

## Annex 1: References

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## **Annex 2: Scope of Work**

# **Quantitative Impact Evaluation of the SHOUHARDO II Project in Bangladesh on Household Food and Livelihood Outcomes**

## **Technical Proposal**

**submitted**

**by**

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**to**

**Monzu Morshed**

**Acting Chief of Party**

**SHOUHARDO II Project**

**CARE, Bangladesh**

December 5, 2014

## 1. Introduction

As is now well-documented, child malnutrition represents a fundamental squandering of human potential. In addition to child mortality, it is associated with poor school and work performance and an increased likelihood of overweight, chronic disease and mental health issues among adults. As one might expect, such personally damaging impacts of malnutrition for the world's youngest citizens and their families, along with its intergenerational transmission, have severe consequences for entire economies, dampening economic growth and poverty reduction (Smith and Haddad 2014). The development community is increasingly recognizing that slower-than-expected progress towards reaching the Millennium Development Goals (MDGs) by 2015—including those for poverty, secondary education, child mortality and maternal health—is due, in large part, to lack of investment in children's nutrition (World Bank 2013).

The current momentum within developing countries and internationally to address the problem of child malnutrition has never been higher. The rise of the Scaling Up Nutrition (SUN) movement starting in 2010, and the publication of the *Lancet* Maternal and Child Nutrition Series in 2008 have both served to raise awareness of its extent and consequences. Nutrition has consequently been greatly elevated on the development agenda, and global commitment to reducing malnutrition is stronger than ever (Gillespie and Haddad et. al. 2013). A case in point: "Food Security and Good Nutrition" is one of 12 Development Goals proposed in the UN's High Level Panel on Development After 2015.

Given the above momentum, answers to the question of how to accelerate reductions in child malnutrition in the coming decades are in great demand. A wide evidence base is building regarding the key roles of nutrition-specific interventions, such as micronutrient supplementation and nutrition education, as well as more fundamental, underlying and basic determinants of malnutrition (Bhutta et al. 2013; Ruel et. al. 2013; Haddad 2012; Ruel and Alderman 2013). With regard to the latter, a recent study by Smith and Haddad (2014), for example, demonstrates that improvements in safe water access, sanitation, women's education, gender equality, and the quantity and quality of food available in countries have been key drivers of stunting reductions since the 1970s. Poverty-reducing income growth and advances made in the quality of governance played essential facilitating roles.

The experience of the SHOUHARDO II project in Bangladesh—a country with one of the highest stunting prevalences in the world, at 41 percent of all children under five (Niport et. al. 2013)—provides a unique opportunity to gain insight into how development projects implemented at the local level can contribute to accelerating reductions in child malnutrition. Funded by the United States Agency for International Development and the Government of Bangladesh, SHOUHARDO II (Strengthening Household Ability to Respond to Development Opportunities II) is being implemented by CARE and its Bangladeshi NGO partners in eleven of the poorest and most marginalized districts in Bangladesh. The project takes a novel approach to reducing malnutrition, integrating nutrition-specific interventions with those that address key underlying determinants of stunting using a right-based, livelihoods programming approach (Frankenberger, Drinkwater and Maxwell, 2000). The underlying determinants the project is addressing include the dis-empowerment of women and the poor, low food production and income, poor hygiene conditions, recurrent disasters and environmental (climate) change.

Smith et al. (2012) and TANGO, International (2009) provide evidence that the project's predecessor, the "SHOUHARDO I" project, was exceptionally successful in applying this approach to reduce child stunting. Early indications from the mid-term evaluation of the SHOUHARDO II project are that reductions in stunting in the project's operational area are likely to be similarly strong: the stunting rate among children under five at baseline (December 2010) was 61.7. It had fallen to 52.7 percent (a total of 9 percentage points) by the midterm (December 2012).

Beyond monitoring progress towards strategic objectives and intermediate results, the rich data collected in the SHOUHARDO II baseline, midterm and endline surveys can be drawn on to determine whether and why the project actually brought about these recorded reductions in child stunting. As detailed below, they present the opportunity to conduct a more rigorous evaluation than those collected in conjunction with the SHOUHARDO I project. The data allow methods to be used that can more definitively determine which interventions caused reductions in child malnutrition and which have synergistic impacts with the nutrition-specific interventions implemented, thereby providing valuable lessons for future projects striving to reduce child malnutrition in Bangladesh and other developing countries.

## 2. Research questions

The overall objective of this research project is to determine whether and by how much the SHOUHARDO II project as a whole, and four sets of interventions implemented at the household level, served to reduce stunting among children under five in the project area. The four sets of interventions are:

(1) Nutrition-specific interventions

- Provision of supplementary food rations to pregnant women and women with children under 2
- Nutrition education through Mother's Groups
- Growth monitoring and promotion

(2) Interventions aimed at enhancing women's empowerment

- Empowerment, Knowledge and Transformative Action (EKATA) women's groups

(3) Interventions aimed at increasing food production and incomes

- Training and provision of inputs to promote field crop and fisheries production, homestead gardening, livestock rearing, and cash income generating activities
- Food-for-work
- Cash-for-work
- Savings groups

(4) Interventions aimed at increasing access to safe water and sanitation

- Provision of sanitary latrines
- Provision of tube wells
- Provision of sanitation drains.

An additional objective is to determine whether there are synergistic impacts of the nutrition-specific interventions with those addressing the underlying determinants of malnutrition (2, 3 and 4 above). The

objective will help improve understanding of whether the project's integrated Rights-Based Livelihoods approach made a difference.

The specific questions that will be investigated are:

***Overall impact of the project***

- Did the SHOUHARDO II project's activities cause the reduction in stunting that took place among project beneficiaries over the life of the project?

***Impact of specific types of interventions***

- Did the project's nutrition-specific interventions serve to reduce child stunting?
- Did the project's women's empowerment intervention serve to reduce child stunting?
- Did the project's interventions to increase food production and incomes serve to reduce child stunting?
- Did the project's interventions to improve access to safe water and sanitation serve to reduce child stunting?

***Synergistic impacts***

- Were greater impacts achieved when the project's nutrition-specific interventions were combined with those aimed at enhancing women's empowerment?
- Were greater impacts achieved when the project's nutrition-specific interventions were combined with those aimed at increasing food production and incomes?
- Were greater impacts achieved when the project's nutrition-specific interventions were combined with those aimed at increasing access to safe water and sanitation?

### 3. Methods

Impact evaluation is essentially about determining the extent to which changes in outcomes can be *attributed* to a project or intervention. The two key necessary conditions for an impact evaluation to be conducted in a rigorous manner are that (1) a control group be available so that a counter-factual can be identified; and (2) that the problem of selection bias be addressed (Waddington et. al. 2012). This latter problem arises because, in most cases, either purposeful targeting of project interventions to specific populations (e.g., the most poor) and/or self-selection of participants into interventions takes place. This renders the control group and the "intervention" group fundamentally different from one another even prior to the commencement of project activities.

Survey data collected as part of the SHOUHARDO I project were used to answer similar questions to those being posed here for SHOUHARDO II (see Smith et al. 2012). However, the fact that the data were only collected for project beneficiaries and the questionnaire was designed specifically for performance monitoring and not to conduct an impact evaluation constrained the rigor with which the analysis could be undertaken. Such a situation necessitated that a "mixed-methods" approach, triangulating information from the project data sets with that from various other sources, be used in order to establish evidence of impact. Further, while the evidence was strong, it was necessary to classify it as "suggestive" rather than definitive.

The SHOUHARDO II data sets, by contrast, contain ample data for households that did not participate in the project's interventions at all or only in its MCHN activities, thus providing a pool of potential control

group households.<sup>1</sup> Further, as outlined below, the endline survey can be extended to allow the collection of the data necessary for addressing the problem of selection bias, that is, data on factors affecting households' participation in various interventions. For the SHOUHARDO I analysis only such factors for which data had already been collected were included, leaving out important "unobservable" factors, the exclusion of which can lead to bias in estimates of the impacts of interventions.

The three types of analysis proposed to answer the research questions laid out above are outlined below. The first, a set of descriptive analyses, provides key contextual information about the project's impact on child stunting. The second two—propensity score matching and instrumental variables estimation—allow for a more rigorous evaluation design than was possible using SHOUHARDO I data, and thus a stronger evidence base for the lessons to be learned from the SHOUHARDO approach.

### **3.1 Descriptive analysis of trends in stunting and the age trajectory of stunting**

Following the SHOUHARDO I evaluation protocol, we will use the following descriptive analyses to provide evidence on the overall question:

Did the SHOUHARDO II project's activities cause the reduction in stunting that took place among project beneficiaries between the baseline and endline surveys (December 2010-December 2014)?

1. Comparison of trends in stunting in the project area, and among project participants, compared to those of rural children 0-5 years old nationally. The national data sets that will be employed are Demographic and Health Surveys (DHS) conducted in 2011 and 2014 (forthcoming) and Hellen Keller International (HKI) Food Security and Nutrition Surveillance surveys conducted in 2010 (Round 3), 2012 (Round 9) and 2014.<sup>2</sup> The SHOUHARDO II baseline, mid-term and endline survey data will be used for this analysis.
2. Comparison of the age trajectory of stunting over the 0-5 year old range in the project area, and among project beneficiaries, compared to nationally. The national data employed will be from the 2014 DHS, pending availability. This analysis will help determine whether the typical pattern for children in Bangladesh of a sharp increase in stunting as they age over the six month to two year old range and continually high prevalences thereafter is exhibited among SHOUHARDO II project children. If not, then it can be surmised that the project's activities as a whole had a preventative effect. The endline survey data will be used for this analysis.

### **3.2 Propensity Score Matching and Multiple Treatment PSM**

Propensity Score Matching (PSM) will be used to construct a valid control group to compare with the group of households participating in each set of project interventions being evaluated (the "intervention group"). This control group mimics that which would be used if the project's interventions had been

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<sup>1</sup> See the SHOUHARDO I baseline and mid-term reports for a full explanation of the survey sampling designs.

<sup>2</sup> It has yet to be determined whether and when data were collected by HKI in 2014.

randomly allocated across households in the project area. The impact of interventions is estimated using the difference in the stunting prevalence between the control group and intervention groups. Multi-treatment PSM (MT-PSM) is an extension of PSM that will allow determination of whether there are positive synergies between the nutrition-specific and three other sets of interventions. We will do so following the analysis strategy laid out in Smith et al. (2012). The PSM and MT-PSM analyses will be conducted using the endline survey data.

In PSM, identification of a control group takes place through a matching process using measured indicators of characteristics that are believed to influence participation in the interventions being evaluated as well as those influencing the outcome of interest, in this case stunting. If these *observed* characteristics are the only factors influencing participation, then impact estimates can be deemed unbiased and serve to give valid, causal evidence of impact. However, if *unobserved* characteristics also influence participation, then the estimates will be biased (Khandker et al. 2010). The challenge then, is to collect data on the entire universe of such characteristics so that none can be deemed unobserved.

As noted above, households' and individuals' participation in SHOUHARDO II interventions was influenced by two factors: (1) targeting conducted by project administrators and (2) households' and individuals' own decisions on whether to participate. The SHOUHARDO II endline questionnaire is already set up to capture many of the indicators of participation determinants typically employed in conventional PSM impact analyses (see, for example Raza et. al.'s 2012 evaluation of BRAC). These are:

- Households' socio-economic status
- Household size and age-sex structure
- Education
- Employment status
- Occupation
- Gender of household head
- Region of residence.

Others factors are not typically measured and thus relegated to the "unobservables" category. For the SHOUHARDO II project these fall into the following categories:

- Aspirations and confidence to adapt<sup>3</sup>
- Time constraints
- Strength of social connections
- Women's decision making power in their households
- Indicators of personal familiarity with project staff
- Shock exposure.

To capture these factors and thus render them "observables", an additional module on "Factors affecting participation in the SHOUHARDO II project" will be added to the endline questionnaire.

It is also important for a valid assessment of impact that the characteristics affecting participation used for matching not be affected by project activities themselves. Given that panel data were not collected

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<sup>3</sup> This factor will pick up on any Hawthorn effects (Waddington et. al. 2012), whereby differences in outcomes across the control and intervention groups are influenced by participant motivation as a result of the program itself.

(that is, the baseline and endline surveys were not administered to the same households), for the characteristics listed above that may have been affected by the project retrospective recall data will be collected. That is, households will be asked to answer questions regarding their current situation and then whether (and in some cases, by how much) they feel it has changed over the last five years, since the inception of the project.

Note that as part of the SHOUHARDO II targeting process, each household in the project's operational area, including those not participating in the project, was assigned a "well-being category" (extreme poor, poor, middle, middle-rich, and rich) using Participatory Rural Appraisal techniques. The assignment took place before the baseline survey was administered. Thus retrospective data are not needed for measuring socio-economic status.

### **3.3 Instrumental Variables Estimation**

Instrumental Variables (IV) estimation is an alternative technique that can be used to control for selection bias in the estimation of the impacts of project interventions. It involves identifying a variable (termed an "instrument") that is highly correlated with participation in an intervention but that does not influence the outcome of interest through any other pathway and thus can be deemed "exogenous". Following, two-stage least squares regression is used to estimate the impact of a project or intervention (Khandker et al. 2010).

A number of potentially valid instruments will be used for this impact evaluation.

The first is an indicator of a participation assignment mechanism that took place as part of a Randomized Controlled Trial (RCT) embedded into the sampling design for the SHOUHARDO II surveys. Specifically, villages in the project's operational area were randomly assigned to one of two groups:

- (1) those subject to the traditional SHOUHARDO mechanism for the allocation of food assistance and other MCHN (Maternal and Child Health and Nutrition) interventions, titled "PEP/MCHN", in which only extreme poor or poor households receive assistance; or
- (2) those subject to an alternative allocation mechanism, titled "PM2A" (Preventing malnutrition under two (see Ruel et. al. 2008), whereby all households, regardless of socio-economic status, receive the assistance.

Such an exogenous rule for determining eligibility for the program is likely to have influenced child malnutrition only through its influence on who and who did not participate in the MCHN interventions. It possibly also affected participation in the other project interventions.

Other potential instruments are reported travel time to project activities (for example, EKATA group meetings) and indicators of personal familiarity with project staff, both of which are likely to have influenced child stunting only through influencing project participation decisions.

Current techniques to ensure that the instruments used for IV estimation are relevant or "strong" (correlate sufficiently with participation) and valid (do not affect stunting through channels other than participation) will be employed (see Bazzi and Clemens 2013).

## 4. Research team, time requirements, budget and schedule

### 4.1 Research team

The analysis will be conducted by Lisa Smith and Tim Frankenberger of TANGO, International, who have extensive experience conducting impact evaluations and working on Bangladesh development issues in various capacities.

**Lisa Smith** holds a doctoral degree in Agricultural and Applied Economics from the University of Wisconsin, Madison. Currently a Senior Economist at TANGO International, she specializes in the areas of development economics, food and nutrition security, gender, and project impact evaluation. As an American Association for the Advancement of Science Post-Doctoral Fellow she gained experience providing technical assistance in the area of food security to USAID. While a Research Fellow at the International Food Policy Research Institute, she conducted various studies of the causes of child malnutrition and food insecurity in developing countries using both Demographic and Health Survey data and national-level data to conduct cross-country analyses. In her current position at TANGO she has conducted numerous food and livelihood security assessments as well as impact evaluations of large scale NGO-implemented development projects in Zimbabwe and Bangladesh.

