

Appendix A: Study Instruments

1. Baseline Household (Mother) Survey

V001	Ques. SL	
V002	Child ID No.	

V003	Date of interview	Day:	Month:	Year:
V004	Name of interviewer		Code	

A. Identification (to be filled by enumerator)

SI	Area	Name	Code
A001	Household Number		
A002	Para/sub-village		
A003	Village		
A004	Mauza		
A005	Union		
A006	Upazila		
A007	District		
A008	Distance to the nearest Community Clinic (to be filled by enumerator)	Distance in Km ____	
A009	Time (in minutes) required using normal mode of transportation		
A010	Mode of transportation		1 = Walking 2 = Rickshaw/van 3 = Boat 4 = Auto-rickshaw

A011	How long does it take to reach the nearest CC by walking		
A012	How long does it take to reach the nearest CC by using common mode of transport		

B. Household Profile [Note: Demographic Information]

										For members age 7 Years and above			
ID	Name of HH Member (Start with the name of HH head)	Relationship to respondent <small>(Use code)</small>	Sex 1=Male 2=Female	Age (months/years)		Is HH member currently attending school 1=Yes 2=No	Highest class passed <small>(Use code)</small>	Religion <small>(Use code)</small>	Ethnicity <small>(Use code)</small>	Marital Status <small>(Use code)</small>	Can write a letter? 1=Yes 2=No	Activity Status 1= Employed 2=Looking for job 3=Household work 4=Does not work	If employed, field of employment: 1=Agriculture 2=Industries 3=Services
				Years	Months								
	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13
B001													
B002													
B003													
B004													
B005													
B006													
B007													
B008													
B009													
B010													
B011													
B012													

Relationship to intended	1=Intended respondent; 2=Spouse; 3=Son/Daughter; 4=Sibling; 5=Parent; 6=Daughter-in-law/Son-in-law;7=Sister-in-law/Brother-in-law; 8=Father-in-law/Mother-in-law;
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respondent	9 = Grandchild; 10 = Nephew/Niece; 11 = Others (specify); 12 = Grandparent
Marital Status	1=Unmarried; 2=Married; 3=Widowed; 4=Divorced /Separated; 99 = Not Applicable
Religion	1=Muslim, 2=Hindu, 3=Christian, 4=Buddhist, 5= Other
Ethnicity	1=Bengali 2=Tribal, 3=Non-Bengali, 4= Other (specify)
Highest class passed	0=No class, 1=Class 1; 2=Class 2; 3=Class 3; 4=Class 4; 5=Class 5; 6=Class 6; 7=Class 7; 8=Class 8; 9=Class 9; 10=SSC/ Dakhil pass; 11=Class 11; 12=HSC/ Alem pass; 14=Graduate/ Fazil; 16=Masters/Kami; 66=Pre primary school; 67= Qawmi madrasa; 68= Hafezi; 69 = Others (specify)

C. Housing [Note: SES Information]

Sl.	Questions and Filters	Coding Categories	Answer
C001	What is the main source of water for drinking for your household?	1=Deep tube well 2=Shallow tube well 3=Tape water supplied through pipes 4=Pond sand filter 5=Rainwater harvesting system 6=Rainwater 7=Pond 8=River/canal 9=Traditional well 10=Other (Specify)	
C002	What type of latrine does your household use? (Bold type indicates hygienic types)	1=Ring-slab/offset latrine (waterseal) 2=Pit latrine (covered) 3=Ring-slab/offset latrine (water seal broken) 4=Pit latrine (uncovered) 5=Septic latrine 6=Hanging/open latrine 7=No toilet facility	
C003	Is it your own latrine? Interviewer: Observe the latrine	1= Yes; 2= No	
C004	How many rooms in this household are used for sleeping?	Number	
C005	Does any member of this household own?		
C005a	Auto bike	1= Yes; 2= No	
C005b	Rickshaw	1= Yes; 2= No	
C005c	Bicycle	1= Yes; 2= No	
C005d	Motorcycle/scooter	1= Yes; 2= No	
C005e	Electricity	1= Yes; 2= No	
C005f	Radio	1= Yes; 2= No	
C005g	Television	1= Yes; 2= No	
C005h	Mobile phone	1= Yes; 2= No	
C005i	Non-mobile phone	1= Yes; 2= No	
C005j	Refrigerator	1= Yes; 2= No	
C005k	Almirah/wardrobe	1= Yes; 2= No	
C005l	Table	1= Yes; 2= No	

