

Note: In the case of multiple children in the household between 3-21 months of age, please recruit the youngest child and ask questions to their mother (caregiver).

1. Identification

No	Question	Codes	Skip
1	Date of visit (DD/MM/YYYY)		
2	Is biological mother of the child alive?	0=No 1=Yes	>>Q3 >>Q5
3	Who primarily takes care of the child?	1 =Grandmother 2 =Father 3=Aunt (paternal or maternal) 4=Stepmother 96=Other (specify)	>>Q5 >>Q5 >>Q5 >>Q5 >>Q4
4	Gender of respondent	1 =Male 2 =Female	
5	Age of survey mother (caregiver) (completed years)		
6	Area/Mohala		
7	Native language of survey mother (caregiver)	1=Urdu 2= Sindhi 3=Punjabi 4=Pushto 5=Siraki 96=Other (specify)	
8	Religion of survey mother (caregiver)	1=Islam 2=Christianity 3=Hinduism 4=Sikh 96=Other (specify)	
9	Caste of mother (caregiver)		
10	What is your marital status?	1 = Married 2 = Widow/Widower 3 = Divorced/Separated 4 = Single/Never married	
11a	Mobile no 1		
11b	Mobile no 2		
12	HH_ID		
13a	GPS Coordinates		
13b	Address and directions from local headquarters (Sukoon water plant)		
14	Do you intend to move from this address in the next 12 months?	0=No 1=Yes	>>Next section Q14a
14a	Can you please share a tentative address?		

2. Household Roster and Details

Read aloud: I am going to ask you some questions now about your household. A household is a group of people who live together and eat from a single kitchen.

No	Question	Response	Skip
1	How many people live in the household		
2	How many females above 18 years of age live in the household including yourself		
	Mother alive & married>>Q3 If mother not alive, divorced or widowed>>Q4		
3	What is your husband's highest level of education completed	1 = Started school but not completed Grade 1 2=Primary school (grades 1-5) 3=Middle school (grades 6-8) 4=Matric pass (9th and 10th grade) 5=Intermediate pass (11th and 12th grade) 6 = Undergraduate (Bsc/Bcom) 7= Masters/ PhD 8 =Vocational training 9=Adult literacy program 10=Madrassa 96 = Other (specify)	
4	What is your [survey mother/caregiver] highest level of education completed	1 = Started school but not completed Grade 1 2=Primary school (grades 1-5) 3=Middle school (grades 6-8) 4=Matric pass (9th and 10th grade) 5=Intermediate pass (11th and 12th grade) 6 = Undergraduate (Bsc/Bcom) 7= Masters/ PhD 8 =Vocational training 9=Adult literacy program 10=Madrassa 96 = Other (specify)	
5	Have you [survey mother/caregiver] done any work in the last 12 months besides the housework like cooking, cleaning. This work could be done for cash, in kind or no payment	0=No 1=Yes	>>Next section >>Q6

6	What is your [survey mother/caregiver] main occupation?	1 = Government service 2 = Other salaried job in private sector 3 = Domestic servant 4=Teacher 5=Farm work 6=Raising livestock 7 =Other non-agricultural wage laborer 8 =Own shop/business 9=Cart keeper 10=Sewing/embroidery 11 =Fuel (wood/dung) selling 12 =Working abroad 96 = Other (specify)_____	
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3. Child feeding practices

NOTE: Please fill this out for above recruited youngest child in the household.