**Timothy Frankenberger** is the President and co-founder of TANGO International (14 years) and has over 30 years of experience in international development activities. He previously was the Senior Food Security Advisor and Livelihood Security Coordinator at CARE for six years. Prior to this he was a farming systems research specialist at the University of Arizona for eight years. He has published numerous articles on household food security and is considered an expert on livelihood approaches and resilience. He received a B.S. in Anthropology from Iowa State University and an M.A. in Anthropology with a minor in Agricultural Economics from the University of Kentucky. Tim also carried out his doctoral studies at the University of Kentucky in Anthropology with a minor in Agricultural Economics.

### 4.2 Time requirements

	Days		
	Lisa Smith	Tim Frankenberger	Total
Development of endline questionnaire modules on participation and factors affecting participation	3.5	1	
Variable creation	4	1	
Descriptive analysis	4		
PSM analysis	4		
Multi-treatment PSM analysis	4		
IV analysis	5		
Write first draft of report	8	1	
Write final draft of report	2.5	1	
	35	4	39

### 4.3 Schedule

The study will be conducted between December 15 and 28 of February, 2015.

### 4.4 Budget

Questionnaire preparation, data analysis, and report write-up

LSmith	35 days x 680/day + VAT(15%)	27,370.00
TFrankenberger	4 days x 690/day + VAT(15%)	3,174.00
Field work: Data collection by Mitra & Associates		9,000.00
	<b>TOTAL</b>	<b>39,544.00USD</b>

## References

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Smith, Lisa C., Faheem Khan, Timothy R. Frankenberger and AKM Abdul Wadud. 2012. Admissible evidence in the court of development evaluation? The impact of CARE's SHOUHARDO project on child stunting in Bangladesh. *World Development* (41): 196-216.

Waddington, Hugh, Howard White, Birte Snilstveit, Jorge Garcia Hombrados, Martina Vojtkova, Philip Davies, Ami Bhavsar, John Evers, Tracey Perez Koehlmoos, Mark Petticrew, Jeffrey C. Valentine and Peter Tugwell. 2012. How to do a good systematic review of effects in international development: a tool kit. *Journal of Development Effectiveness* 4(3): 359-387.

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## **Annex 3: Endline Survey Instrument**

**Quantitative Performance Evaluation**

**Population Based Sample Survey**

**2014**

**for**

**USAID Title II**

**CARE SHOUHARDO II Program**

**Quantitative Questionnaire**



CARE Bangladesh  
SHOUHARDO II Program

and



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**Note for Enumerators:**

- **Insert all data very clearly in the appropriate boxes/cells.**
- **Open ended responses must be entered in Bengali**
- **Use permanent, non-washable and black ink.**
- **Do not use whiteout/fluid.**
- **Do not overwrite.**

## INFORMED CONSENT

Salutation (Assalamualaikum/Namashkar/hello):

My name is \_\_\_\_\_ and I am representing Mitra and Associates, a private consultancy firm that conducts social, livelihood, health and demographic surveys in Bangladesh. With technical support from TANGO International, Mitra Associates will conduct a quantitative performance evaluation population based sample survey for CARE Bangladesh, USAID/FFP, LGRD and Cooperative Ministry funded project Strengthening Household Ability to Respond to Development Opportunities II (SHOUHARDO II).

Your household/you have been selected **by chance** for this interview. Your participation in the survey is **voluntary** and your participation **does not guarantee** that you will be provided any benefits from the project. I would like to collect information on socio-economic condition and mother and child health and anthropometric measures for children U5 of your household.

The survey is voluntary and you/your family can choose not to take part. The information (e.g. age, date of birth, socio-economic status etc.) that you/your family give will be used to prepare reports. The report will be used for the program and will be used as a reference. Please let me know if you are agreed with it or not.

Do you agree to provide me with birthdates and other information of yourself and other household members, with the understanding that the information will be strictly confidential and not released to any organization or individual?

Yes  No  .....if no, thank the respondent and finish the interview

It will need 1-2 hours to complete the interview. Could you please spare some time for the interview?

At this time, do you want to ask me anything about the survey? If you have any question as a participant of this survey, you may contact here:

Address: Director, Mitra and Associates,  
2/17 Iqbal Road, Mohammadpur,  
Dhaka-1207, Bangladesh

Phone: 8118065, 9115503.

Name: Respondent 1 \_\_\_\_\_

Yes  No  End

Name: Respondent 2 \_\_\_\_\_

Yes  No  End

Name: Respondent 3 \_\_\_\_\_

Yes  No  End

Signature of Interviewer: \_\_\_\_\_ Date \_\_\_\_\_

Question Serial					HOUR MINUTE			
Cluster Number					<b>RECORD TIME THE INTERVIEW STARTED</b> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			
HH WBA ID								
HH Unique ID**								

Survey Team's ID				
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*\*\*From household MBL/sample list*

## MODULE A: INFORMATION ON INTERVIEW AND AREA IDENTIFICATION

### Interview information

A1	Date of interview	<input type="text"/>						
		dd	mm	yy	ID	Signature		
A2	Name of Interviewer	1						
A3	Name of Interviewer	2						
A4	Reviewed by (Supervisor/ Name & Code)							
A5	Reviewed by (Team Leader/Name & Code)							
A6	Reviewed by others (Name & Code)							
A7	Data Entry by (Name/Code)							
A8	Data Entry Date							
A9	Data entry checked by (Name/Code)							
A10	Data Entry Checked Date							

### Area Identification (follow MBL/ sample list)

	Area		
A11	Region	Coast .....	
		Haor .....	
		Mid Char .....	
		North Char .....	
A12	District (Use Geo-code)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
A13	Upazila(Use Geo-code)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
A14	Union (Use Geo-code)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
A15	Village (Use Code provided)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
A16	Village Type	MCHN.....	
		PM2A .....	
A17	ECCD	Yes.....	
		No.....	
A18	Savings Group	Yes.....	
		No.....	
A19	Implementing Organization	<input type="checkbox"/> <input type="checkbox"/>	
A20	<b>Interview result</b>	Complete..... 1	
		Incomplete ..... 2 	
		Write reason:	

## PART I: HOUSEHOLD INFORMATION

[**Instruction:** Respondent should be head of household, knowledgeable adult household members, preferably the head of sampled household and spouse]

### MODULE B: RESPONDENT IDENTIFICATION FOR PART- I

	QUESTION	CODE/RESPONSE	SKIP
B1			

	Name of household head: _____ [INSTRUCTION: Use name from the sample list]	
B2	Part I Respondent's name: _____ (Household head if possible)	
B2.1	Part I Respondent Line number (Module C) [INSTRUCTION: Fill in after interview is complete]	<input type="text"/> <input type="text"/>
B3	Relationship to household head (see codes below)	
B4	Part II Respondents Name: _____	
B5	Relationship to household head (see codes below)	
B6	Do you have cell/home phone for your personal/adult household members/household use?	Yes..... 1 No ..... 2 <b>2→B7</b>
B6a	Cell or home phone number of household head or other adult household member	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
B6b	Ownership type of the cell phone / home phone?	Self ..... 1 Family member ..... 2 On request ..... 3 Others (SPECIFY) ..... 4
B6c	Since when are you using this phone?	___ / ___ m m y y y y

B7	Marital status of household head	Married ..... 1 Single ..... 2 Divorced/separated ..... 3 Widowed..... 4	
B8	Disability status of household head  List responses and circle code number of response	Not disabled..... 1 Physically disabled (temporary)..... 2 Physically disabled (permanent)..... 3 Mentally disabled ..... 4	
B9a	Household well-being category  [INSTRUCTION: Extract from HH sample sheet]	Extreme Poor ..... 1 Poor ..... 2 Lower Middle ..... 3 Middle..... 4 Rich ..... 5	
B9b	Household WBA ID  [INSTRUCTION: Extract from HH sample sheet]	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
B9c	Household <b>Unique ID</b>  [INSTRUCTION: Extract from HH sample sheet]	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

**Codes for B3 and B5: Relationship to household head**

- |   |                               |                                  |
|---|-------------------------------|----------------------------------|
| 1= Household head                               | 7= Father                     | 13= Nephew/niece                 |
| 2= Wife of household head                       | 8= Mother                     | 14= Grandfather/Grandmother      |
| 3= Husband of household head                    | 9= Daughter in law/son in law | 15= Grandson/Granddaughter       |
| 4 =Caregiver of children (in absence of mother) | 10= Brother                   | 16= Sister-in-law/Brother-in-law |
| 5= Son  | 11= Sister                    | 17= Brother's wife               |
| 6= Daughter                                     | 12= Father/mother in law      | 18= Others (e.g. servant)        |

## MODULE C: BASIC INFORMATION ON HOUSEHOLD MEMBERS

Circle line number of member

Line number	Name of member  (Start with household head)	Sex  1= Male 2= Female	Age  in years  (write "0" for less than 1 year)	Education  (for ages 6 and up)	Literacy  1= Can read 2 = Can write 3 = Can read and write 4 = Neither	Primary occupation  (see codes below)	Secondary occupation  (see codes below)	Eligible for		
								Part II: women's empowerment  Woman 18 years or older?	Part III: Information on children under 6 years old	
									Child under 6?	Enter line # of caregiver
		C1	C2	C3	C4	C5	C6	C7	C8	C9
1								1	1	<input type="checkbox"/> <input type="checkbox"/>
2								2	2	<input type="checkbox"/> <input type="checkbox"/>
3								3	3	<input type="checkbox"/> <input type="checkbox"/>
4								4	4	<input type="checkbox"/> <input type="checkbox"/>
5								5	5	<input type="checkbox"/> <input type="checkbox"/>
6								6	6	<input type="checkbox"/> <input type="checkbox"/>
7								7	7	<input type="checkbox"/> <input type="checkbox"/>
8								8	8	<input type="checkbox"/> <input type="checkbox"/>

9								9	9	<input type="checkbox"/> <input type="checkbox"/>
10								10	10	<input type="checkbox"/> <input type="checkbox"/>
11								11	11	<input type="checkbox"/> <input type="checkbox"/>
12								12	12	<input type="checkbox"/> <input type="checkbox"/>
13								13	13	<input type="checkbox"/> <input type="checkbox"/>
14								14	14	<input type="checkbox"/> <input type="checkbox"/>
15								15	15	<input type="checkbox"/> <input type="checkbox"/>

**Codes for C3:** 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 pass, 11 = HSC pass, 12 = Graduate, 13 = Masters

**Codes for C5 and C6:** 1 = Farming, 2 = Agricultural day labor/contract labor, 3 = Fishing, 4 = Poultry and livestock rearing, 5 = Non-agricultural day labor/contract labor, 6 = Casual labor, 7 = Regular salaried employment, 8 = Self-employed in business/petty business, 9 = Paid "volunteers", 10 = House work (child care, home care), 11 = Servant/ Maid, 12 = Student, 13 = Beggar, 14 = Old/ Disabled, 15 = Unemployed, 16 = Other.

## MODULE D: HOUSEHOLD ECONOMIC SECURITY

[INSTRUCTION: Head of the household (or knowledgeable adult) is the respondent for Section D]

### Indicators of economic distress

	QUESTION	CODE/RESPONSE	SKIP
D1	Did any resident household member migrate out of the village for part of the last 12 months to find employment?	Yes..... No.....	<b>2→D2</b>
D1.1	If yes, how many members migrated?	<input type="text"/> <input type="text"/> Members	
D1.2	What was the longest time any one person was gone (in days)	<input type="text"/> <input type="text"/> <input type="text"/> Days	
D2	Did any resident household member sell labor in advance for part of the last 12 months?	Yes..... No.....	
D3	Did any resident household member take out an interest bearing loan from non-formal sources in the last 12 months?	Yes..... No.....	

### Housing Characteristics

	QUESTION	CODE/RESPONSE	SKIP
D4	What is the main construction material of the walls of your main house?  [INSTRUCTION: Observe and circle code number of response]	Brick ..... C.I. Sheet / wood..... Mud wall ..... Bamboo..... Straw/jute stick/leaves ..... Thatched bamboo/polythene ..... Other.....	

	QUESTION	CODE/RESPONSE	SKIP
D5	What is the main construction material of the roof of your main house?  <b>[INSTRUCTION: Observe and circle code number of response]</b>	Concrete..... C.I. Sheet/wood..... Tiles ..... Bamboo ..... Straw/jute stick/leave ..... Thatched bamboo/polythene ..... Other .....	
D6	How many rooms do you have for your family to live in your house?	<input type="text"/> <input type="text"/> Rooms	

### Ownership and sales of assets

	Asset	D7	D8
		Number currently owned	Sales in last year
	Now I'm going to ask you about some of the items you own in your house. How many (____) do you own?  <b>[INSTRUCTION: If do not own, write "0"]</b>		D8_1. Did you sell any of these kinds of items in the last year?
<b>Domestic assets</b>			
1A	Chairs		Yes ..... 1 No ..... 2 DNK..... 8
1B	Khat		
1C	Cupboard		
1D	Tables		
1E	Show case		
1F	Dressing table		
1G	Watch		
1H	Clock		
1I	Lantern		
1J	Radio		

1K	TV		
1L	Cassette player		
1M	Electric fan		
1N	Mobile Phone		
1O	Gold ornaments/jewelry (ana)		
1P	Silver ornaments/jewelry (ana)		
	Now I'm going to ask you about some of the transportation and agricultural items you own. How many (____) do you own? <b>[INSTRUCTION: If do not own, write "0"]</b>		D8_2. Did you sell any of these kinds of items in the last year?
<b>Transport/Agricultural Assets</b>			
2A	Boat		
2B	Motorcycle		
2C	Rickshaw/van		
2D	Bicycle		
2E	Shallow / hand tube well		
2F	Power tiller		
2G	Paddle thresher		Yes ..... 1
2H	Spray machine		No ..... 2
2I	Plough		DNK..... 8
2J	Fishing net		
2K	Pump		
2L	Hoe		
2M	Axe		
2N	Shovel/spade		
2O	Weedier		
2P	Power thresher		
	Now I'm going to ask you about the farm animals you own. How many (____)do you own? <b>[INSTRUCTION: If do not own, write "0"]</b>		D8_3. Did you sell any of animals in the last year?
<b>Animal Assets</b>			

3A	Cow		Yes ..... 1 No ..... 2 DNK..... 8
3B	Buffalo		
3C	Goat		
3D	Sheep		
3E	Chicken		
3F	Duck		
3G	Pigs		

	Now I'm going to ask you about the trees and plants you own. How many(_____) do you own?  <b>[INSTRUCTION: If do not own, write "0"]</b>	D8_4. Did you sell any of these trees or plants in the last year?
<b>Trees and Plants</b>		
4A	Timber tree	Yes ..... 1 No ..... 2 DNK..... 8
4B	Fruit tree	
4C	Bamboo tree	
4D	Medicinal plants	

### Land ownership

How much of these types of land do you own (in decimals)?