Sl.	Questions and Filters	Coding Categories	Answer
C005m	Chair	1= Yes; 2= No	
C005n	Electric fan	1= Yes; 2= No	
C005o	DVD/VCR	1= Yes; 2= No	
C005p	Water pump	1= Yes; 2= No	
C006	Does this household own any livestock, herds, other farm animals, or poultry?	1= Yes; 2= No	
C007	How many of the following animals does this household own?		
C007a	Buffaloes	Number	
C007b	Cows	Number	
C007c	Horses/Donkeys/Mules	Number	
C007d	Goat	Number	
C007e	Sheep	Number	
C007f	Chicken	Number	
C008	Does your household own this homestead?	1= Yes; 2= No	
C009	If NO, probe: Does your household own homestead in any other places?	1= Yes; 2= No	
C010	Does your household own any land (other than the homestead land)?	1= Yes; 2= No	
C011	How much land does your household own (other than the homestead land)? (Decimal)	Decimal	
C012	Main material of the floor (record observation)	1=Concrete 2=Brick 3=Wood 4=Clay/Sand 5=Tiles 6=Other (Specify)	
C013	Main material of the roof (record observation)	1=Concrete 2=Wood 3=Tiles 4=Bamboo 5= Straw/jute/stick/leaves 6=Thatched/polythene 7=Tin 8=Other (Specify)	

Sl.	Questions and Filters	Coding Categories	Answer
C014	Main material of the wall (record observation)	1=Concrete 2=Brick 3=Wood 4=Mud 5=Bamboo 6=Straw/jute/stick/leaves 7=Tin 8=Other (Specify)	
C015	What type of fuel does your household mainly use for cooking?	1=Electricity 2=LPG 3=Natural gas 4=Biogas 5= Kerosene 6=Wood 7=Straw/Shrubs/Grass 8=Animal Dung 9=Wood dust/Char coal 10=Other (Specify)	

D. Private Cost Data Questions for Mother

As you know, some women take up jobs for which they are paid in cash or kind. Others sell things, have a small business or work on the family farm or in the family business

Sl.	Questions	Code	Answer
D001	In the last seven days, have you done any of these things or any other work?	1= Yes; 2= No	
D002	Do you usually work throughout the year, or do you work seasonally, or only once in a while?	1=Throughout the year 2=Seasonally/part of the year 3=Once in a while 4=Do not work	
D003	Are you paid in cash or kind for this work or are you not paid at all?	1=Cash only 2=Cash and kind 3=In kind only 4=Not paid	

Now I will ask you about completely different issues.

D004	How easy would you say it is for someone in your household to get 500 Taka in cash by tomorrow?	1=Very easy 2=Somewhat easy 3=Neither easy nor difficult 4=Somewhat difficult 5=Very difficult 6=Impossible 7=Other(Specify	
D005	If you are given an opportunity to decide on “receiving 500 Taka today” versus “waiting to receive 750 taka after exactly 7 days”, what would you prefer?	1=Receive 500 Taka today 2= Wait exactly 7 days to receive 750 Taka instead	

E. Child Health and Nutrition

SI	QUESTIONS AND FILTERS	CODING CATEGORIES	Answer
E001	Age of the youngest child (0-18 months)	Months	
E002	Did you ever breastfeed (NAME)?	1=Yes; 2=No; 3=No comment	
E003	How long did you exclusively breastfeed (Name)?	Number of months	
E004	How long after birth did you first put (NAME) to the breast? IF LESS THAN 1 HOUR, RECORD '00' HOURS.	HOURS	
E005	Did you give (NAME) the colostrum (the first milk which is yellow sticky fluid secreted the few days after delivery)?	1=Yes 2=No 3=Don't remember 4= No comment	
E006	Are you still breastfeeding (NAME)?	1=Yes 2=No 3=No comment	
E007	How many times did you breastfeed last night between sunset and sunrise? IF ANSWER IS NOT NUMERIC PROBE FOR APPROXIMATE NUMBER.	NUMBER OF NIGHTTIME FEEDINGS	
E008	How many times did you breastfeed yesterday during the daylight hours? IF ANSWER IS NOT NUMERIC PROBE FOR APPROXIMATE NUMBER.	NUMBER OF DAYLIGHT FEEDINGS	
E009	At any time yesterday or last night, was (NAME) given any liquid or solid food with breastfeeding?	1=Yes 2=No 3=Don't remember 4=No comment	
E010	How many times did you feed (NAME) yesterday or last night	Number of Times	
E011	How many times during last 24 hours (yesterday or last night), was (NAME) given any of the following:		
E011a	Plain water	Number of Times	
E011b	Sugar/honey water	Number of Times	
E011c	Baby formula (Iron)	Number of Times	
E011d	Fresh milk	Number of Times	
E011e	Any other liquid	Number of Times	