1	Did [child name] have had any of the following liquids/drink in the last 24-hours?	0=No	1=Yes		
a	Infant formula such as Meiji, BF, Lactogen	0	1	# of times:	If 1>># of times
b	Animal milk such as cow, buffalo, goat, etc	0	1	# of times:	If 1>># of times
c	Powdered milk such as nido	0	1	# of times:	If 1>># of times
d	Yogurt	0	1	# of times:	If 1>># of times
e	Juice	0	1		
f	ORS	0	1		
2	During the past 24-hours did [child name] drink anything from a bottle with a nipple?	0=No	1=Yes		
3	Was [child name] breastfed in the last 24-hours?	0=No	1=Yes		>>Q4 >>Q3a
3a	How many times?	# of time _____			
4	Yesterday during the day or night, did (name) eat any of the following items at home or outside home?	0=No	1=Yes		
a	Rice	0	1		
b	Roti	0	1		
c	Rusk/Bread	0	1		
d	Sooji	0	1		
e	Khichri	0	1		
f	Kheer	0	1		
g	Dalia	0	1		
h	Carrots, sweet potatoes that are yellow or orange inside	0	1		
i	White potatoes, sweet potatoes that are white or any other foods made from roots such as turnip	0	1		
j	Any dark green leafy vegetables like saag	0	1		
k	Ripe mangoes, ripe papayas, Apricot	0	1		
l	Any other fruits or vegetables in any form	0	1		
m	Liver, kidney, heart	0	1		
n	Any meat (beef, chicken, goat, etc.)	0	1		
o	Eggs	0	1		

p	Fish	0	1	
q	Any foods made from beans like lobia, red kidney beans	0	1	
r	Any foods made from nuts like almonds, walnuts, peanuts	0	1	
s	Any foods made from lentils	0	1	
t	Other milk product Read Aloud: Does not include ice cream	0	1	
u	French fries	0	1	
v	Any sugary foods such as chocolates, candies, pastries, cakes or biscuits, ice creams	0	1	
w	Salty snacks such as biscuits, packet chips	0	1	
5	If not a single "Yes" in 4a – 4w, then ask 5a, otherwise ask 5c.			
5a	Did [child name] eat any solid, semi-solid, or soft foods yesterday during the day or night?	0 No 1 Yes		Q6 Q5b
5b	What did the child [name] eat?	_____		
5c	Over the past 24-hours, how many times did [child name] eat solid, semi-solid, or soft foods other than liquids at home or outside home (<i>exclude liquids</i>)?	No of times _____		
6	In the last one month, did you hear OR see OR read any messages/suggestions about breastfeeding or complementary feeding?	0=No 1=Yes		>>Next section >>Q6a
6a	Where or from whom did you hear /see/ read about it? Multiple answers are possible. Don't read possible answers	1=Mother/mother in law 2=TV 3=Newspaper 4=Mobile phone 5=Doctor/LHW/CHW 6=Poster/leaflet 7=Neighbors 8=Other relative/household member 96=Other (specify)_____		

4. Water, sanitation and hygiene

Subsection A: Water

No.	Questions and filters	Coding categories	SKIP
1.	What is the main source of drinking water for your household?	1 = Piped water 2 = Hand pump 3= Mineral water 4=Tanker truck/Water bearer 5=Filtration plant 96 = Other (specify) _____ 98 = Don't know	
2.	Do you treat your water in any way to make it safer to drink?	0 =No 1= Yes	Q4 Q3
3.	What do you usually do to treat the water to make it safer to drink? <i>Multiple answers possible. Don't read possible answers.</i>	1 = Boil 2 = Add bleach/chlorine 3 = Add alum 4 = Strain it through a cloth 5 = Use a water filter 6 = Let it stand and settle 96 = Other (specify) _____ 98 = Don't know	
4.	Is the drinking water pot covered?	0 =No 1= Yes 2= N/A – Water not kept in water pot	

Subsection B: Sanitation & hygiene

No.	Questions and filters	Coding categories	SKIP
1.	What kind of toilet facility do members of your household usually use?	1=Flush toilet 2=Pit latrine 3=Septic tank 4=No facility/open defecation/Bush/Field 96=Other (specify) _____	
2	Observation only Is there any soap next to toilet/latrine?	0 =No 1= Yes 99=Not observed	
3	Observation only Is the kitchen/cooking area clean?	0 =No 1= Yes 99=Not observed	
4	Observation only Is the food kept in utensils with lids/covers?	0 =No 1= Yes 99=Not observed	

5	Observation only Is the dishware clean?	0 =No 1= Yes 99=Not observed	
6	Observation only Are there flies/mosquitoes near the kitchen area?	0 =No 1= Yes 99=Not observed	
7	Observation only Is there any soap next to the kitchen/cooking area?	1 = Soap present 2 = Soap absent 99=Not observed	