	QUESTION	CODE/RESPONSE	SKIP
		Amount owned (Decimals)	
D9A	Own homestead land	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9B	Own agricultural land	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9C	Land lease-IN	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9D	Land lease-OUT	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9E	Mortgage-IN	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9F	Mortgage-OUT	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	

	QUESTION	CODE/RESPONSE	SKIP
D9G	Haor (extended marsh)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9H	Pond/ditch	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D9I	Other type of land	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/>	
D10	Did anyone in your household sell any assets in the last year in order to be able to purchase food, pay for medicine, pay school fees, or meet any other urgent household need?	Yes .....1 No .....2 DNK.....8	<b>2,8→D12</b>
D11	How much money did you get from selling assets for these things? (Taka)	Taka ..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DNK.....98	

## Household income/Earnings

D12	<p>Did any resident household member bring cash income into the household in the last year? <b>If yes, then write their name and line no. in following column. If necessary, see module C columns C5,C6.</b></p>	<p>Yes .....1          No .....2          DNK.....8          NR .....9</p>	<p><b>2,8,9→D18A</b></p>
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	What activities did you make money from in last year?  <b>For each activity, record number of months and monthly income. Prompt for more activities till respondent indicates no more. (if less than 1 month, enter 1)</b>	Number of months in different activities and (net) income for last 12 months									
		Person 1		Person 2		Person 3		Person 4		Person 5	
		Name _____		Name _____		Name _____		Name _____		Name _____	
		Line number from		Line number from		Line number from		Line number from		Line number from Module C	
		Module C <input type="text"/> <input type="text"/>		Module C <input type="text"/> <input type="text"/>		Module C <input type="text"/> <input type="text"/>		Module C <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/>	
# of months	Monthly Income (Taka)	# of months	Monthly Income (Taka)	# of months	Monthly Income (Taka)	# of months	Monthly Income (Taka)	# of months	Monthly Income (Taka)		
D13.1	D13.2	D14.1	D14.2	D15.1	D15.2	D16.1	D16.2	D17.1	D17.2		
a	Agricultural day labor										
b	Agricultural contract labor										
c	Non-agricultural day labor										
d	Non-agricultural contract labor										
e	Casual labor										
f	Regular salaried employment										
g	Self-employment in business/service provision										
h	Petty business										
i	Business, using hired labor										
j	Paid "volunteer"										

k	Rickshaw/rickshaw van pulling										
l	Boatman										
m	Working as servant/maid										
n	Begging										
o	Cash-for-work										
p	Student stipend (including cash value of food received)										
q	Others (specify)										

Other source		Income (Taka)	
D18a	How much income did your household receive from remittances in the last year?	<input type="text"/>	
D18b	from gifts in the last year?	<input type="text"/>	
D18c	from pensions/retirement fund?	<input type="text"/>	
D18d	from leases?	<input type="text"/>	
D18e	sales of agricultural products?	<input type="text"/> <input type="text"/> If "0", skip to D18_g	
D18f	How much did you spend on agricultural inputs (e.g., seeds, fertilizer, etc) in the last year?	<input type="text"/>	
D18g	How much income did your HH receive from sales of animals or animal products (including cattle, poultry and fish) in the last year	<input type="text"/> <input type="text"/> If "0", skip to D19_a	
D18h	How much did you spend on inputs needed to raise the animals (e.g., feed, veterinary services) in the last year?	<input type="text"/>	

### Remoteness and access to markets

	QUESTION	CODE/RESPONSE	SKIP
D19a	How long would it take to walk to the nearest town?	Less than 30 minutes .....1 30 minutes to 1 hour .....2 1 to 2 hours.....3 More than 2 hours.....4 DNK .....8	

	QUESTION	CODE/RESPONSE	SKIP
D19b	How long would it take to walk to _____ (Upazilla/thana headquarter)?	Less than 30 minutes .....1 30 minutes to 1 hour .....2 1 to 2 hours.....3 More than 2 hours.....4 DNK .....8	
D19c	Did anyone in your household buy any food in the last year?	Yes .....1 No .....2 DNK .....8	<b>2,8→ D19e</b>
D19d	How long does it take to walk to a place to buy food?	Less than 30 minutes .....1 30 minutes to 1 hour .....2 1 to 2 hours.....3 More than 2 hours.....4 DNK .....8	
D19e	Some people have their own businesses making things to sell like baskets, rugs or furniture. Does anyone in your household do this?	Yes .....1 No .....2	<b>2 → D19g</b>
D19f	How long does it take to walk to the place to sell these things?	Less than 30 minutes .....1 30 minutes to 1 hour .....2 1 to 2 hours.....3 More than 2 hours.....4 Sell at home (0 minutes).....5 DNK .....8	
D19g	Do you ever sell food that you grow?	Yes .....1 No .....2 Don't grow food .....3 Refused to respond .....8	<b>2,3,8→D19i</b>
D19h	How long does it take to walk to the place to sell the food, for example to a market or to a buyer pick-up location?	Less than 30 minutes .....1 30 minutes to 1 hour .....2 1 to 2 hours.....3 More than 2 hours.....4 DNK .....8	
D19i	Do you ever buy inputs for crop production like seeds and fertilizer?	Yes .....1 No .....2 DNK .....8	<b>2,8→D20</b>

	QUESTION	CODE/RESPONSE	SKIP
D19j	How long does it take to walk to the nearest place to buy inputs such as seeds and fertilizer?	Less than 30 minutes .....1 30 minutes to 1 hour .....2 1 to 2 hours.....3 More than 2 hours.....4 DNK .....8	

## Household loans

	QUESTION			CODE/RESPONSE		SKIP
D20	How many loans does your household currently have? [INSTRUCTION: Write total loans]			<input type="text"/> <input type="text"/>	00 = No loans 99 = Refuse to respond	00, 99 → D27
<b>Details by loan</b>						
Loan #	Sex of the household member who took out the loan	What was the source of the loan?	What was the <b>main</b> reason for taking out the loan?	Total amount borrowed (Taka)	Amount of loan still outstanding (Taka)	Rate of interest paid/agreed upon (%)
	1 = Male 2 = Female					
	D21	D22	D23	D24	D25	D26
1	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
4	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>
5	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

	QUESTION	CODE/RESPONSE	SKIP
	<b>Codes for D22: Source of loan</b>	<b>Codes for D23: Main reason of taking out the loan</b>	
	Money lender/pawnshop..... 1	Purchase agricultural tools..... 1	Wedding ..... 11
	Bank/formal lending institution ..... 2	Purchase agricultural inputs..... 2	Bride price/Dowry ..... 12
	Informal savings group..... 3	Land purchase ..... 3	Funeral ..... 13
	Neighbor/friend/relative..... 4	Livestock purchase ..... 4	Religious event ..... 14
	NGO/CBO ..... 5	Purchase of other productive assets ..... 5	Loan repayment ..... 15
	Trader/grocer..... 6	Purchase of non-productive assets ..... 6	Legal dispute/expenses ..... 16

**Household Savings**

	QUESTION	CODE/RESPONSE	SKIP
D27	Does any member of your household have any cash savings (money put aside for some future use)?	Yes..... 1 No..... 2 DNK 8 Refused to respond.....9	<b>2,8,9→E1</b>
	<b>Savings #1</b>		
D28.1	Sex of person saving Name: _____ Roster Line Number: _____	Male..... 1 Female ..... 2 All household..... 3	
D29.1	Main method of saving used	Bank .....1 Savings Scheme/ Coops .....2 Savings or credit group .....3 Post Office.....4	

	QUESTION	CODE/RESPONSE	SKIP
		Home .....5 Insurance company .....6 NGO .....7  Other (specify) .....8  DNK 9	
D30.1	Total amount of Taka in savings	Taka..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
D31.1	Reasons for saving  <b>[MULTIPLE RESPONSES]</b>	To buy household goods .....1 To start/help busines .....2 To buy land/house .....3 For education/training .....4 For marriage .....5 To build/repair house .....6 To pay interest from lending .....7 Difficult times .....8 To meet medical expenses .....9 To replace lost assets .....10 To purchase large asset .....11 To meet children's needs .....12 To meet all members needs .....13 Other .....14 DNK .....98	
	<b>Savings #2</b> <b>[INSTRUCTION: If household has only one form of savings skip additional savings and skip to E1]</b>		
D28.2	Sex of person saving Name: _____ _ Roster Line Number: _____	Male ..... 1 Female ..... 2 All household ..... 3	

	QUESTION	CODE/RESPONSE	SKIP
D29.2	Main method of saving used	Bank .....1 Savings Scheme/ Coops .....2 Savings or credit group .....3 Post Offices .....4 Home .....5 Insurance company .....6 NGO .....7  Other (specify) .....8  DNK .....9	
D30.2	Total amount of Taka in savings	Taka..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
D31.2	Reasons for saving  <b>[MULTIPLE RESPONSES]</b>	To buy household goods .....1 To start/help busines .....2 To buy land/house .....3 For education/training .....4 For marriage .....5 To build/repair house .....6 To pay interest from lending .....7 Difficult times .....8 To meet medical expenses .....9 To replace lost assets .....10 To purchase large asset .....11 To meet children's needs .....12 To meet all members needs .....13 Other .....14 DNK .....98	
<b>Savings #3</b> <b>[INSTRUCTION: If household has only two forms of savings skip to E1]</b>			
D28.3	Sex of person saving Name: _____ _	Male ..... 1 Female ..... 2 All household ..... 3	

	QUESTION	CODE/RESPONSE	SKIP
	Roster Line Number: _____		
D29.3	Main method of saving used	Bank .....1 Savings Scheme/ Coops .....2 Savings or credit group .....3 Post Offices .....4 Home .....5 Insurance company .....6 NGO .....7  Other (specify) .....8  DNK ..... 9	
D30.3	Total amount of Taka in savings	Taka..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
D31.3	Reasons for saving?  <b>[MULTIPLE RESPONSES]</b>	To buy household goods ..... 1 To start/help busines ..... 2 To buy land/house ..... 3 For education/training ..... 4 For marriage ..... 5 To build/repair house ..... 6 To pay interest from lending..... 7 Difficult times ..... 8 To meet medical expenses ..... 9 To replace lost assets ..... 10 To purchase large asset..... 11 To meet children's needs ..... 12 To meet all members needs..... 13 Other ..... 14 DNK ..... 98	

**MODULE E. ACCESS TO SOCIAL SERVICES AND COMMON PROPERTY RESOURCES**

**Access to and use of social services**

**Which of the following services are available in your village/union?**

[INSTRUCTION: List each service one-by-one and record answers. If answer is “yes” for either a or b, ask question on utilization (c) and circle appropriate code. Respondent for this module is Head of Household or Knowledgeable Adult]

	Type of Service	Available in village	Available in union	Utilization
		Yes.....1	Yes ..... 1	Frequently .....1
		No .....2	No ..... 2	Sometimes.....2
		DNK .....3	DNK..... 3	Never .....3

			[If 2,3 in both A and B, <b>SKIP</b> C and go to Next]	DNK .....8 NR/NO .....9
		<b>A</b>	<b>B</b>	<b>C</b>
E1	Primary health care services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E2	Family planning services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E3	Primary school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E4	Pre-school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E5	Union Parishad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E6	GrammoShalish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Services from the Government provided by the ...</b>				
E7	Department of Social Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E8	Department of Women's Affairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E9	Department of Agriculture Extension (DAE)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E10	Department of Fisheries (DOF)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E11	Department of Livestock (DOL)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E12	Government Land Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E13	BADC seed department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E14	Department of Youth Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E15	Department of Cooperatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E16	Government Family Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E17	Government immunization services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Community clinic</b>				
E17X	Community Clinic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IF E17X_A and E17X_B both 2 or 3 SKIP to E18				

	QUESTION	CODE/RESPONSE	SKIP
E17X.1	How many days per week does the community clinic in your locality provide services?  DNK = 9	<input type="checkbox"/>	
E17X.2	Did you (any household member) receive any service from the community clinic in last 12 months?	Yes ..... 1 No ..... 2 DNK..... 8	<b>2,3→E18</b>
E17X3	What type of services did you/your household members receive in last 12 months?	Antenatal Care services (ANC)..... 1 Post-natal Care services (PNC) ..... 2 Newborn care services ..... 3 Measuring child weights/GMP ..... 4	

	QUESTION	CODE/RESPONSE	SKIP
	[MULTIPLE RESPONSE]	For diarrhea/cough/cold ..... 5 For immunization ..... 6 Family planning services..... 7 For newly married couple registration ..... 8 For pregnant women registration ..... 9 For birth/death registration ..... 10 Nutrition education ..... 11 Iron table, vitamin-A, deworming tablet..... 12 Health and family planning education and counseling ..... 13 Identification of infectious disease (TB, Malaria etc.) 14 Referrals ..... 15 Others (Specify) ..... 16 DNK 98	
E17X4	How do you rate the services that you or another household member received from the community clinic?	Highly satisfied ..... 1 Somewhat satisfied ..... 2 Neutral..... 3 Not very satisfied..... 4 Not at all satisfied..... 5 DNK 9	

**Participation in social safety nets**

	QUESTION	CODE/RESPONSE	SKIP

E18	<p>In the last 12 months did your household receive assistance from any of the following programs?</p> <p><b>[INSTRUCTION: Read all programs]</b></p>	<p style="text-align: right;"><u>Yes=1, No=2</u></p> <ol style="list-style-type: none"> <li>1. Government VGD ..... <input type="checkbox"/></li> <li>2. Government VGF ..... <input type="checkbox"/></li> <li>3. Govt. cash-for-work..... <input type="checkbox"/></li> <li>4. "100 days work..... <input type="checkbox"/></li> <li>5. "40 days work..... <input type="checkbox"/></li> <li>6. Aged allowance ..... <input type="checkbox"/></li> <li>7. Widow allowance ..... <input type="checkbox"/></li> <li>8. Disability allowance..... <input type="checkbox"/></li> <li>9. Maternal allowance..... <input type="checkbox"/></li> <li>10. Non-Govt cash-for- work..... <input type="checkbox"/></li> <li>11. Non-Govt food-for-work ..... <input type="checkbox"/></li> <li>12. Community based savingsgroup ..... <input type="checkbox"/></li> <li>13. Self-help group ..... <input type="checkbox"/></li> <li>14. SHOUHARDO II ..... <input type="checkbox"/></li> <li>15. Other ..... <input type="checkbox"/></li> </ol>

### **Access to and use of common property resources**

**[INSTRUCTION:** Read each item one-by-one and fill in response codes in column a. Next, for all items with response “yes”, fill in response code for column b. For all items with response “yes” in column b, fill in codes in column c. If “no” then ask next item.]

E19. Which of the following common properties are available and used by members of your household?