SI	QUESTIONS AND FILTERS	CODING CATEGORIES	Answer
E011f	Tinned or powdered milk	Number of Times	
E011g	Rice/Porridge/wheat	Number of Times	
E0011h	Roots/Tubers (potatoes, sweet potatoes, plantains)	Number of Times	
E0011i	Oils, fats and butter (VitA)	Number of Times	
E011j	Fruits (Mango, Papaya, orange, Jackfruits etc.)- VitA	Number of Times	
E011k	Green leafy vegetables (VitA) Iron	Number of Times	
E011l	Orange and yellow vegetables (Carrots/ pumpkins)-VitA	Number of Times	
E011m	Other fruit/vegetables	Number of Times	
E011n	Egg	Number of Times	
E011o	Fish	Number of Times	
E011p	Poultry	Number of Times	
E011q	Meat/offal/organs	Number of Times	
E011r	Pulse/pea nuts/beans/ground nuts (Iron)	Number of Times	
E011r	Hotchpotch (a preparation of rice and pulses together)	Number of Times	
E011s	Khichuri (a local dish)	Number of Times	
E012	Has (NAME) received a vitamin A capsule like this in the last 6 months? <i>[avoid if age not 12-23 months, skip to diarrhea]</i> Interviewer: Show Vitamin A Capsule	1=Yes 2=No 3= Don't know	
E013	Has (NAME) received ante-helminth (de-worming) within the last 6 months? <i>[avoid if age not 12-23 months, skip to 14]</i> Interviewer: Show de-worming tablet	1=Yes 2=No 3= Don't know	
E014	Has (NAME) had diarrhea (having loose stool) in the last 2 weeks?	1=Yes; 2=No 3= Don't know	
E015	Has (NAME) had diarrhea AND given Zinc and ORS	1=Yes; 2=No 3= Don't know	
E016	Has [NAME] had major illness in the last 2 weeks?	1=Yes; 2=No 3= Don't know	
E017	Did you seek advice or treatment for this major illness from any source?	1=Yes; 2=No 3= Don't know	
	I will ask about your level of agreement with the following two statements		
E018	Health of my children does not depend on my action but on our fate	1=Strongly disagree 2=Somewhat disagree	

SI	QUESTIONS AND FILTERS	CODING CATEGORIES	Answer
		3=Neither agree nor disagree 4=Somewhat agree 5=Strongly agree	
E019	Health of my children does not depend on my action but on the wishes of almighty Allah/God	1=Strongly disagree 2=Somewhat disagree 3=Neither agree nor disagree 4=Somewhat agree 5=Strongly agree	
E020	What do you and your family members usually use to wash your hands?	1=Soap or detergent (bar, liquid, powder, paste) 2=Ash, mud, sand 3=None / Water 4=Others (specify)	
E021	When do you wash your hands with soap? <i>Multiple responses possible.</i> (DO NOT read the choices but probe and mark all that)		
E021a	Before food preparation	1=Yes; 2=No	
E021b	Before eating	1=Yes; 2=No	
E021c	Before feeding children	1=Yes; 2=No	
E021d	After defecation	1=Yes; 2=No	
E021e	After cleaning babies bottoms	1=Yes; 2=No	
E021f	Others (specify)	1=Yes; 2=No	
E022	Do you use Iodized salt for cooking and with meals?	1=Yes; 2=No 99= Don't know	