5. Household characteristics and assets

Subsection A: Facilities

No.	Questions and filters	Coding categories	SKIP
1	Is this house your own, rented or do you stay with someone else?	1 = Own 2 = Rent 3 = Live with someone else (no rent) 4 = Government/Communal 88 = Refused 96 = Other (specify) _____ 98 = Don't know	
2	How many rooms in your house are used for sleeping?	1=1 2=2 3=3 4=4 5=5 6= More than 5 88 = Refused 98 = Don't know	
3	Does your home have access to any of the following services:	0 =No 1= Yes	
i	Gas	0 1	
ii	Water	0 1	
iii	Sewerage	0 1	
iv	Electricity	0 1	
4	What is your main source of energy for cooking?	1 = Electricity 2 = Liquefied propane gas (LPG) 3 = Natural gas 4 = Biogas 5 = Firewood 6 = Kerosene 7 = Charcoal/coal/lignite 8 = Animal Dung 9 = Dried leaves/shrub/straw 96 = Other (Specify) _____	
5.	What is the main material used to construct the floor of the house?	1 = Cement 2= Tile/marble 3 = Mud 4=Bricks 96 = Other (specify) _____ 98 = Don't know	

6	What is the main material used to construct the ceiling/roof of the house?	1 = Reinforced Concrete(RCC)/Cement 2 = Iron sheets 3 = Bamboo/twigs 4 = T-Iron/Wood 5 = Tile beam 6 = Cardboard/plastic 7 = No ceiling 96 = Other (specify)_____ 98 = Don't know	
7.	What (main) material has been used to construct most of the walls of the house?	1 = Cement blocks 2= Burned bricks 3 = Unbaked bricks 4 = Wood 5 = Stone 6 = Mud 7=Bamboo 96 = Other (specify)_____ 98 = Don't know	

Subsection B: Assets

Read Aloud: Now I would like to ask you some information regarding specific assets you may own in your household.

1 Do you have the following assets (Read one by one)	
a. Air Conditioner	0=No 1=Yes
b. Refrigerator	0=No 1=Yes
c. Television	0=No 1=Yes
d. Smart mobile Phone (which has whats app, facebook, youtube)	0=No 1=Yes
e. Computer	0=No 1=Yes
f. UPS/Generator	0=No 1=Yes
g. Car/Datsun/Truck	0=No 1=Yes
h. Bicycle	0=No 1=Yes
i. Motorcycle/Scooter	0=No 1=Yes
j. Qingqi/rickshaw	0=No 1=Yes
k. Donkey/mule/horse/Ox	0=No 1=Yes
l. Sewing machine	0=No 1=Yes

Subsection C: Land

1.	Does any household member own any land including the house you live in	0=No 1=Yes	>>Next section >>Q2
2	How much land do you own Note: Record in square feet	_____ sq ft	

6. Intergenerational transfer of beliefs

Subsection A : Survey mother ¹

A1: Read aloud: Now I would read some general statements regarding your childrens' health and nutrition. Please tell me, do you agree or disagree with the following statements':

Statement	Response
1) Breastfeeding alone up-to 6 months does provide enough nutrition for the child	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
2) Children should be taken to a doctor when they fall sick	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
3) Vaccinations like polio vaccine drops cause infertility and other harmful side effects	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
4) Malnutrition during the first two years of a child's life will badly affect his/her learning ability at school	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
5) Infant boys should be breastfed longer than infant girls.	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
6) Infant boys need more food than infant girls - like eggs, milk and meat.	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
7) Vaccination is harmful for the girls, compared to boys because it causes infertility and other harmful side effects in them	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
8) Compared to girls, boys should be taken to doctors immediately when they fall sick	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
9) Education of girls is less important than education of boys	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree

¹ (If the mother is not alive, follow the training guidelines provided by senior supervisor to fill this section)

A2: Read aloud: Now I would like to ask some questions regarding the youngest recruited child's [name] health and nutrition

