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| KAP: Younger Children (7-11)  2. *In the* ***last 12 months***, since this month of the past year, which of the following sources have you used to **obtain health information**?  *Probe if necessary. Select all that apply.*   |  |  |  |  | | --- | --- | --- | --- | | |  |  | | --- | --- | | School  Brochures  Internet  Children  Newspapers/magazines  Official spokespeople  Health professionals  Radio | Social networks  (Facebook,  Twitter, Instagram)  Community  meetings  TV  Neighbors  WhatsApp | |  |  6. Do you think that diseases transmitted by mosquitos such as dengue, Zika and chikungunya are a problem in your community? Yes |  No 8. In the ***last 12 months,*** how often have you used a **mosquito net**?  |  | | --- | | Daily  One time per week  One time per month  Rarely  Never |  9. **Where** do mosquitoes bite you most frequently?*Read the options. Select all that apply.* Around the house outside  Inside the house  Work  School  Community sports field  Somewhere else in the community  Somewhere else outside of the community  Mosquitoes do not bite me A **mosquito-breeding site** is anything that retains water that enables mosquitoes to reproduce. Mosquitoes can even reproduce in an area as small as a bottle cap.11. Do you think controlling **mosquito-breeding sites** is a good strategy to prevent mosquito-borne diseases? Yes |  No 13. Do you think that **your community should do more** to **control** mosquitoes? Yes |  No 14b. Do you think **you** are **responsible** for **controlling** mosquitoes? Yes |  No |  | KAP: Younger Children (7-11)  **Participant Laboratory Data**  **Participant ID:**  P  **\_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_**  Month Day  Year  **Collection Date:**    **\*\*Project flag:\*\*** *Fever in last 7 days*  No: **COPA**  Yes: **COPA\_SYM**  **PARTICIPANT BARCODE**  Yes  No |