F. Pregnant and lactating mothers

SI	QUESTIONS AND FILTERS	CODING CATEGORIES	Answer
F001	Are you pregnant now?	1=Yes; 2=No	
F002	If yes, how many months have you been pregnant for?	Month(s)	
F003	Did you have any antenatal check-ups during your (current/ last) pregnancy?	1=Yes 2=No	
F004	How many check-ups did you have during your (current/last) pregnancy?	Number of visits	
F005	Do you have an antenatal card for your (current/last) pregnancy? IF Yes: May I see it please?	1=Yes, Seen 2=Yes, Not Seen 3=No Card	
F006	Place of ANC	1=UHC 2=UH&FWC/FWC 3=CC 4=Satellite clinic 5=NGO facility 6=Others (Specify)	
F007	Have you taken Iron/Iron folate in the last 7 days? (Interviewer: show her the iron/iron folate tablet or capsule)	1=Yes 2=No	
F008	Did you receive Vita-A after delivery of the child? (Interviewer: shows her the Vit-A capsule)	1=Yes 2=No	
F009	After how many days of the delivery you received Vit-A?	Days	

G. Stimulation knowledge/ Family influence

Tell us if you “Agree”=1, “Disagree”=2 or “Not Sure”=3.

Sl.	Statement	Answer
G001	A baby should not be held when he (she) is crying because this will make him (her) want to be held all the time	
G002	Babies do some things just to make trouble for their parents, like crying a long time or pooping	
G003	Infants understand only words they can say	
G004	It is important to talk and sing to your baby	
G005	Talking to a child about things he (she) is doing helps its mental development	
G006	Fathers are naturally clumsy when it comes to taking care of babies	

G007	It is important to teach the baby names of simple objects and colors	
G008	It is important to play games with the baby	

H. Decision Making/Influence of Family Members

Sl.	Who usually makes decisions about the following things: (In order of person most responsible for action; up to 3 responses)	1=Mother; 2=Husband/partner; 3=Respondent and partner jointly; 4= Mother and other family member jointly; 5= Husband and other family member jointly; 6=Mother in law; 7=Father in law; 8=Other		
		1	2	3
	FOOD			
H001	What food is prepared every day?			
H002	How much money the household spends on food			
	MONEY			
H003	Buying important things for the family?			
H004	Who decided how your earnings would be spent?			
	HEALTH			
H005	What to do when a child is seriously ill?			

H006	In the past year, how long has the father been away from the house for work?	(enter 0 for none)	Days	
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I. Responsive Feeding

Sl.	Questions	Coding Categories	Answer
I001	When you feed (NAME) and he refuses to eat, do you usually do something to make him/her eat?	1= Yes; 2= No	
I002	When (NAME) refuses to eat, what do you usually do to encourage him/ her to eat? Tell me certain things that you usually do? There can be multiple responses here, so each response must have a yes/no category.		
I00a	Force him to eat	1= Yes; 2= No	
I00b	Beat	1= Yes; 2= No	
I00c	Threaten	1= Yes; 2= No	
I00d	Caress	1= Yes; 2= No	
I00e	Play with him	1= Yes; 2= No	
I00f	Entertainment	1= Yes; 2= No	

I00g	Give other types of food	1= Yes; 2= No	
I00h	Other (specify)	1= Yes; 2= No	

J. MODIFIED HOME INVENTORY: INFANT TODDLER VERSION			
<i>If no response for any question, write NA as response.</i>			
Caregiver Promotes Child Development			
J001	Do you talk to your child while doing housework? What do you say to him/her? (Note to interviewer: talking/speaking to child means something is said to the child from which he/she can learn something, speaking does not include 'scolding,' or saying 'do this' or 'don't do that.')	Yes=1, No=2	
J002	Do you believe the child's behavior can be changed/ modified or influenced by the parents' behavior?	Yes=1, No=2	
Organization of Physical and Temporal Environment			
J003	Who usually looks after the child when mother is not around? (note: 'not around' is understood to be away from the home for at least more than two hours)	>2 different people = 0 never leaves/ always the same person or no more than 2 different people=1	
J004	A person under 12 years of age sometimes looks after the baby.	Yes, sometimes left alone or with a child <13yrs =0 No always left with someone >12yrs =1	
J005	How often in a week does someone usually take the child to any store?	Less than once a week =0 Once a week or more =1	
J006	Do you regularly take the child to the health clinic to be weighed or to be immunized? (Note to interviewer: regularly means if the child gets the immunization shots at the appropriate ages.)	Yes=1, No=2	
J007	Does the child have a special specific place to keep his/her toys?	Yes=1, No=2	
Opportunities for Variety in Daily Stimulation			
J008	In the last 12 months how many times did your family move from their residing location or house?	More than once = 0 No/Once = 1	
J009	Do you receive any relatives at your home or take your child to their homes? (Note to interviewer: taking child to relatives' homes means to take them outside for at least 4 hours, it is not about taking them outside the house for a short while.)	None or less than twice a month =0 Twice a month or more =1	