1	Is your child [name] currently being breastfed?	0=No 1=Yes	>>Q2 >>Q3
2	At what age did you stop breastfeeding (Name)? <i>Answer to be recorded in completed months</i>	Months <input type="checkbox"/> <input type="checkbox"/> 98 =Don't know	
3	Until what age did you exclusively breastfeed the child? Read aloud: Not even water <i>Answer to be recorded in completed months</i>	Months <input type="checkbox"/> <input type="checkbox"/> 96=Still exclusively breastfeeding 98 =Don't know	
4	At what age did you introduce complementary foods to the child [name] <i>Note: record in completed months</i>	Months <input type="checkbox"/> <input type="checkbox"/> 96=Complementary food not introduced yet 98=Don't know	
5	Who provides the treatment when the child is sick? <i>Multiple answers are possible Don't read possible answers</i>	1 = Doctor 2 = Staff nurse 3 = Dispenser, compounder, homeopath, hakim 4=Friends/neighbors 5=Household member 6=Self 7=Traditional healer 96=Other (specify) _____	
6	Did (Name) ever have any vaccinations to prevent him/her from getting diseases, including vaccinations received in a national immunization day campaign?	0=No 1=Yes 98=Don't Know	

A3: Perceptions about child health.

Note: Please ask these questions to mother (caregiver) concerning the youngest recruited child

Read Aloud: These questions relate to your youngest recruited child [name]

Qno	Question	Response	Skip
1	Do you think height is an important marker of whether your child is having proper physical growth?	0=No 1=Yes 98=Don't know	
2	Do you think your child has the appropriate height given his/her age?	0=No 1=Yes 98=Don't know	

3	Do you compare your child to other kids when assessing whether s/he has the appropriate height for his/her age?	0=No 1=Yes	>>Q5 >>Q4
4	Who do you compare your child with?	1=His/her siblings 2=Children in the family other than his/her siblings 3=Other children in the neighborhood 96=Other (please specify)	
5	Out of, say, every 10 children in this neighborhood, how many do you think have the appropriate height given their age?	<hr/> 98=Don't know	
6	Do you think weight is an important marker of whether your child is having proper physical growth?	0=No 1=Yes 98=Don't know	
7	Do you think your child has the appropriate weight given his/her height?	0=No 1=Yes 98=Don't know	
8	Do you think your child has the appropriate weight given his/her age?	0=No 1=Yes 98=Don't know	
9	Do you compare your child to other kids when assessing whether s/he has the appropriate weight for his/her age and height?	0=No 1=Yes	>>Q11 >>Q10
10	Who do you compare your child with?	1=His/her siblings 2=Children in the family other than his/her siblings 3=Other children in the neighborhood 96=Other (please specify)	
11	Out of, say, every 10 children in this neighborhood, how many do you think	<hr/> 98=Don't know	

	have the appropriate weight given their height?		
12	Out of, say, every 10 children in this neighborhood, how many do you think have the appropriate weight given their age?	98=Don't know	
	If 'Yes' to both 1 and 6		
13	Which one is more important as a marker of your child's physical growth – weight or height?	1=Weight 2=Height 3=Both are equally important	

Subsection B: Mother in law:

B1: Read aloud: Now I would read some general statements regarding your childrens' health and nutrition. Please tell me, do you agree or disagree with the following statements':

Statement	Response
1) Breastfeeding alone up-to 6 months does provide enough nutrition for the child	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
2) Children should be taken to a doctor when they fall sick	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
3) Vaccinations like polio vaccine drops cause infertility and other harmful side effects	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
4) Malnutrition during the first two years of a child's life will badly affect his/her learning ability at school.	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
5) Infant boys should be breastfed longer than infant girls.	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
6) Infant boys need more food than infant girls - like eggs, milk and meat.	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree

7) Vaccination is harmful for the girls, compared to boys because it causes infertility and other harmful side effects in them	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
8) Compared to girls, boys should be taken to doctors immediately when they fall sick	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree
9) Education of girls is less important than education of boys	<input type="checkbox"/> 1. Agree <input type="checkbox"/> 2. Neutral <input type="checkbox"/> 3. Disagree

B2: Read aloud: Now I would like to ask some questions about your youngest child's health and nutrition back in the day.