		<u>Available</u>	<u>Utilized</u>	Activities
		Yes ..... 1 No ..... 2 DNK..... 8	Yes ..... 1 No..... 2 DNK ..... 8	(see codes)
		<b>A</b>	<b>B</b>	<b>C</b>
E19.1	Roadside sloping	<input type="checkbox"/> 2,9 → E19.2	<input type="checkbox"/> 2,9 → E19.2	<input type="checkbox"/>
E19.2	Embankments	<input type="checkbox"/> 2,9 → E19.3	<input type="checkbox"/> 2,9 → E19.3	<input type="checkbox"/>
E19.3	Railway grounds	<input type="checkbox"/> 2,9 → E19.4	<input type="checkbox"/> 2,9 → E19.4	<input type="checkbox"/>
E19.4	Beel/Haor	<input type="checkbox"/> 2,9 → E19.5	<input type="checkbox"/> 2,9 → E19.5	<input type="checkbox"/>
E19.5	River/Canal	<input type="checkbox"/> 2,9 → E19.6	<input type="checkbox"/> 2,9 → E19.6	<input type="checkbox"/>
E19.6	CBO water body	<input type="checkbox"/> 2,9 → E19.7	<input type="checkbox"/> 2,9 → E19.7	<input type="checkbox"/>
E19.7	Grazing land	<input type="checkbox"/> 2,9 → E19.8	<input type="checkbox"/> 2,9 → E19.8	<input type="checkbox"/>
E19.8	Forest land	<input type="checkbox"/> 2,9 → E19.9	<input type="checkbox"/> 2,9 → E19.9	<input type="checkbox"/>
E19.9	Hills	<input type="checkbox"/> 2,9 → E19.10	<input type="checkbox"/> 2,9 → E19.10	<input type="checkbox"/>
E19.10	Khas pond	<input type="checkbox"/> 2,9 → E19.11	<input type="checkbox"/> 2,9 → E19.11	<input type="checkbox"/>
E19.11	Khas land	<input type="checkbox"/> 2,9 → E19.12	<input type="checkbox"/> 2,9 → E19.12	<input type="checkbox"/>

E19.12	Other _____	<input type="checkbox"/> 2,9→ E19.13	<input type="checkbox"/> 2,9→ E19.13	<input type="checkbox"/>
E19.13	Other _____	<input type="checkbox"/> 2,9→ E19.14	<input type="checkbox"/> 2,9→ E19.14	<input type="checkbox"/>
<b>Codes for column C</b>				
	Fishing ..... 1	Collecting soil ..... 8		
	Collecting aquatic animals ..... 2	Collecting water ..... 9		
	Collecting aquatic foods..... 3	Crop cultivation..... 10		
	Irrigation ..... 4	Fish culture..... 11		
	Grazing ..... 5	Tree plantation ..... 12		
	Collecting fruit ..... 6	Other ..... 13		
	Collecting firewood ..... 7			

**MODULE F. DISASTER RISK MANAGEMENT AND CLIMATE CHANGE**

(Instruction: Respondent is the Head of Household or Knowledgeable Adult)

	QUESTION	CODE/RESPONSE	SKIP
	<b>Disaster risk management</b>		
F1	In the last 12 months, what type(s) of natural disasters were experienced by your household?  <b>[MULTIPLE RESPONSE]</b>	A. Heavy rains .....01 B. Wildfire .....02 C. Hurricane.....03 D. Wind storms .....04 E. Erosion (river, wind) .....05	

	QUESTION	CODE/RESPONSE	SKIP
	[DO NOT READ THE ANSWERS]	F. Earthquake .....06 G. Cyclone .....07 H. Floods .....08 I. Cold wave .....09 J. Hail .....10 K. Draught.....11 L. Other .....12 M. None .....13 N. DNK.....98	
F2	What was the <u>most</u> recent natural disaster your household experienced?  [SINGLE RESPONSE]  [DO NOT READ THE ANSWERS]	Heavy rains .....01 Wildfire .....02 Hurricane.....03 Wind storms .....04 Erosion (river, wind) .....05 Earthquake .....06 Cyclone .....07 Floods .....08 Cold wave .....09 Hail .....10 Draught.....11 Other .....12 None .....13 DNK.....98	13,98→F15
F3	In what year did you experience this disaster?	Year..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
F4	How did the most recent disaster affect your household?  [MULTIPLE RESPONSE]  [DO NOT READ THE ANSWERS]	A. Loss of family member .....01 B. Loss of livelihood .....02 C. Loss of home .....03 D. Physical disability/injury.....04 E. Loss of assets .....05 F. Loss of Latrine/Drainage .....06 G. Loss of water supply .....07 H. Disease .....08 I. Crop Loss .....09 J. Having to care for others.....10	

	QUESTION	CODE/RESPONSE	SKIP
		K. Additional household members .....11 L. Stress/anxiety/fear .....12 M. Other .....13 N. No effect.....14 O. DNK.....98	14,98→F6
F5	How did your household cope with the most recent disaster?  <b>[MULTIPLE RESPONSE]</b>  <b>[DO NOT READ THE ANSWERS]</b>	A. Loan from neighbors/relatives .....01 B. Loan from money lender .....02 C. Loan from NGO .....03 D. Loan form bank.....04 E. Reduced # or quantity of meals.....05 F. Mortgaged farmland out .....06 G. Leased farmland out .....07 H. Sold HH productive assets (tools, livestock, vehicles, etc.) .....08 I. Sold other household assets (furniture, radios, jewelry, etc.) .....09 J. Sold agricultural products in advance or low price.....10 K. Sold advance male labor.....11 L. Sold advance female labor .....12 M. Sold farmland.....13 N. Sold homestead land .....14 O. Ate famine foods .....15 P. Accepted aid .....16 Q. Accepted help from others .....17 R. Migrated .....18 S. Used savings .....19 T. Purchased goods on credit .....20 U. Postpone medical treatment.....21 V. Sent child to work.....22 W. Other.....23 X. No Coping .....24 Y. DNK.....98	

	QUESTION	CODE/RESPONSE	SKIP
F6	<p>What could have been done differently to reduce the impact of future disasters in your community?</p> <p><b>[MULTIPLE RESPONSE]</b></p> <p><b>[DO NOT READ THE ANSWERS]</b></p>	<p>A. Structural improvement to home .....01</p> <p>B. Improvement to infrastructure (shelters, roads, bridges) .....02</p> <p>C. Community disaster response plan.....03</p> <p>D. Food stocks .....04</p> <p>E. Water stocks .....05</p> <p>F. Medical supplies stocks.....06</p> <p>G. First aid training .....07</p> <p>H. Increased collaboration/ coordination w/ neighbors .....08</p> <p>I. Increased collaboration/ coordination with communities.....09</p> <p>J. Better forecasting .....10</p> <p>K. Earlier/better warning .....11</p> <p>L. Increased collaboration/ coordination w/ local govt .....12</p>	

	QUESTION	CODE/RESPONSE	SKIP
		M. Income alternatives/more diversified income.....13 N. Evacuation routes/plans .....14 O. Improved alternative modes of communication (i.e. shortwave radio, etc.) .....15 P. Other .....16 Q. Nothing .....17 R. DNK .....98	
F7	Did you receive any early warning signal/message before the last natural disaster (you had in your area)?	Yes .....1 No .....2	<b>2→F10</b>
F8	How long before the disaster did you receive the warning signal message?	<input type="text"/> <input type="text"/> <input type="text"/> minutes <input type="text"/> <input type="text"/> <input type="text"/> hours [Don't know "000"]	
F9	Who gave the early/signal message?  [MULTIPLE RESPONSE]	A. CPP volunteers .....01 B. Radio .....02 C. Television .....03 D. Union parishad .....04 E. VDC.....05 F. Disaster management committee .....06 G. Disaster volunteers .....07 H. NGOs .....08 I. Mosque miking.....09 J. Neighbor/relatives .....10 K. Other (Specify) .....11	
F10	Did you/your household members move to	Yes .....1	<b>1→F12</b>

	QUESTION	CODE/RESPONSE	SKIP
	another place to take shelter before/after the last natural disaster?	No.....2	
F11	If no, why not?  <b>[MULTIPLE RESPONSE]</b>	A. No shelter.....01 B. No space available in the shelter .....02 C. Shelter not functional .....03 D. Did not receive messages .....04 E. No transport.....05 F. Did not want .....06 G. To protect home/assets.....07 H. Live in protected house.....08 I. Not required.....09 J. Others .....10 K. DNK .....98	<b>Any→F15</b>
F12	Where did you move to take shelter before/after the last natural disaster?  <b>[MULTIPLE RESPONSE]</b>	A. <b>'Pacca' House (cement)</b> .....01 B. 'Kacha' house .....02 C. <b>Cyclone or flood shelter</b> .....03 D. Union parishad building .....04 E. School/institution building.....05 F. Boat.....06 G. Highways/ Embankment .....07 H. Raised hillock .....08 I. Mosque/Temple/Church.....09 J. Market place .....10 K. Other (SPECIFY) .....11	
F13	Did anybody help you to take shelter?	Yes .....1 No.....2 DNK .....8	<b>2,8 →F15</b>
F14	Who did help you out to take shelter?	A. CPP volunteers .....1 B. Union parishad.....2 C. VDC.....3 D. Disaster management committee .....4 E. Disaster volunteers .....5	

	QUESTION	CODE/RESPONSE	SKIP
	[MULTIPLE RESPONSE]	F. NGOs .....6 G. Neighbor/relatives .....7 H. Other (Specify) .....8 I. DNK .....98	
F15	Are you aware of any members of the community trained to help you during disaster?	Yes .....1 No .....2	<b>2→F17</b>
F16	Who are they?  [MULTIPLE RESPONSE]	A. CPP volunteers .....01 B. Union parishad chairman/member .....02 C. NGOs .....03 D. Teacher .....04 E. Students .....05 F. Village leaders .....06 G. Village Development Committee .....07 H. Disaster volunteers .....08 I. Other (specify) .....09	
F17	Have you or any member of your HH received any disaster preparedness training?	Yes .....1 No .....2	<b>2→F19</b>

F18	Who provided the training?  [MULTIPLE RESPONSE]	A. CPP volunteers.....01 B. Union parishad chairman/member .....02 C. NGOs.....03 D. Teacher .....04 E. Students.....05 F. Village leaders .....06 G. Village Development Committee .....07 H. Disaster volunteers.....08 I. Other (specify) .....09	
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F19	What do you plan to with your household members in the event of a disaster (cyclone/flood/other natural)?  <b>[MULTIPLE RESPONSE]</b>	A. Evacuation of vulnerable members ..... 01 B. Visit shelter centers in normal time ..... 02 C. Identify safe shelter center ..... 03 D. Plan for dry food ..... 04 E. Plan to protect HH valuables/assets ..... 05 F. Identify safe shelter for livestock ..... 06 G. Other (Specify) ..... 07 H. No plan ..... 08 I. Don't know ..... 98	
F20	Do you consider disaster risk as an issue of your daily activities?	Yes..... 1 No ..... 2 DNK..... 8	<b>2,8 →F22</b>
F21	If yes, in which activities?  <b>[MULTIPLE RESPONSE]</b>	A. Cultivation - time, seed selection ... 1 B. House construction/repair ..... 2 C. food preservation ..... 3 D. Other(Specify) ..... 4	
<b>Climate change</b>			
F22	Do you think the climate is changing in your area?	Yes..... 1 No ..... 2 No opinion/DNK..... 8	<b>2,8 →G1</b>
F23	If yes, in what ways do you think it is changing?	A. It is becoming warmer ..... 1 B. It is becoming colder ..... 2 C. It is becoming dryer ..... 3 D. It is becoming wetter ..... 4 E. Rains are more unpredictable ..... 5 F. Rains are coming earlier ..... 6	

	<b>[MULTIPLE RESPONSE]</b>	G. Rains are beginning later ..... 7	
		H. Rains are stopping earlier ..... 8	
		I. Rains are stopping later ..... 9	
	<b>[DO NOT READ THE ANSWERS]</b>	J. Temperatures are unpredictable..... 10	
		K. Strong winds are more common ..... 11	
		L. Other (Specify)..... 12	

## MODULE G. HOUSEHOLD FOOD SECURITY

### Food consumption

**[INSTRUCTION:** The respondent should be an adult female knowledgeable about food in the household. If currently administering survey to male head of household, continue with module H, and return to complete this module once module J2 is completed]

**[INTRODUCTION:** Now I would like to ask you about the types of foods that you or anyone else in your household ate yesterday during the day or at night. Please include all foods, including the foods eaten here at your house or somewhere else (e.g., other homes, street stalls, given by employer.)

**Read the list of foods one-by-one and record coded response.**

	QUESTION	CODE/RESPONSE	SKIP
G1	Any cereals (e.g. rice, bread, wheat, wheat bread, rice flakes, puffed rice, barley, wheat grain, popcorn)?	Yes .....1 No .....2	
G2	Any pumpkin, carrots, squash, or sweet potatoes or vegetables that are yellow or orange inside?	Yes .....1 No .....2	
G3	Any white potatoes, white yams or other foods made from roots and tubers?	Yes .....1 No .....2	

	QUESTION	CODE/RESPONSE	SKIP
G4	Any dark green, leafy vegetables, (e.g., ipomoea, amaranth, spinach, parwar sag, and drumstick leaves)?	Yes .....1 No .....2	
G5	Any other vegetables, (e.g. cucumber, radish, pepper, string beans, cabbage, cauliflower, radish, onion)?	Yes .....1 No .....2	
G6	Any ripe papaya, mangoes or other fruits that are yellow or orange inside?	Yes .....1 No .....2	
G7	Any other fruits, (e.g. banana, papaya, sithphal, grapefruit, apple, orange, jackfruit, jambu fruit, plums, melon, tomato, date, lemon, etc.)?	Yes .....1 No .....2	
G8	Any meat, such as, liver, beef, poultry, lamb, pork, etc.?	Yes .....1 No .....2	
G9	Any Egg?	Yes .....1 No .....2	
G10	Any fresh or dried fish or shellfish?	Yes .....1 No .....2	
G11	Any legumes/pulses, (e.g. Bengal gram, black gram dal, lentil, Khesarl)?	Yes .....1 No .....2	
G12	Any Milk or Milk products, (e.g. cow milk, buffalo milk, goat milk, yogurt, curd, cheese)?	Yes .....1 No .....2	
G13	Any foods prepared using fat,, e.g., oil, butter, dalda or ghee?	Yes .....1 No .....2	

	QUESTION	CODE/RESPONSE	SKIP
G14	Any sweet foods? e.g. sugar, gur, honey, Chocolate?	Yes .....1 No .....2	
G15	Any other foods such as condiments, coffee, tea?	Yes .....1 No .....2	

### Months of Insufficient Food

[INSTRUCTION: the respondent should be an adult female if possible.]

	QUESTION	CODE/RESPONSE	SKIP
G15.1	Now I would like to ask you about your household's food supply during different months of the year. When answering these questions, please think back over the last 12 months, from now to the same time last year. Were there months, in the past 12 months, in which you did not have enough food to meet your family's needs?	Yes ..... 1 No ..... 2	<b>2→G17.1</b>
	Which were the months in the past 12 months in which you did not have enough food to meet your family's needs? This includes any kind of food, such as food you produced yourself, food purchased, food given to you by others, food aid, or food you borrowed.  <b>INSTRUCTION:</b> <ul style="list-style-type: none"> <li>Do not read the list of months</li> <li>Place a "1" in the box if the respondent mentions the month. If the respondent does not mention the month, place a "2" in the box.</li> </ul>		

	QUESTION	CODE/RESPONSE	SKIP
G16.1	January	<input type="checkbox"/>	
G16.2	February	<input type="checkbox"/>	
G16.3	March	<input type="checkbox"/>	
G16.4	April	<input type="checkbox"/>	
G16.5	May	<input type="checkbox"/>	
G16.6	June	<input type="checkbox"/>	
G16.7	July	<input type="checkbox"/>	
G16.8	August	<input type="checkbox"/>	
G16.9	September	<input type="checkbox"/>	
G16.10	October	<input type="checkbox"/>	
G16.11	November	<input type="checkbox"/>	
G16.12	December	<input type="checkbox"/>	

### Household Hunger

	QUESTION	CODE/RESPONSE	SKIP
G17.1	In the last 4 weeks was there a time when there was no food to eat of any kind in the house,	Yes .....1	

	because of lack of resources to get food?	No.....2	<b>2→G17.3</b>
G17.2	How often did this happen?	Rarely or sometimes (1-10 times) .....1 Often (more than 10 times) .....2	
G17.3	In the last 4 weeks, was there a time when you or any household member went to sleep at night hungry without eating anything at all because there was not enough food?	Yes .....1 No.....2	<b>2→G17.5</b>
G17.4	How often did this happen?	Rarely or sometimes (1-10 times) .....1 Often (more than 10 times) .....2	
G17.5	In the last 4 weeks was there a time when you or any household member went a whole day and night without eating anything at all because there was not enough food?	Yes .....1 No.....2	<b>2→G18.1</b>
G17.6	How often did this happen?	Rarely or sometimes (1 – 10 times) .....1 Often (more than 10 times) .....2	

## Household Food Access: Food insecurity coping strategies

[INSTRUCTION: read each question and then ask how often the event happened in the last year.]

