ទាំងអស់គ្នាក្នុងគ្រួសារ ស្អាតប្រាសនិងមានងូតទឹកឬទេ? (សក់, ក្រចក, សំលៀកបំពាក់, ស្បែកជើង, ហៀរសំបោរ, ក្លិន) Are the family members clean and bathed?(hair, nail, clothes, wearing shoes, runny nose, smell)	<input type="checkbox"/> ស្អាត yes	<input type="checkbox"/> មិនស្អាត no
<b>I. (ចូរអ្នកសង្កេតមើលខាងក្រៅ និងខាងក្នុងផ្ទះ Observation Outside and Inside the house)</b> តើផ្ទះស្អាតបាតឬទេ? (សំរាមមាននៅលើដី ទឹកពាងមានគ្រប ទេ សំលៀកបំពាក់របស់កុមារ នៅគ្រប់ទីកន្លែង) Is the house clean? (garbage on the ground, water jar covered, clothes everywhere)	<input type="checkbox"/> ស្អាត yes	<input type="checkbox"/> មិនស្អាត no
<b>J. (ចូរអ្នកសង្កេតមើលផ្ទះបាយ Observation the kitchen)</b> ផ្ទះបាយស្អាតទេ?(មានម្ហូបនៅសល់ប្រើប្រាស់ផ្សេងគ្នាសំរាប់ម្ហូបនៅនឹងផ្ទះ) Is the kitchen clean? (leftover, separate cutting board for raw and cooked food, flies)	<input type="checkbox"/> ស្អាត yes	<input type="checkbox"/> មិនស្អាត no
<b>K. (ចូរអ្នកសង្កេតមើលបន្ទប់ទឹក Observation the latrine)</b> ផ្ទះមានបន្ទប់ទឹកឬទេ ហើយបន្ទប់ទឹកស្អាតបាតឬទេ? (ក្លិន មូស រុយ ដី សើម?) If the house has latrine, is it clean? (smell, mosquitos, flies, wet ground)	<input type="checkbox"/> ស្អាត yes	<input type="checkbox"/> មិនស្អាត no

អ្នកសំភាស Interviewer: \_\_\_\_\_  
 ថ្ងៃទី Date: \_\_\_\_\_

អ្នកឆ្លើយសំណួរ Respondent: \_\_\_\_\_  
 ថ្ងៃទី Date: \_\_\_\_\_