1	At what age did you stop breastfeeding your youngest child <i>Answer to be recorded in months</i>	Months <input type="checkbox"/> <input type="checkbox"/> 98 =Don't know	
2	Until what age did you exclusively breastfeed your youngest child Read aloud: Not even water <i>Answer to be recorded in months</i>	Months <input type="checkbox"/> <input type="checkbox"/> 98 =Don't know	
3	At what age did you introduce complementary foods to the child [name] <i>Note: record in completed months</i>	Months <input type="checkbox"/> <input type="checkbox"/> 98=Don't know	
4	Who provided the treatment when your child was sick? <i>Multiple answers are possible Don't read possible answers</i>	1 = Doctor 2 = Staff nurse 3 = Dispenser, compounder, homeopath, hakim 4=Friends/neighbors 5=Household member 6=Self 7=Traditional healer 96=Other (specify)_____	
5	Did your child ever have any vaccinations to prevent him/her from getting diseases, including vaccinations received in a national immunization day campaign?	0=No 1=Yes 98=Don't Know	

Subsection C: Household bargaining power [ask survey mother (caregiver)]

1. Autonomy: Who primarily makes the decision regarding these issues?

S_no	Issues	Primary decision making power					
		1=Respondent	2=Husband	3=Respondent & husband jointly	4=Respondent's mother in law	5=Respondent's father in law	96=Someone else (specify)_____
1	Your healthcare						
2	Major household purchases						
3	Visits to your family and relatives						
4	Routine purchase for household						
5	Children Education						
6	Whether you can work outside home						
7	Family Planning						
8	Giving money to your relatives						
9	Meals						
10	Expenditure on children						

7. Anthropometric measurements

These measurements will be done for the youngest 3 children in the household under five years of age.

Measure the youngest (recruited) child first and move upwards age wise until the three youngest children in the household have been measured.

	Child Code	CH1 (recruited child)	CH2	CH3
A	Introduction			
1	Name of mother(caregiver)			
2	Name of child			
3	Date of birth DD/MM/YY			

	<i>Copy from card if available, if not probe for date of birth from mother. If mother cannot remember the birth date, she can ask another person in the household</i>			
3a	<i>Please indicate how information was obtained</i> 1 = Date of birth as in card 2 = Date of birth as per mother's recall 3=Date of birth as per someone else's recall 96=Other (specify)_____			
4	Is infant male or female 1=Male 2=Female	Sec17_q2_1	Sec17_q2_2	Sec17_q2_3
5	Child's birth order 98=Don't know	Sec17_q7_1	Sec17_q7_2	Sec17_q7_3

B	Measurements	CH1 (recruited child)	CH2	CH3
1a	Length 1 (cm)	Sec17_q11_1	Sec17_q11_2	Sec17_q11_3
1b	Weight of mother 1 (kg)	Sec17_q13_1	Sec17_q13_2	Sec17_q13_3
1c	Weight of mother & child 1 (kg)	Sec17_q14_1	Sec17_q14_2	Sec17_q14_3
2a	Length 2 (cm)	Sec17_q15_1	Sec17_q15_2	Sec17_q15_3
2b	Weight of mother 2 (kg)	Sec17_q17_1	Sec17_q17_2	Sec17_17_3
2c	Weight of mother & child 2 (kg)	Sec17_q18_1	Sec17_q18_2	Sec17_q18_3
3a ²	Length 3 (cm)	Sec17_q19_1	Sec17_q19_2	Sec17_q19_3
3b	Weight of mother 3 (kg)	Sec17_q21_1	Sec17_q21_2	Sec17_q21_3
3c	Weight of mother & child 3 (kg)	Sec17_q22_1	Sec17_q22_2	Sec17_q22_3

² Third measurements of length is prompted only when 1st and 2nd infant length/height disagrees by more than 7 mm (.7 cm)

Third measurement of weight is prompted when the 1st and 2nd weight measurements disagrees by more than 0.5 kgs

4	Length Measured 1=Lying down 2=Standing	Measure_length_1	Measure_length_2	Measure_length_3
5	Result of measurements 1=Completed 2=Incomplete because child absent 3=Incomplete because child is sick/disabled 4=Incomplete because refusal 96=Other (specify)_____	Sec17_q23_1	Sec17_q23_2	Sec17_q23_3

Survey result:

1 = Completed

2 = Interview is partially completed (specify) _____