	QUESTION	CODE/RESPONSE	SKIP
G18.1	In the last year, how often did you or any of your family have to eat potato, wheat, or another grain although you wanted to eat rice (not including when you were sick)?	Never .....1 Rarely (1-6 times in last year).....2 Sometimes (7-12 times in last year).....3 Often (a few times each month) .....4 Regularly (almost or every day) .....5	
G18.2	In the last 12 months how often did you yourself skip entire meals due to scarcity of food?	Never .....1 Rarely (1-6 times in last year).....2 Sometimes (7-12 times in last year).....3 Often (a few times each month) .....4 Regularly (almost or every day) .....5	
G18.3	In the last 12 months how often did you personally eat less food in a meal due to scarcity of food?	Never .....1 Rarely (1-6 times in last year).....2 Sometimes (7-12 times in last year).....3 Often (a few times each month) .....4 Regularly (almost or every day) .....5	
G18.4	In the past 12 months how often did your family purchase food (rice, lentils etc.) on credit (or loan)	Never .....1	

	from a local shop?	Rarely (1-6 times in last year).....2 Sometimes (7-12 times in last year).....3 Often (a few times each month) .....4 Regularly (almost or every day) .....5	
G18.5	In the past 12 months how often did your family have to borrow /take food from relatives or neighbors to make a meal?	Never .....1 Rarely (1-6 times in last year).....2 Sometimes (7-12 times in last year).....3 Often (a few times each month) .....4 Regularly (almost or every day) .....5	

**MODULE H. AGRICULTURAL PRODUCTION, FISHERIES AND LIVESTOCK REARING**

[Instructions: Respondent should be Head of Household or Knowledgeable Adult]

**Field crop production**

	QUESTION	CODE/RESPONSE	SKIP
H1	Did you cultivate any field crops like cereals, ground nuts, jute, or fruits and vegetables for selling to others?	Yes..... 1 No ..... 2 DNK ..... 8	2,8→ H8
H2	In the last year did anyone in your household cultivate any of these crops? Example:  <b>[READ THE CROPS THAT ARE LISTED]</b>	<u>Yes=1No=2</u> H.2.1. Rice (HYV)..... <input type="checkbox"/> H.2.2. Rice (LIV)..... <input type="checkbox"/> H.2.3. Rice (Local) ..... <input type="checkbox"/> H.2.4. Rice (Hybrid) ..... <input type="checkbox"/> H.2.5. Vegetables (commercial) ..... <input type="checkbox"/> H.2.6. Fruits (commercial)..... <input type="checkbox"/> H.2.7. Wheat ..... <input type="checkbox"/> H.2.8. Groundnut..... <input type="checkbox"/> H.2.9. Maize ..... <input type="checkbox"/> H.2.10. Pulses ..... <input type="checkbox"/> H.2.11. Oilseeds..... <input type="checkbox"/> H.2.12. Spices ..... <input type="checkbox"/> H.2.13. Jute ..... <input type="checkbox"/> H.2.14. Tobacco ..... <input type="checkbox"/> H.2.15. Other (Specify) ..... <input type="checkbox"/> H.2.16. Other (Specify) ..... <input type="checkbox"/>	

H3	Which improved cropping practices did you apply to any of your crops mentioned in H2 in the last year?		<b><u>Yes=1 No=2</u></b>
		H.3.1. Use high quality seed .....	<input type="checkbox"/>
		H.3.2. Use 2-3 seedling per hill for rice.	<input type="checkbox"/>
		H.3.3. Maintain proper spacing .....	<input type="checkbox"/>
		H.3.4. Intercrop .....	<input type="checkbox"/>
		H.3.5. Use IPM .....	<input type="checkbox"/>
		H.3.6. Use organic fertilizers .....	<input type="checkbox"/>
		H.3.7. Use recommended seed storage Methods .....	<input type="checkbox"/>
		H.3.8. Balanced fertilizer use .....	<input type="checkbox"/>
		H.3.9. Green manure .....	<input type="checkbox"/>
H.3.10. Other (Specify) .....	<input type="checkbox"/>		

H4	Which agricultural inputs did you purchase and/or receive before or during the last cropping season?		<b><u>Yes=1 No=2</u></b>
		H.4.1. Improved seed	<input type="checkbox"/>
		H.4.2. Seedlings .....	<input type="checkbox"/>
		H.4.3. Saplings .....	<input type="checkbox"/>
		H.4.4. Irrigation water	<input type="checkbox"/>
		H.4.5. Fertilizer .....	<input type="checkbox"/>
		H.4.6. Ploughing .....	<input type="checkbox"/>
		H.4.7. Use of pesticides .....	<input type="checkbox"/>
		H.4.8. Use of weedicides .....	<input type="checkbox"/>
		H.4.9. Other (Specify)	<input type="checkbox"/>
H.4.10. Other (Specify)	<input type="checkbox"/>		

			<input type="checkbox"/> <input type="checkbox"/>	
H5	Which agricultural financial services did you or your household use in the previous cropping season?	<p style="text-align: center;"><u>Yes=1 No=2</u></p> H.5.1. Agricultural loan ..... <input type="checkbox"/> H.5.2. A company provided advance inputs ..... <input type="checkbox"/> H.5.3. Government subsidy ..... <input type="checkbox"/> H.5.4. Other (Specify) ..... <input type="checkbox"/>		
H6	Have you or any member of your household participated in any training programs on improved food crop production technologies?	Yes ..... 1 No ..... 2 DNK ..... 8	<b>2,8→H8</b>	
H7	What kind of agricultural techniques were you trained in?  [MULTIPLE RESPONSES]	A. Use of improved seeds ..... 1 B. Use of new food crops ..... 2 C. Proper use of fertilizer ..... 3 D. Weed control (herbicides, weeding) ..... 4 E. Conservation agriculture (zero /minimal tillage, composting) ..... 5 F. Pest management practices (pesticides) ..... 6 G. Improved post-harvest techniques ..... 7 H. Improved water management ..... 8 I. Others (Specify) ..... 9		

**Vegetable Production/Gardening**

[INSTRUCTION: Ask to the person who normally does gardening if possible.]

	QUESTION	CODE/RESPONSE	SKIP
H9	In the previous year did any member of your household grow any vegetables in a garden?	Yes..... 1 No ..... 2 DNK ..... 8	2,8 →H12
H10	Which of the following vegetables did you grow?	<p style="text-align: right;"><u>Yes=1 No=2</u></p> H.10.1. Green Gourd ..... <input type="checkbox"/> H.10.2. Radish..... <input type="checkbox"/> H.10.3. Birinjal ..... <input type="checkbox"/> H.10.4. Lalshak (red amaranth) ..... <input type="checkbox"/> H.10.5. Pumpkin (yellow) ..... <input type="checkbox"/> H.10.6. Corriandor leaf /Kalijira/Ginger ..... <input type="checkbox"/> H.10.7. Potato/Keshur (white potato)..... <input type="checkbox"/> H.10.8. Data Shak (Green amaranth) ..... <input type="checkbox"/> H.10.9. Potol/Shajina (drum stick) ..... <input type="checkbox"/> H.10.10. Chichinga/Jhinga ..... <input type="checkbox"/> H.10.11. Bean ..... <input type="checkbox"/> H.10.12. Pui Shak (Indian spinach) ..... <input type="checkbox"/> H.10.13. Kacha Kola (green banana) ..... <input type="checkbox"/> H.10.14. Ladies Finger ..... <input type="checkbox"/> H.10.15. Green Chili..... <input type="checkbox"/> H.10.16. Onion ..... <input type="checkbox"/> H.10.17. Garlic ..... <input type="checkbox"/> H.10.18. Sweet potato..... <input type="checkbox"/> H.10.19. Tomato..... <input type="checkbox"/> H.10.20. Korolla (bitter gourd) ..... <input type="checkbox"/> H.10.21. Papaya..... <input type="checkbox"/>	

		H.10.22. Other green leafy vegetables ..... <input type="checkbox"/>	
		H.10.23. Other (Specify) ..... <input type="checkbox"/>	
H11	Which improved practices did you apply to any of your vegetable crops in the last year?	<p style="text-align: right;"><b>Yes=1 No=2</b></p> H.11.1. Improved bed system ..... <input type="checkbox"/> H.11.2. Improved pit/heap system ..... <input type="checkbox"/> H.11.3. Quality seed ..... <input type="checkbox"/> H.11.4. Organic fertilizer ..... <input type="checkbox"/> H.11.5. Compost preparation..... <input type="checkbox"/> H.11.6. Multi storied cropping ..... <input type="checkbox"/> H.11.7. Relay cropping ..... <input type="checkbox"/> H.11.8. Multiple cropping ..... <input type="checkbox"/> H.11.9. Thinning ..... <input type="checkbox"/> H.11.10. Pruning..... <input type="checkbox"/> H.11.11. Mulching ..... <input type="checkbox"/> H.11.12. Bagging ..... <input type="checkbox"/> H.11.13. Stalking/sticking/trellis ..... <input type="checkbox"/> H.11.14. Non-chemical pesticides ..... <input type="checkbox"/> H.11.15. Artificial pollination ..... <input type="checkbox"/> H.11.16. Weed management ..... <input type="checkbox"/> H.11.17. Water management..... <input type="checkbox"/> H.11.18. Other (Specify) ..... <input type="checkbox"/>	

## Fish Production/Rearing

[INSTRUCTION: Ask person normally engaged in fish production if possible.]

	QUESTION	CODE/RESPONSE	SKIP
H12	In the last year did you or your household raise/rear any fish?	Yes..... 1 No ..... 2 DNK ..... 8	<b>2,8→H14</b>
H13	Which improved fish production practices did your household use in the last year?	<p style="text-align: right;"><u>Yes=1 No=2</u></p> H.13.1. Testing water color to determine if food is adequate ..... <input type="checkbox"/> H.13.2. Maintaining stocking density..... <input type="checkbox"/> H.13.3. Species selection..... <input type="checkbox"/> H.13.4. Pond cleaning ..... <input type="checkbox"/> H.13.5. Liming ..... <input type="checkbox"/> H.13.6. Providing supplementary feed ..... <input type="checkbox"/> H.13.7. Employing fish disease management ..... <input type="checkbox"/> H.13.8. Using polyculture..... <input type="checkbox"/> H.13.9. Providing fish seed..... <input type="checkbox"/> H.13.10. Others (Specify) ..... <input type="checkbox"/>	

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## Livestock Production/Rearing

[INSTRUCTION: Ask person normally engaged in livestock production if possible.]

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	QUESTION	CODE/RESPONSE	SKIP
H14	During the last 12 months, did you raise any livestock or poultry?	Yes raised livestock..... 1 Yes raised poultry..... 2 Yes raised both..... 3 No ..... 4 DNK ..... 8	4,8→H16
H15	What are the following improved practices do you apply in the last year to raising poultry and rearing livestock?	<p style="text-align: right;"><b>Yes=1 No=2</b></p> H.15.1. Improved breeding ..... <input type="checkbox"/> H.15.2. Vaccination ..... <input type="checkbox"/> H.15.3. Supplementary poultry feed..... <input type="checkbox"/> H.15.4. Fattening..... <input type="checkbox"/> H.15.5. Artificial insemination..... <input type="checkbox"/> H.15.6. Supplementary poultry feed..... <input type="checkbox"/> H.15.7. Other (Specify) ..... <input type="checkbox"/>	

### Technical support

	QUESTION	CODE/RESPONSE	SKIP
H16	Do you know where to get technical guidance for agriculture, livestock rearing, gardening, or pond/fish management?	Yes..... 1 No ..... 2 DNK ..... 8	2,8 → I1
H17	In the past year did you or any member of your household receive any type of assistance (technical, materials, financial) from any of the following sources?	<p style="text-align: right;"><b>Yes=1 No=2</b></p> H.17.1. Neighbors/relatives/other farmers ..... <input type="checkbox"/> H.17.2. Dept. of Agriculture ..... <input type="checkbox"/> H.17.3. Dept. of Fisheries..... <input type="checkbox"/>	

		H.17.4. Department of livestock .....	<input type="checkbox"/>	
		H.17.5. NGO .....	<input type="checkbox"/>	
		H.17.6. Seed/pesticide companies.....	<input type="checkbox"/>	
		H.17.7. Fish/poultry/livestock feed and pharmaceutical companies.....	<input type="checkbox"/>	
		H.17.8. PDF (Positive Deviant Farmer) .....	<input type="checkbox"/>	
		H.17.9. Paravet.....	<input type="checkbox"/>	
		H.17.10. Community Agriculture Volunteers .....	<input type="checkbox"/>	
		H.17.11. Other (Specify) .....	<input type="checkbox"/>	

**MODULE I. WATER AND SANITATION**

[Instructions: Respondent should be Head of Household or Knowledgeable Adult]

	QUESTION	CODE/RESPONSE	SKIP
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	QUESTION	CODE/RESPONSE	SKIP
I1	<p>What is the main source of drinking water for members of your household?</p> <p><b>[PROMPT IF NECESSARY]</b></p>	<p>Hand tube well .....1</p> <p>Tara pump .....2</p> <p>Deep tube well .....3</p> <p>Shallow tube well .....4</p> <p>Ring well/ indara.....5</p> <p>Pond .....6</p> <p>River/canal.....7</p> <p>Piped water .....8</p> <p>Pond sand filter .....9</p> <p>Rainwater harvesting system .....10</p> <p>Other (specify) .....11</p>	
I2	Is water normally available from this source?	<p>Yes .....1</p> <p>No .....2</p>	
I3	In the last two weeks was water unavailable from this source for a day or longer?	<p>Yes .....1</p> <p>No .....2</p>	

	QUESTION	CODE/RESPONSE	SKIP
I4	How much time does it usually take to go to the drinking water source, get water, and come back?	0 (in or at house) .....1 30 minutes or less .....2 30 minutes to 1 hour .....3 1 hour to 2 hours .....4 2 to 3 hours .....5 More than 3 hours.....6	
I5	If source is a tubewell (hand, deep, shallow or Tara pump, has the well been tested for arsenic?	Yes .....1 No .....2 DNK.....8 N/A .....9	2,8,9→18
I6	If tested, does the tubewell/Tara pump have arsenic?	Yes .....1 No .....2 DNK.....8	2,8→18
I7	If yes, is it marked red or green?	Red.....1 Green.....2 Neither.....3	
I8	Does the household have access to a toilet facility?	Yes .....1 No .....2	2→J1

	QUESTION	CODE/RESPONSE	SKIP
I9	What kind of toilet facility do members of your households usually use?  [PROMPT IF NECESSARY]	Ring-slab/offset latrine (water seal).....1 Ring-slab/offset latrine (water seal broken) .....2 Pit latrine (covered).....3 Pit latrine (uncovered).....4 Septic latrine.....5 Hanging/open latrine .....6 Local adopted hygienic latrine .....7	
I10	Which members of your household use this toilet?  [SELECT MUPLTIPLE]	A. Male adults.....1 B. Female adults .....2 C. Male children .....3 D. Female children.....4 E. All .....5	
I10a	May I see your latrine?	Yes .....1 No .....2	2→J1
	[INSTRUCTION: Observe the latrine directly and record condition]		
I11	Is the latrine functioning?	Yes .....1 No .....2	
I12	Does the latrine show signs of use?	Yes .....1 No .....2	
I13	Is the latrine itself clean?For example, is the pan and slab (or place to sit while defecating) clean?	Yes .....1 No .....2	

	QUESTION	CODE/RESPONSE	SKIP
I14	Is the surrounding area of the latrine clean?	Yes .....1 No .....2	
I15	Does the latrine have an unbroken water seal?	Good water seal .....1 Broken water seal.....2 No water seal.....3	
I16	Is there a hand washing station inside the latrine or within 10 paces of the latrine?	Yes .....1 No .....2	2→J1
I17	Is there a cleansing agent at this hand washing station? (soap, detergent, ash or clay)	Yes .....1 No .....2	

**MODULE J1.PARTICIPATION IN THE CARE SHOUHARDO II PROGRAM FROM 2010-2014**

[INSTRUCTIONS: The respondent to module J1 should be the person in the household most knowledgeable about household’s engagement with SHOUHARDO II activities.]

