

ANNEXURE

Annexure I: Toilet posture and frequency of urinary tract infection rates among adolescent populations

- I. Demographic details:
 - i. Name:
 - ii. Age and Gender:
 - iii. Occupation:
 - iv. Accommodation type: Home/Hostel/sharing rooms
 - v. Number of family members:
2. Knowledge and attitude analysis:
 - i. Which one of the following types of toilet are you using for defecation?
(A) Indian type (B) Western type (C) Japanese type
 - ii. With which toilet are you comfortable in using?
Indian type Western type Japanese type
 - iii. How much time do you spend for resting?
>10 min <10 and >20 min <20 min
 - iv. Which one of the following toilets are you using for defecating in your residence?
Common toilet Personal toilet
 - v. Which one of the following toilets are you using for defecating in public places?
Common toilet Public toilet
 - vi. How frequent do you defecate?
Once daily Twice daily Once in 2 days
 - vii. How frequent do you disinfect?
Once daily Once in a week Once in a month
 - viii. Which one of the following positions do you use in western type of toilet? (applicable for those who are using western type of toilet)
(A) Sitting (B) Squatting
 - ix. Are you having the habit of using the following items during defecation
Mobile phone Novels/newspapers Office notes
 - x. Have you ever heard about urinary tract infections/vaginitis?
Yes No
 - xi. Have you ever suffered/are you currently suffering with urinary tract infections?
Yes No
 - xi (a). If yes, please state the duration of infection: _____
 - xii. Any of your family members ever suffered/currently suffering with urinary tract infections?
Yes No
 - xii (a). If yes, duration of infection: _____
 - xii (b). Gender infected with urinary tract infections:
Male/Female
 - xii (c). Type of medication(s) used for the treatment

 - xiii (a). Have you had/felt any of the following symptoms?
(applicable only for females)
(A). Vaginal itching
(B). Burning sensation during urination
(C). Discolored urine
(D). Pain around the bladder area
(E). Urine that smells bad
 - xiii (b). Have you had or felt any of the following symptoms?
(applicable only for males)
(A). Urinating more often or waking from sleep to urinate
(B). Pain or burning when you urinate
(C). Pain or pressure in your lower abdomen
(D). Leaking urine
(E). Urine that smells bad
 - xiv. Do you have adequate knowledge on infection caused by public toilets?
Yes No