### INSTRUCTIONS

Please read these instructions before you start to make filling in the diary an easier task.

* We would like you to record in the diary **every** person that your baby have **contact with** on your assigned day
* A contact is defined as:
	+ EITHER a **two-way conversation** with three or more words in the physical presence of another person,
	+ OR physical **skin-to-skin contact** (for example a handshake, hug, kiss etc).
* Write down **every person that your baby contacts** during the day, regardless of whether the contact was long or short, and whether you know the person or not.
* If your baby contacts the same person several times in the course of the day, only record him/her once, and record the total time baby spent with that person over the entire day. So each person your baby meets during the day and ~~have~~ has contact with should only have one line in the diary: **one person, one line.**
* Please provide some information on your baby’s contact, namely:
	+ Age.
	+ Gender.
	+ How long the contact with the person was over the entire day.
	+ Places where contact(s) occurred (you may indicate several locations).
	+ How often your baby contacts this person in general.
	+ Whether there was skin-to-skin contact.
* If you don’t know the exact age, give an **estimate of the age.**
* **Estimate** the total **duration** of time spent in presence of the contact person that day.
* After you have finished recording the diary, we suggest that you double check the diary entries by trying to **remember** all of your baby’s **activities** to make sure you haven’t missed any contact persons.
* The **order** in which you write down your baby’s contact persons is **not important**. The easiest is to use a **chronological order** according to when you met the person for the first time during your assigned day and then add anyone else that you might remember as you go through your daily activities.
* For the purposes of this study, the day starts at 5 a.m. on the morning of the day assigned, and ends at 5 a.m. the next morning.

**THE DIARY SHOULD BE COMPLETED ON THE FOLLOWING DAY/DATE**

 **1 Monday**

 **2 Tuesday**

 **3 Wednesday**

 **4 Thursday Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **5 Friday**

 **6 Saturday**

 **7 Sunday**

1) Age of participant infant

2) Sex of the participant infant

3) Educational Status of mother

* Primary School graduate
* Middle School graduate
* High School graduate
* Bachelor Degree

4) Educational Status of Father

* Primary School graduate
* Middle School graduate
* High School graduate
* Bachelor Degree

 5) Income Level of the Family

* Low
* Middle
* High

5) Number of Household people

6) Number of rooms at home

7) How many people sleep in the infants’ bedroom

8) Is your Baby attending nursery

9) Have any of your baby’s parents got pertussis of influenza vaccination? If yes please specify what was the reason for influenza vaccination?

 10) Did your baby have any respiratory infection symptoms? (At least one of the symptoms including coughing, sore throat, runny nose,or fever)

11) In the last one week did the baby attend at any Crowded Places? (i.e. any place where there is a gathering of more than ten people e.g. shopping malls, indoor social events, hospitals, wedding, funeral, various ceremonies, or other such events) What is the frequency of attending at crowded places? Please specify the attended crowded places by your baby.

REMEMBER TO RECORD ALL OF THE FOLLOWING CONTACTS

EITHER a **two-way conversation** with three or more words in the physical presence of another person,

OR physical **skin-to-skin contact** (for example a handshake, hug, kiss or contact sports)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Contact initialsIf known | Age | Gender | Did your baby touch his/her skin? | How often does your baby have contact with this person in general? | Where did your baby have contact?(tick all which apply on your assigned day) | Total time spent with person during whole day |
|  |  | F | M | Y | N | Daily or almost daily | About once or twice a week | About once or twice a month | Less than once a month | Never met before | Home | School / College | Work | Transport | Leisure | Other | Under 5 mins | 5-15 mins | 15 mins – 1 hr | 1 – 4 hrs | More than 4 hrs |
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