	QUESTION	CODE/RESPONSE	SKIP
	<b>Agriculture, Comprehensive Homestead Development, Fisheries, and Income Generation Activities</b>		
	Could you please tell me which of the following supports (e.g., training, inputs, technical back-stop) that the		

	QUESTION	CODE/RESPONSE	SKIP
	household has received from the SHOUHARDO II Program? Did you receive....		
J1.1	<b>a. Agricultural support?</b>	Yes ..... 1 No ..... 2	<b>2→J1.2</b>
	b. Agriculture – field crop (Cereals)	Yes ..... 1 No ..... 2 DNK ..... 8	
	c. Agriculture – field crop (Vegetable)	Yes ..... 1 No ..... 2 DNK ..... 8	
J1.2	<b>a. Comprehensive Homestead Development (CHD)</b>	Yes ..... 1 No ..... 2	<b>2→J1.3</b>
	b. CHD – Vegetable garden	Yes ..... 1 No ..... 2 DNK ..... 8	
	c. CHD – Fruit production	Yes ..... 1 No ..... 2 DNK ..... 8	
	d. CHD – Goat	Yes ..... 1 No ..... 2	

	QUESTION	CODE/RESPONSE	SKIP
		DNK .....8	
	e. CHD – Poultry	Yes .....1 No .....2 DNK .....8	
	f. CHD – Other livestock	Yes .....1 No .....2 DNK .....8	
J1.3	<b>a. Fisheries</b>	Yes .....1 No .....2	<b>2→J1.4</b>
	b. Fisheries: fish culture	Yes .....1 No .....2 DNK .....8	
	c. Fish – capture/ fishing	Yes .....1 No .....2 DNK .....8	

J1.4	<b>a. IGA (On-farm/Off-farm)</b>	Yes .....1 No .....2	<b>2→J1.5</b>
	b. Non agriculture	Yes .....1	

		No.....2 DNK .....8	
	c. Agriculture - seed, technical assistance	Yes.....1 No.....2 DNK .....8	
	d. Goat rearing	Yes.....1 No.....2 DNK .....8	
	e. Cow rearing	Yes.....1 No.....2 DNK .....8	
	f. Poultry/Bird rearing	Yes.....1 No.....2 DNK .....8	
	g. Other livestock rearing	Yes.....1 No.....2 DNK .....8	
	h. EDBM/ ME Value chain	Yes.....1 No.....2 DNK .....8	
	i. Technical Training	Yes.....1	

		No .....2 DNK .....8	
	j. Others(specify if not mentioned above/below)	Yes .....1 No .....2 DNK .....8	
J1.5	<b>Training/Technical support</b>		
	a. Did anyone in your household receive any training/technical support from the SHOUHARDO II Program?	Yes .....1 No .....2 DNK .....8	<b>2,8→J1.6</b>
	b. If yes, please list down all those specifically below (max major three)		
	1.	Day ..... <input type="checkbox"/> DNK/Can't remember.....98	
	2.	Day ..... <input type="checkbox"/> DNK/Can't remember.....98	
	3.	Day ..... <input type="checkbox"/> DNK/Can't remember.....98	
J1.6	<b>Food ration beneficiary</b>		
	a. Did anyone in your household receive a supplementary food ration from the SHOUHARDO II Program?	Yes .....1 No .....2 DNK .....8	<b>2,8→J1.7</b>

	<b>b.</b> If yes, did she receive it as a pregnant woman or a lactating mother or for both?	Pregnant woman .....1 Lactating mother .....2 Both .....3 DNK .....8	
	<b>c.</b> Number of months received ration (Check Ration Card if Available)	Months ..... <input type="checkbox"/> <input type="checkbox"/>	
J1.7	<b>Participation in SHOUHARDO II groups/membership in community group</b>		
	Is anyone in your household a member of the following groups? <b>[INTERVIEWER: Read list one-by-one and record responses]</b>		
	<b>a.</b> Agriculture group	Yes .....1 No .....2 DNK .....8	
	<b>b.</b> Comprehensive Homestead Development (CHD) group	Yes .....1 No .....2 DNK .....8	
	<b>c.</b> Income Generating Activities (IGA) group	Yes .....1 No .....2 DNK .....8	
<b>d.</b> Fisheries group	Yes .....1		

		No.....2 DNK .....8	
	e. Village Development Committees (VDC)	Yes.....1 No.....2 DNK .....8	
	f. Savings Group Management Committee	Yes.....1 No.....2 DNK .....8	
	g. ECCD Management Committee	Yes.....1 No.....2 DNK .....8	
	h. EKATA Management Committee	Yes.....1 No.....2 DNK .....8	
	i. PIC/ Food Commodity Distribution Management Committee	Yes.....1 No.....2 DNK .....8	

	j. Mother's Group	Yes .....1 No .....2 DNK .....8	
	k. Other (Specify)	Yes .....1 No .....2 DNK .....8	

J1.8	<b>EKATA</b>		
	a. Are there any women or adolescent girls living in your household?	Yes .....1 No .....2	<b>2→ J1.9</b>
	b. If yes, are they enrolled in or do they participate in a SHOUHARDO II EKATA?	Yes .....1 No .....2 DNK .....8	<b>2,8,→J1.9</b>
	c. If yes, is she is an adult woman or adolescent girl?	Adult woman .....1 Adolescent .....2 Both .....3	
J1.9	<b>EARLY CHILDHOOD CARE DEVELOPMENT (ECCD)</b>		

	a. Are there any children under 7 years old living in your household?	Yes .....1 No .....2 DNK.....8	<b>2,8, →J1.10</b>
	b. Does any child attend preschool at a SHOUHARDO II Early Childhood Development Center (ECCD) (SBK, preschool)?	Yes .....1 No .....2	<b>2→J1.10</b>
	c. Is the child a boy or girl?	<b>Boy=1, Girl=2</b> Child-1 ..... <input type="checkbox"/> Child-2 ..... <input type="checkbox"/> Child-3 ..... <input type="checkbox"/>	
J1.10	<b>WATER AND SANITATION</b>		
	a. Did SHOUHARDO II Program help your household get access to a latrine?	Yes .....1 No .....2 DNK.....8	
	b. Did SHOUHARDO II Program help your household get access to a tube well? (Do not count tube well platform)	Yes .....1 No .....2 DNK..... 8	
	c. Did the SHOUHARDO II Program help construct/ upgrade/ repair a sanitation drain near your home?	Yes .....1 No .....2 DNK..... 8	
J1.11	<b>OTHERS</b>		

	<p>a. Did your household receive support for house rising from the SHOUHARDO II Program?</p>	<p>Yes .....1  No .....2  DNK..... 8</p>	
	<p>b. Did your household receive support for mound protection or extension from the SHOUHARDO II Program?</p>	<p>Yes .....1  No .....2  DNK..... 8</p>	
	<p>c. Did anyone in your household participate in the cash-for-work program of the SHOUHARDO II Program?</p>	<p>Yes .....1  No .....2  DNK..... 8</p>	
	<p>d. Did anyone in your household participate in the food-for-work program of the SHOUHARDO II Program?</p>	<p>Yes .....1  No .....2  DNK..... 8</p>	
	<p>e. During the past two years, did anyone in your household directly receive any aid or food from programs other than SHOUHARDO II?</p>	<p>Yes .....1  No .....2  DNK..... 8</p>	<p><b>2,8,→J2.1</b></p>
	<p>f. If “yes”, what was the program?   <b>[ASK TO SEE ANY RATION CARDS AND LIST SOURCE OF AID]</b></p>	<p>_____</p>	

**MODULE J2.FACTORS AFFECTING PARTICIPATION IN SHOUHARDO II**

[Instructions: Respondent should be Head of Household or Knowledgeable Adult]

## Shocks experienced in the last year

Now I'm going to ask you some questions about the shocks, or bad surprises, that hurt the household financially in the last year.

The first type of shock is <b>climate shocks</b> , like floods.	
J2.1 During the past 12 months did your household experience any of the following events?	
a. Floods	Yes.....1 No.....2
b. Cyclone	Yes.....1 No.....2
c. Drought	Yes.....1 No.....2
d. Had to move due to river erosion	Yes.....1 No.....2
e. Do you feel that the situation was better, the same or worse 5 years ago (before SHOUHARDO II began) than it is now with regards to these kinds of climate shocks?	Better.....1 Same.....2

	Worse.....3
Next I'm going to ask you about <b>family events</b> .	
During the past 12 months did your household experience any of the following events?	
f. Loss of income due to illness or injury of a family member	Yes.....1 No.....2
g. Divorce or abandonment	Yes.....1 No.....2
h. Dowry and wedding expenses	Yes.....1 No.....2
i. Court case/legal problems	Yes.....1 No.....2
j. Death of family member	Yes.....1 No.....2
k. Do you feel that the situation was better, the same or worse 5 years ago (before SHOUHARDO II began) than it is now with regards to these kinds of family events?	Better.....1 Same.....2 Worse.....3
Next I'm going to ask you about <b>economic shocks</b> .	
During the past 12 months did your household experience any of the following events?	
l. Sharp food price increase	Yes.....1 No.....2

m. Very poor harvest from fields or fish ponds	Yes.....1 No.....2
n Deaths of livestock, including fish	Yes.....1 No.....2
o. Massive loss of household income	Yes.....1 No.....2
p.Do you feel that the situation was better, the same or worse 5 years ago (before SHOUHARDO II began) than it is now with regards to these kinds of economic events?	Better.....1 Same.....2 Worse.....3

## Social capital

<b>J2.2</b>	If your household had a problem and needed TK 1000 or food urgently, would you be able to borrow it from relatives living in this community?	Yes .....1 No .....2 DNK.....8
<b>J2.3</b>	If your household had a problem and needed TK 1000 or food urgently, would you be able to borrow it from people in your community who are not your relatives?	Yes .....1 No .....2 DNK.....8
<b>J2.4</b>	Compared to five years ago (before SHOUHARDO II began) has the number of people you think you could ask for help if your household needed money or food urgently:	Increased .....1 Stayed the same .....2 Decreased.....8

J2.5	If a relative in this community had a problem and needed TK 1000 or food urgently, would you be able to lend it to them?	Yes .....1 No .....2 DNK.....8
J2.6	If someone who is not your relative, but lives in this community had a problem and needed Tk 1000 or food urgently, would you be able to lend it to them?	Yes .....1 No .....2 DNK.....8
J2.7	Compared to five years ago (before SHOUHARDO II began) has your ability to give this type of assistance:	Increased .....1 Stayed the same .....2 Decreased .....3
J2.8	Is anyone in your household a friend or relative of a government official in this area?	Yes .....1 No .....2 DNK.....8
J2.9	Is anyone in your household a Union Parishad Elected Leader?	Yes .....1 No .....2 DNK.....8
J2.10	Is anyone in your household a friend or relative of a Union Parishad elected leader?	Yes .....1 No .....2 DNK.....8

## Aspirations and confidence to adapt

<b>J2.11</b>	Does anyone in your household communicate regularly with at least one person outside this village?	Yes ..... 1 No ..... 2 DNK..... 8
<b>J2.12</b>	During the past week, has anyone in your household engaged in economic activities with members of other villages? For example, farming, trading, employment, borrowing or lending money.	Yes ..... 1 No ..... 2 DNK..... 8
<b>J2.13</b>	How many times in the past month has anyone in your household got together with people to have food, either in their home or in a public place?	[ ]
<b>J2.14</b>	How many DAYS in the past month has anyone in your household attended a mosque or other religious service?	[ ]
<b>J2.15</b>	In the last year, how many times has anyone in your household stayed more than 2 days outside this village?	[ ]

**J2.16:** Below is a series of statements that you may agree or disagree with. I'm going to ask you to tell me whether you agree with each one.

		Do you Agree?
<b>a.</b>	When I get what I want, it is usually because I worked hard for it.	Yes .....1 No .....2

		DNK .....8
<b>b.</b>	Some things that happen to me are God's will and some things are because of my own actions.	Yes .....1 No .....2 DNK .....8
<b>c.</b>	To be successful, above all one needs to be lucky.	Yes .....1 No .....2 DNK .....8

## Personal familiarity with SHOUHARDO II project staff

	QUESTION	CODE/RESPONSE	SKIP
J2.17	For how many years has the SHOUHARDO II project had activities in your community?	[ ]	
J2.18	Did you or any member of your household know a staff member of the SHOUHARDO II project before it started having activities in your community?	Yes ..... 1 No ..... 2	2 → J2.21
J2.19	How many staff members did you or another household member know before the SHOUHARDO II project started here?	[ ]	
J2.20	How did you, or household members, know the staff members at that time? Were they....  [INSTRUCTION: Read all choices and circle answers] [MULTIPLE RESPONSE]	1. A family member or relative 2. A friend 3. A neighbor 4. An acquaintance	

## Time constraints

	QUESTION	CODE/RESPONSE	SKIP
J2.21	Do you do any agricultural production, gardening, or animal raising?	Yes .....1 No .....2	2 → J2.23
J2.22	On a typical day in the last month, how many hours did you spend on these activities?	[ ]	
J2.23	Do you do any post-harvest activities like threshing?	Yes .....1 No ..... 2	2 → J2.25
J2.24	On a typical day in the last month, how many hours did you spend on post-harvest activities?	[ ]	
J2.25	Do you earn any cash income?	Yes .....1 No ..... 2 .....	2 → J2.27
J2.26	On a typical day in the last month, how many hours did you spend earning cash income?	[ ]	
J2.27	Do you do any housework, like cooking, washing dishes and clothes, fetching wood and water?	Yes .....1 No ..... 2	2 → J2.29

<b>J2.28</b>	On a typical day in the last month, how many hours did you spend on housework?	[ ]	
<b>J2.29</b>	Do you take care of any children?	Yes .....1 No .....2	<b>2→ J2.31</b>
<b>J2.30</b>	On a typical day in the last month, how many hours did you spend taking care of children?	[ ]	
<b>J2.31</b>	During the daytime do you spend time doing other things like socializing, watching TV, taking naps, or reading?	Yes .....1 No .....2	<b>2→ J2.33</b>
<b>J2.32</b>	On a typical day in the last month, how many hours did you spend in these kinds of “leisure” activities where you were not working?	[ ]	
<b>J2.33</b>	Imagine ten steps, where on the bottom, the first step, is a person who spends no time in the day doing these leisure activities, and on the highest step, the 10 <sup>th</sup> , is a person who spends the whole day doing them  [INSTRUCTION: Show picture of steps].  On a typical day in the last month, which step were you on?	[ ]	
<b>J2.34</b>	Which step were you on five years ago (before SHOUHARDO II began)?	[ ]	

## PART II. INFORMATION ON WOMEN'S EMPOWERMENT

**[INSTRUCTION]:** The questions in Part II should be asked of an adult woman member of the household without men present. To help find a woman, see circled line numbers from column c7 of household roster. The preferred respondent is the female head of household or spouse of the male head of household.]

### MODULE K1. RESPONDENT IDENTIFICATION FOR PART II

K1.1	Name of respondent: _____	
K1.2	Line number of respondent _____  <b>[INSTRUCTION: Record line number from Module C]</b>	<input type="text"/> <input type="text"/>
K1.3	Relationship to household head [SEE CODES BELOW]	<input type="text"/> <input type="text"/>

**Codes for K1.3:**

1= Household head, 2= Wife of household head, 3= Daughter, 4=Granddaughter, 5=Niece, 6=Mother, 7= Daughter in law, 8=Sister, 9=Sister-in-law, 10=Brother's wife.