J010	Usually how many times in a month do your friends' come to your house, or how many times do you take them to their houses? (Note to interviewer: taking child to friends' homes means to take them outside for at least 4 hours, it is not about taking them outside the house for a short while.)	None or less than twice a month =0 Twice a month or more =1	
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K. Play materials

Interviewer Say: "I am interested in learning about the things that [CHILD] plays with when he is at home. Say to the mother /caretaker: I want to know about the toys that [child] plays with at home. The toys may be home-made (like clay toys, dolls made of cloths, etc.), household materials (like pots and pans, crockeries, pillow, school bag, mobile phone etc.), bought toys, children books/ picture books (can be bought/received from school or someone free of charge) and the child should have access to play with at home during the last month.

Can you please bring me all toys that your child plays with?

(Interviewer: Do not include play at playgroup)

Yes=1, No=2

Sl.	Questions	Yes=1, No=2
K001	In the past 30 days, has [CHILD] played with toys that make or play music (e.g. Instrument, stuffed animals that play melodies or any other toy that make noise, but it should be given to child to play)?	
That makes music like make sound / music, not just noise for example e.g. instruments such as drum, piano, harmonica flute, harmonium, jory, etc. Interviewer Instruction: Instruments can be real instruments or toy instruments. Only included things that are played at home)		
K002	In the past 30 days, has the (CHILD) played with materials for drawing and writing (e.g. coloring picture books, crayons, pencils, pens etc.)?	
K003	In the past 30 days, has [CHILD] played at being using toys or objects something or someone else, such as a Mommy, doctor, teacher, hero using toys or objects (e.g. dolls, tea-set/ cups, toy kitchen set and plates for eating)?	
K004	In the past 30 days, has [CHILD] played with toys that (Gross Motor) encourage movement (e.g. balls, small car, skipping rope, bats, rope for swinging, pull-along,	

	push along etc.)?	
K005	How many pictured books are there which are suitable for child? (Please do not include school books).	
K006	How many books are there in the house? (Please include school books but do not include the pictured books of the children). If there are more than 10 books then record 11.	
K007	How many magazines and newspaper are in the house? If there are more than 10 magazines then record 11	

Interviewer Say: "In the past 3 days did you spend doing the following activities with [CHILD]?" In the past 3 days, did you or any household member (over 15 years of age) engage in any of the following activities with the child (Name).		
If yes who engaged this activity with child?, Mother, Father, or any others adult family members of the household (including the Caregiver). Scoring : Yes=1, No=2, Don't know=9		
K008	Have you read books, including poem books to the child or showed pictured books to him or her? If yes, who engaged in this activity?	
K008a	Mother	
K008.b	Father	
K008c	Any elder household member (over 15 years of age)?	
K009	Have you told stories or nursery rhymes to the child? If yes, who engaged in this activity?	
K009a	Mother	
K009b	Father	
K009c	Any elder household member (over 15 years of age)?	
K010	Have you sung songs (including lullabies) to the child? If yes, who engaged in this activity?	
K010a	Mother	
K010b	Father	
K010c	Any elder household member (over 15 years of age)?	
K011	Have you played toys with the child? If yes, who engaged in this activity?	
K011a	Mother	
K011b	Father	
K011c	Any elder household member (over 15 years of age)?	
K012	Have you spent time with the child naming, counting, and/or drawing things? If yes, who engaged in these activities?	
K012a	Mother	
K012b	Father	
K012c	Any elder household member (over 15 years of age)?	

L. Maternal Depression

Sometimes we feel good and unhappy other times we feel only good.

Now I want to ask you some questions about how you've been feeling this last week. We may not remember how we felt a long time ago. But we can remember recent feelings. Therefore, I will ask you about the last 7 seven days. Explain about the past week (e.g. today is Monday so I want to you tell me how you have been feeling in the past week, from Monday morning to last Sunday night). Whatever we ask you will be kept confidential and will only be used for research purpose.

Sl.	Question	Scoring 0-7days
L001	How many days did you feel so sad?	
L002	How many days did you feel lonely?	
L003	How many days did you feel like crying?	
L004	How many days did you feel enjoyed life?	
L005	How many days did you feel depressed?	
L006	How many days did you feel interest or pleasure in doing things?	

Sl.	Question	
M001	Household profile serial number	
M002	National ID number	
M003	Telephone number	