## MODULE K2. INFORMATION ON WOMEN'S EMPOWERMENT

### Decision making in household

	QUESTION	CODE/RESPONSE	SKIP
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	QUESTION	CODE/RESPONSE	SKIP
	<p>In the last year, to what extent have you been able to make the following kinds of decisions?</p> <p><b>[INSTRUCTION:</b> First read the possible responses. Then list each item (K2.1 – K2.12) one-by-one and record code number of response.]</p> <p>Code list</p> <p>1 = Can decide alone</p> <p>2 = Can decide with husband or other adult male family member</p> <p>3 = Husband makes decision after discussion with wife</p> <p>4 = Not involved in decision</p> <p>5 = Not applicable</p>		
K2.1	Buying small food items, groceries, toiletries	<input type="checkbox"/>	
K2.2	Buying clothing for yourself and your children	<input type="checkbox"/>	
K2.3	Spending money that you yourself have earned	<input type="checkbox"/>	
K2.4	Buying or selling major household assets (land, livestock, crops)	<input type="checkbox"/>	
K2.5	Buying or selling jewelry	<input type="checkbox"/>	
K2.6	Use of loans or savings	<input type="checkbox"/>	
K2.7	Expenses for your children’s education	<input type="checkbox"/>	
K2.8	Expenses for your children’s marriage	<input type="checkbox"/>	
K2.9	Medical expenses for yourself or your children	<input type="checkbox"/>	
K2.10	Expenses for family planning (contraceptives)	<input type="checkbox"/>	
K2.11	To move to shelter during time of disaster	<input type="checkbox"/>	
K2.12	Actively participate and involved in salish decision making	<input type="checkbox"/>	

	QUESTION	CODE/RESPONSE	SKIP
K2.13	Imagine ten steps, where on the bottom, the first step, is a woman who can make none of these types of decisions, and on the highest step, the 10 <sup>th</sup> , is a person who can make all of them.  [INSTRUCTION: Show picture of steps].  On a usual day in the last month, which step were you on?	[ ]	
K2.14	Which step were you on five years ago (before SHOUHARDO II began)?	[ ]	

### Freedom of movement

[INSTRUCTION: Circle code number of response.]

	QUESTION	CODE/RESPONSE	SKIP
K2.13	Are you allowed to travel to the local market to buy things	Yes ..... 1 No ..... 2	2 → K2.15
K2.14	Can you go alone?	Yes ..... 1 No ..... 2	
K2.15	Are you allowed to travel to a local health center or doctor	Yes ..... 1 No ..... 2	2 → K2.17
K2.16	Can you go alone?	Yes ..... 1 No ..... 2	
K2.17	Are you allowed to travel to homes of friends in the neighborhood	Yes ..... 1 No ..... 2	2 → K2.19
K2.18	Can you go alone?	Yes ..... 1 No ..... 2	
K2.19	Are you allowed to travel to a nearby mosque/shrine	Yes ..... 1 No ..... 2	2 → K2.21

	QUESTION	CODE/RESPONSE	SKIP
K2.20	Can you go alone?	Yes ..... 1 No ..... 2	

### Earning of Cash Income

	QUESTION	CODE/RESPONSE	SKIP
K2.21	As you know, some women take up jobs for which they are paid in cash. Others sell things, have a small business or work on the farm or in the family business. In the last 12 months, have you done any of these things?	Yes..... 1 No ..... 2	2 → K2.23
K2.22	If yes, did you earn any money from your work in the last 12 months?	Yes..... 1 No ..... 2	

### Attitudes about family life

[INTRODUCTION: Now I would like to get your opinion on some aspects of family life. Please tell me if you agree or disagree with each statement.]

	QUESTION	CODE/RESPONSE	SKIP
K2.23	The important decisions in the family should be made only by the men of the family.	Agree ..... 1 Disagree..... 2 DNK/depends ..... 8	
K2.24	If the wife is working outside the home, then the husband should help her with household chores.	Agree ..... 1 Disagree..... 2 DNK/depends ..... 8	
K2.25	A married woman should be allowed to work outside the home if she wants to.	Agree ..... 1 Disagree..... 2 DNK/depends ..... 8	

K2.26	The wife has a right to express her opinion even when she disagrees with what her husband is saying.	Agree ..... 1 Disagree..... 2 DNK/depends ..... 8	
K2.27	A wife should tolerate being beaten by her husband in order to keep the family together.	Agree ..... 1 Disagree..... 2 DNK/depends ..... 8	
K2.28	It is better to send a son to school than it is to send a daughter.	Agree ..... 1 Disagree..... 2 DNK/depends ..... 8	

### Domestic Violence

	QUESTION	CODE/RESPONSE	SKIP
K2.29	Sometimes a husband is annoyed or angered by things his wife does. In your opinion, is a husband justified in hitting or physically abusing his wife in the following situations?		
	a. If she goes out without telling him	Yes.....1 No .....2	
	b. If she neglects the children	Yes.....1 No .....2	
	c. If she argues with him	Yes.....1 No .....2	
	d. If she refuses to have sex with him	Yes.....1 No .....2	
	e. If she burns the food	Yes.....1 No .....2	
	f. If she does not obey elders	Yes.....1 No .....2	
K2.30	Did any female member of your household experience being yelled at or struck during the previous year?	Yes.....1 No .....2	

K2.31	What was the nature of this yelling or striking?	Physical ..... 1 Verbal..... 2	
K2.32	How often did incidences like this occur?	One time only ..... 1 Several times..... 2	
K2.33	Was any assistance sought after these incidents?	Yes..... 1	
K2.34	Did you get assistance from ....?		
	a. A medical facility?	Yes..... 1	
	b. The police	Yes..... 1	
	c. A lawyer or legal firm	Yes..... 1	
	d. A relative, friend or neighbor	Yes..... 1	
	e. A women’s support group	Yes..... 1	
	f. Other	Yes..... 1	

### Women’s Participation in Community Groups and Local Institutions

Which of the following groups are you a member of or in a responsible position?

Example: Chairman, Secretary, Cashier, Committee member.

	QUESTION	CODE/RESPONSE	SKIP
K2.35	Savings or credit group?	Member ..... 1 Committee Member/responsible position ..... 2	
K2.36	Community agriculture (including fishery group) or homestead garden group or IGA group?	Member ..... 1 Committee Member/responsible position ..... 2	
K2.37	Community health group	Member ..... 1 Committee Member/responsible position ..... 2	
K2.38	Parent-Teacher Association or School Management Committee	Member ..... 1 Committee Member/responsible position ..... 2	
K2.39	Mother’s Group	Member ..... 1 Committee Member/Officer ..... 2	

K2.40	Women's support group (EKATA, VDC, ECCDMC, MCHN mothers, Women Empowerment, EAWF Forum, BRAC PalliSamaj, NariBakhoDarbar network etc.)	Member ..... 1 Committee Member/responsible position ..... 2	
K2.41	UP Special Committee	Member ..... 1 Committee Member/responsible position ..... 2	
K2.42	UP Standing Committee	Member ..... 1 Committee Member/responsible position ..... 2	
K2.43	UP disaster committee	Member ..... 1 Committee Member/responsible position ..... 2	
K2.44	Other _____	Member ..... 1 Committee Member/responsible position ..... 2	
K2.45	Have you ever attended a Salish meeting in your village?	Yes..... 1 No ..... 2	<b>2 → Module L</b>
K2.46	Did you speak at the meeting?	Yes..... 1	

## PART III. INFORMATION ON CHILDREN 0-59 MONTHS OLD AND THEIR MOTHERS

### MODULE L. RESPONDENT AND CHILD IDENTIFICATION FOR PART III

The purpose of this module is to select the index child for administration of Modules M, N, O, P, Q, and R to identify the children to be weighed and measured for Module T (all children in the household under five).

**INSTRUCTION:** List all of the children living in the household who are under 6 years of age, that is, those with circled line numbers in column C8 of Module C.

**\*\*\*If no child is under 6 years, then the survey is complete \*\*\***

Names and line numbers of children identified to be under 6years from Module C.	
L1	Child 1 _____ 1. Line No ____ <input type="checkbox"/> <input type="checkbox"/>
	Child 2 _____ 2. Line No ____ <input type="checkbox"/> <input type="checkbox"/>
	Child 3 _____ 3. Line No ____ <input type="checkbox"/> <input type="checkbox"/>
	Child 4 _____ 4. Line No ____ <input type="checkbox"/> <input type="checkbox"/>
	Child 5 _____ 5. Line No ____ <input type="checkbox"/> <input type="checkbox"/>

**INSTRUCTION:** Then read the children’s names to present household members and ask: “**Are these all of the children younger than 6 years living here?**” If there are more children, add their names and line numbers.

### Age verification of children and selection of children for Module T

I would like to ask you some questions about (NAME). I will need (NAME’S) vaccination or birth card.

L2.1	<b>CHILD 1</b>  What is (NAME's) birth date?  Verify birth date on vaccination or birth card and fill in the day, month and year. If day is not known, enter '99'.  If a vaccination or birth card is not available, ask the mother if she knows the birth date and if she does, enter it.	Day ..... <input type="checkbox"/>	
L2.2	Check birth date. Was child born on TODAY's DATE 2009 or later?	Yes ..... No .....	<b>1→ Enter Line number</b>
L2.3	<b>CHILD 2</b>  What is (NAME's) birth date?	Day ..... <input type="checkbox"/>	
L2.4	Check birth date. Was child born on TODAY's DATE 2009 or later?	Yes .....	<b>1→ Enter Line number</b>
L2.5	<b>CHILD 3</b>  What is (NAME's) birth date?	Day ..... <input type="checkbox"/>	
L2.6	Check birth date. Was child born on TODAY's DATE 2009 or later?	Yes .....	<b>1→ Enter Line number</b>
L2.7	<b>CHILD 4</b>  What is (NAME's) birth date?	Day ..... <input type="checkbox"/>	
L2.8	Check birth date. Was child born on TODAY's DATE 2009 or later?	Yes .....	<b>1→ Enter Line number</b>
L2.9	<b>CHILD 5</b>  What is (NAME's) birth date?	Day ..... <input type="checkbox"/>  Month ..... <input type="checkbox"/>	

L2.10	Check birth date. Was child born on TODAY's DATE 2009 or later?	Yes.....	<b>1→ Enter Line number</b>
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**Selection of index child**

**INSTRUCTION:** If there is only one child listed, this is the index child. If there is more than one child, use the “numbered papers in a container” method to randomly choose the index child and record the information about the child below.

	Name of index child: _____
L3	Line number of index child <span style="float: right;">□ □</span>
L3a	Date of birth of index child <div style="text-align: right; margin-right: 50px;">Day ..... □ □</div> <div style="text-align: right; margin-right: 50px;">Month..... □ □</div> <div style="text-align: right; margin-right: 50px;">Year ..... □ □ □ □</div>

**\*\*\* The index child’s mother (or caretaker) is the respondent for the remainder of the questionnaire \*\*\***

**Information on respondent for Part III: General**

L4	Name of respondent: _____
----	---------------------------

L5	Line number of respondent  Record line number from Module C	..... <input type="text"/> <input type="text"/>
L6	Relationship to household head (see codes below)	..... <input type="text"/> <input type="text"/>
L7	How old are you? (years)	..... <input type="text"/> <input type="text"/>
L8	Are you currently pregnant?	Yes..... No ..... DNK.....
L9	What is your level of education? (see codes below)	Code..... <input type="text"/> <input type="text"/>
L10	If the respondent is the caretaker (but not the mother) of the child, write 99 in the box.	Code..... <input type="text"/> <input type="text"/>

**Codes for L6:** 1= Household head, 2= Wife of household head, 3= Daughter, 4=Granddaughter, 5=Niece, 6=Mother, 7= Daughter in law, 8=Sister, 9=Sister-in-law, 10=Brother's wife.

**Codes for L9:** 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 pass, 11 = HSC pass, 12 = Graduate, 13 = Masters.

## MODULE M. ANTENATAL CARE

Now I would like to ask you some questions about your **current or most recent** pregnancy.

(Interviewer: See question L8 to determine if respondent is pregnant)

	QUESTION	CODE/RESPONSE	SKIP
M1	Did you see anyone for antenatal care during your pregnancy?	Yes ..... 1 No ..... 2	2→M8
M2	Whom did you see?	Doctor ..... 1 Nurse/midwife..... 2 Traditional birth attendant ..... 3 Skilled Birth Attended (SBA) ..... 4 Community/village health worker... 5 Other ..... 6	
M3	Where did you receive antenatal care during your pregnancy?	Your home ..... 1 Other home ..... 2 Government hospital ..... 3 Other Government health facility ... 4 Private hospital/clinic ..... 5 Community Clinic..... 6 Other Private health facility ..... 7 Other ..... 8	
M4	How many months pregnant were you when you first received antenatal care?	Number of months ..... <input type="text"/> <input type="text"/> DNK.....98	
M5	How many check-ups did you have during your pregnancy?	Number of visits ..... <input type="text"/> <input type="text"/>	
M6	Do you have an antenatal card or a prescription sheet for your most recent pregnancy? If yes: May I see it please?	Yes, Seen.....1 Yes, Not Seen .....2	

		No Card.....3	<b>2,3 →M8</b>
M7	<b>Interviewer:</b> Verify number of antenatal visits  (Is the number of documented visits on the card different than the stated number of visits in M5?)	Same as stated.....1  Different than stated .....2  Note number of documented visits..... <input type="text"/> <input type="text"/>	
M8	During your pregnancy, do/did you take the same amount of food as you usually take or do/did you take more or less food than you usually take?	More food .....1 Less food .....2 Same as usual .....3	
M9	During your pregnancy, do/did you take as much daytime rest as you usually take?	More rest .....1 Less rest .....2 Same as usual .....3	
M10	Did you receive Vitamin A Capsule within 42 days (6 weeks) of delivery of the child?  [INTERVIEWER: Show her the red vitamin A capsule]	Yes .....1 No .....2 Can't Recall .....3 Not applicable (still pregnant).... 4	
M11	In your last pregnancy, did you take any iron and folic acid tablets like this?  [INTERVIEWER: Show her the iron tablet]	Yes .....1 No .....2	<b>2→ M13</b>
M12	For how many months during your last pregnancy did you take iron and folic acid tablets?	1-2.....1 3-4.....2 5-6.....3 > 6.....4	
M13	Have you taken an iron and folic acid tablet in the last 7 days/ latest 7 days in pregnancy during your current or index child's name pregnancy?	Yes .....1 No .....2 Can't Recall .....3	



## MODULE N. FOOD CONSUMPTION OF MOTHER

Now I would like to ask you (**mother**) about the types of foods that you (**mother**) ate yesterday during the day or at night. Please include all foods, including the foods eaten here at your house or somewhere else.

	QUESTION	CODE/RESPONSE	SKIP
N1	Any cereals, e.g. rice, bread, wheat, wheat bread, rice flakes, puffed rice, barley, wheat grain, popcorn?	Yes..... No .....	
N2	Any pumpkin, carrots, squash, or sweet potatoes or vegetables that are yellow or orange inside?	Yes..... No .....	
N3	Any white potatoes, white yams or other foods made from roots and tubers?	Yes..... No .....	
N4	Any dark green, leafy vegetables, e.g. ipomoea, amaranth, spinach, parwar sag, and drumstick leaves?	Yes..... No .....	
N5	Any other vegetables, e.g. cucumber, radish, pepper, string beans, cabbage, cauliflower, radish, onion?	Yes..... No .....	
N6	Any ripe papaya, mangoes or other fruits that are yellow or orange inside?	Yes..... No .....	
N7	Any other fruits, e.g. banana, papaya, sithphal, grapefruit, apple, orange, jackfruit, jambu fruit, plums, melon, tomato, date, lemon, etc. ?	Yes..... No .....	
N8	Any meat, such as, liver, beef, poultry, lamb, pork, etc.?	Yes..... No .....	
N9	Any eggs?	Yes..... No .....	
N10	Any fresh or dried fish or shellfish?	Yes..... No .....	
N11	Any legumes/pulses, e.g. Bengal gram, black gram dal, lentil, Khesarl?	Yes..... No .....	
N12	Any Milk or Milk products, e.g. cow milk, buffalo milk, goat milk, yogurt, curd, cheese?	Yes..... No .....	

N13	Any foods prepared using fat, e.g., oil, butter, dalda or ghee?	Yes..... No .....	
N14	Any sugar or honey?Example:sugar, gur, honey, chocolate	Yes..... No .....	

**MODULE O. MOTHER’S HAND WASHING HABITS AND DISPOSAL OF CHILD’S FECES**

	QUESTION	CODE/RESPONSE	SKIP
<b>Hand washing habits</b>			
O1	<p>Please mention all of the times when it is important to wash your hands.</p> <p><b>Any other time besides this?</b></p> <p><b>Any other time besides this?</b></p> <p><b>[DO NOT READ THE ANSWERS]</b></p>	<p>Before eating ..... 01</p> <p>After eating..... 02</p> <p>Before praying ..... 03</p> <p>Before breastfeeding or feeding a child ..... 04</p> <p>Before cooking or preparing food ... 05</p> <p>After defecation/urination ..... 06</p> <p>After cleaning a child that has defecated/changing a child’s diaper ..... 07</p> <p>When my hands are dirty ..... 08</p> <p>After cleaning the toilet or potty..... 09</p> <p>Other (specify) ..... 10</p> <p>DNK..... 98</p>	

O2	<p>Can you please show me where members of your household <u>most often</u> wash their hands?</p> <p><b>[OBSERVE AND CIRCLE RESPONSE CODE]</b></p>	<p>Inside/within 10 paces of the toilet facility ..... 1</p> <p>Inside/within 10 paces of the kitchen/cooking place ..... 2</p> <p>Elsewhere in home or yard..... 3</p> <p>Outside yard ..... 4</p> <p>No specific place ..... 5</p> <p>No permission to see ..... 6</p>	<p><b>5,6→O5</b></p>
O3	<p>Is water present at the place?</p> <p><b>[OBSERVE:If there is a tap or pump see if water comes out. If there is a container, see if water is in it.]</b></p>	<p>Yes ..... 1</p> <p>No ..... 2</p>	
O4	<p>Is soap, detergent, ash or clay present at the place?</p> <p><b>[OBSERVE AND CIRCLE ALL RESPONSE CODES]</b></p>	<p>None ..... 1</p> <p>Bar soap ..... 2</p> <p>Detergent (powder/liquid/paste)..... 3</p> <p>Liquid soap (including shampoo) ..... 4</p> <p>Ash or clay ..... 5</p>	
<b>Disposal of child's feces</b>			
O5	<p>The last time (NAME) passed stool, where did he/she defecate?</p>	<p>Used potty ..... 1</p> <p>Used washable diaper ..... 2</p> <p>Used disposable diaper ..... 3</p> <p>Went in his/her clothes ..... 4</p> <p>Went in house/yard..... 5</p> <p>Went outside of house/yard ..... 6</p> <p>Used latrine ..... 7</p> <p>Other ..... 8</p>	<p><b>7→ P1</b></p>

O6	The last time (NAME) passed stool, where were his/her feces disposed?	Dropped into toilet facility/latrine .... 1 Buried ..... 2 Put into container for trash ..... 3 In yard..... 4 In sink or tub..... 5 Thrown into waterway ..... 6 Washed or rinsed away ..... 7 Left at the same place where the child defecated ..... 8 Threw it away to bush/outside of the house..... 9	<b>7→ O7</b>  <b>All Others→P1</b>
O7	If “washed or rinsed away”, probe where the waste water was disposed.	Dropped into toilet facility ..... 1 Put into container for trash ..... 2 In yard..... 3 Outside of yard ..... 4 Into sink or tub ..... 5 Thrown into waterway ..... 6	

## MODULE P. FEEDING OF CHILDREN 0-23 MONTHS

\*\*\*For index child if 0-23 months\*\*\*

OR

\*\*\*If the index child is not 0-23 months, and another child in the household is 0-23 months, ask Module P and Module Q questions for the child that is 0-23 months\*\*\*

Check the index child's birth date (question L3a). Was the index child (or any child in the household) born on today's date in 2012 or later? If so, he/she is 0-23 months. If no children are 0-23 months, skip to Module R.

**To mother:** Now I would like to ask you about what your child eats and drinks.

	QUESTION	CODE/RESPONSE	SKIP
P0	Is this the index child?	Yes..... No.....	<b>1 → P1</b>
P0.1	Enter child's roster number from Module C		
P1	Has (NAME) ever been breastfed?	Yes..... No..... DNK .....	<b>2,8 → P5</b>
P2	Do you currently breastfeed your child?	Yes..... No..... Not applicable..... DNK .....	<b>2,3,8 → P5</b>
P3	Was (NAME) breastfed yesterday during the day or at night?	Yes..... No..... DNK .....	
P4	Did you feed any other food even water your child without breastfeeding in last 24 hours?	Yes..... No.....	

		Not applicable .....	
		DNK .....	
P5	[Now I would like to ask you about some medicines and vitamins that are sometimes given to infants.]  Was (NAME) given any vitamin drops or other medicines as drops yesterday during the day or at night?	Yes..... No..... DNK .....	
		NR.....	
P6	Was (NAME) given any oral rehydration solution yesterday during the day or night?  (salt/sugar saline, Labon-gur, packet saline, rice poser)?	Yes..... No..... DNK .....	

### Child's consumption of liquids (0-23 Months)

Read the questions below. Read the list of liquids one by one and circle applicable code.

	Next I would like to ask you about some liquids that (NAME) may have had yesterday during the day or night.		
	<b>P7:</b> Did (NAME) have the following water or liquids?		<b>P8:</b> How many times yesterday during the day or at night did (NAME) consume any....?
	a. Plain water?	Yes..... 1 No ..... 2 DNK..... 8	
	b. Infant formula/baby formula bought with money?	Yes..... 1→ No ..... 2 DNK..... 8	Times ..... <input type="text"/> <input type="text"/> DNK..... 98
	c. Milk, such as tinned, powdered or fresh animal milk?	Yes..... 1→ No ..... 2 DNK..... 8	Times ..... <input type="text"/> <input type="text"/> DNK..... 98

	d. Juice or juice drinks?	Yes .....1 No ..... 2 DNK..... 8		
	e. Clear broth?	Yes .....1 No ..... 2 DNK..... 8		
	f. Yogurt?	Yes.....1 → No ..... 2 DNK..... 8	Times ..... <input type="text"/> <input type="text"/> DNK..... 98	
	g. Thin porridge?	Yes .....1 No ..... 2 DNK..... 8		
	h. Any other liquids?	Yes .....1 No ..... 2 DNK..... 8		

**Child's consumption of solids (0-23 Months)**

As the respondent recalls foods, in the table below circle the response in the column next to the food group. If the food is not listed, write it down in the "OTHER FOODS" box (P9).

Ask the mother: Please describe everything that (NAME) ate yesterday during the day or night, whether at home or outside the home.

**Use these probes.**

**(a)** Think about when (NAME) first woke up yesterday. Did (NAME) eat anything then?

IF YES: Please tell me everything (NAME) ate then ... anything else?

Keep asking until respondent indicates nothing else. Then continue to question (b).

**(b)** What did (NAME) do after that? Did (NAME) eat anything then?

IF YES: Please tell me everything (NAME) ate then... anything else?

Keep asking until respondent indicates nothing else.

**Keep repeating question (b) until the respondent says the child went to sleep until the next day.**

If respondent mentions anything like a porridge, sauce or stew, probe:

**(c)** What ingredients were in that (MIXED DISH)?

Anything else?

p9	<p><b>OTHER FOODS:</b></p> <p>Write in other foods mentioned by mother, not listed below, here.</p> <p>-----</p>	<p>Yes ..... 1</p> <p>No ..... 2</p>	
P10A	Any cereals: porridge, bread, rice, noodles, or other foods made from cereals	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK ..... 8</p>	
P10B	Pumpkin, carrots, squash or sweet potatoes that are yellow or orange inside	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK ..... 8</p>	
P10C	White potatoes, white yams, manioc, cassava, or any other foods made from roots	<p>Yes ..... 1</p> <p>No ..... 2</p>	

		DNK..... 8	
P10D	Any dark green leafy vegetables, such as ipomoea, amaranth, spinach, parwar sag, and drumstick leaves	Yes ..... 1 No ..... 2 DNK..... 8	
P10E	Ripe mangoes, ripe papayas or other fruits that are yellow or orange inside	Yes ..... 1 No ..... 2 DNK..... 8	
P10F	Any other fruits or vegetables	Yes ..... 1 No ..... 2 DNK..... 8	
P10G	Liver, kidney, heart or other organ meats	Yes ..... 1 No ..... 2 DNK..... 8	
P10H	Any meat, such as beef, pork, lamb, goat, chicken, or duck	Yes ..... 1 No ..... 2 DNK..... 8	
P10I	Eggs	Yes ..... 1 No ..... 2 DNK..... 8	
P10J	Fresh or dried fish, shellfish, or seafood	Yes ..... 1 No ..... 2 DNK..... 8	
P10K	Any foods made from beans, peas, lentils, nuts or seeds, such as Bengal gram, black gram, dal, Khesari	Yes ..... 1 No ..... 2 DNK..... 8	
P10L	Cheese, yogurt, curd or other milk products	Yes ..... 1	

		No ..... 2 DNK ..... 8	
P10M	Any oil, butter, dalda or ghee or foods made with any of these	Yes ..... 1 No ..... 2 DNK ..... 8	
P10N	Any sweet foods such as honey, chocolates, sweets, candies, pastries, cakes or biscuits	Yes ..... 1 No ..... 2 DNK ..... 8	
P10O	Condiments for flavor, such as chilies, spices, herbs, or fish powder	Yes ..... 1 No ..... 2 DNK ..... 8	
P10P	Grubs, snails, or insects	Yes ..... 1 No ..... 2 DNK ..... 8	
P10Q	Foods made with red palm oil, red palm nuts, or red palm nut pulp sauce	Yes ..... 1 No ..... 2 DNK ..... 8	
<b>INTERVIEWER:</b> CHECK CATEGORY A-Q. IF NO IN ALL CATEGORIES, THEN GO TO P11. IF ONLY ONE CATEGORY IS CIRCLED AS YES OR ALL CATEGORY AS DNK, THEN GO TO P12.			
P11	Did (NAME) eat any solid, semi-solid, or soft foods yesterday during the day or at night?	Yes ..... 1 No ..... 2 DNK ..... 8  If yes, probe: What kinds of foods did (NAME) eat? Go back to P7 and record foods eaten. Then continue with P10.	2,8 → P13
P12	How many times did (NAME) eat solid, semi-solid, or soft foods other than liquids	Number of times..... <input type="text"/> <input type="text"/>	

	yesterday during the day or night?	DNK..... 98	
P13	Did (NAME) drink anything from a bottle with a nipple yesterday during the day or night?	Yes ..... 1 No ..... 2 DNK..... 8	

**MODULE Q. IMMUNIZATION OF CHILDREN 0-23 MONTHS AND MICRONUTRIENT SUPPLEMENTATION (MONIMIX/OTHER SPRINKLES)**

**\*\*\*If the index child is not 0-23 months, and another child in the household is, ask Module P and Module Q questions for the child that is 0-23 months\*\*\***

Circle the code number of the response and follow the arrowed skip codes.

	QUESTION	CODE/RESPONSE	SKIP
Q1	Does the mother have a vaccination card for (NAME)? Have you seen it?	Yes, Seen .....1 Yes, Not Seen .....2 No Card .....3	2,3 → Q4

	QUESTION	CODE/RESPONSE	SKIP																																																																												
Q2	<p>(1) Copy vaccination date for each vaccine from the card.</p> <p>(2) Write "44" in "Day" column if card shows that a vaccination was given but no date is recorded.</p>	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;">Day</th> <th style="text-align: center;">Month</th> <th style="text-align: center;">Year</th> </tr> </thead> <tbody> <tr> <td>BCG</td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td>PO (OPV)</td> <td></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>P1 (OPV)</td> <td><input type="text"/><input type="text"/></td> <td></td> <td></td> </tr> <tr> <td>P2 (OPV)</td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td>P3 (OPV)</td> <td></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>DPT/Penta-1</td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td>DPT/Penta-2</td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td>DPT/Penta-3</td> <td></td> <td></td> <td></td> </tr> <tr> <td>MEA/MM</td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td></td> <td><input type="text"/><input type="text"/></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td></td> <td></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td></td> <td></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td></td> <td></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td></td> <td></td> <td><input type="text"/></td> <td><input type="text"/><input type="text"/><input type="text"/></td> </tr> <tr> <td></td> <td></td> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </tbody> </table>		Day	Month	Year	BCG	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	PO (OPV)		<input type="text"/>	<input type="text"/>	P1 (OPV)	<input type="text"/> <input type="text"/>			P2 (OPV)	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	P3 (OPV)		<input type="text"/>	<input type="text"/>	DPT/Penta-1	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>	DPT/Penta-2	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>	DPT/Penta-3				MEA/MM	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>			<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>			<input type="text"/>	<input type="text"/>			<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>			<input type="text"/>	<input type="text"/>	Skip to Q10 if all vaccines given and recorded in card
	Day	Month	Year																																																																												
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	QUESTION	CODE/RESPONSE	SKIP
Q3	<p>Has (NAME) received any vaccinations that were not recorded on this card?</p> <p><i>Record "Yes" only if respondent mentions BCG, POLIO 1-3, Pentavalent 1-3, and/or measles/MMR vaccine(s)</i></p> <p><b>Probe for vaccinations and write "66" in the corresponding day column in Question Q2</b></p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK..... 8</p>	2,8→Q10
Q4	<p>Please tell me if (NAME) received any of the following vaccinations:</p> <p>A BCG vaccination against tuberculosis, that is, an injection in the left shoulder that caused a scar?</p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK..... 8</p>	
Q5	<p>Polio vaccine that is, drops in the mouth?</p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK..... 8</p>	2,8→ Q7
Q6	<p>How many times did (NAME) receive polio vaccine:</p>	<p>Times ..... <input type="checkbox"/></p>	
Q7	<p>DPT /Pentavalent vaccination, that is, an injection given in the thigh or buttocks, sometimes at the same time as polio drops?</p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK..... 8</p>	2,8→ Q9
Q8	<p>How many times?</p>	<p>Number of times..... <input type="checkbox"/></p>	
Q9	<p>An injection given to prevent measles/MMR after 9 months of age?</p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK..... 8</p>	

	QUESTION	CODE/RESPONSE	SKIP
Q10	<p>Has (NAME) received a vitamin A capsule like this in the last 6 months?</p> <p><b>Interviewer: Check vaccination card if available. Show blue and red Vitamin A capsules as either may have been given depending on child's age.</b></p>	<p>Yes ..... 1</p> <p>No ..... 2</p> <p>DNK..... 8</p>	

Q11	Are you or someone else adding any Moni-mix or other sprinkles packets into (NAME's) food?	Yes ..... 1 No ..... 2 DNK..... 8	
Q12	Do you think that children of age 6 to 59 months (less than 5 years) can suffer from micronutrient deficiencies?	Yes ..... 1 No ..... 2 DNK..... 8	
Q13	Do you give your child any drop/tablet/syrup/packet so that the child does not suffer from iron deficiency?	Yes ..... 1 No ..... 2 DNK..... 8	2,8→ R1
Q14	What do you give to child to prevent iron deficiency?  [MULTIPLE RESPONSE]	Iron tablet..... 01 Iron syrup..... 02 MNP ..... 03 Pustikona ..... 04 Monimix..... 05 Mymix ..... 06 Multivitamin tablet..... 07 Multivitamin syrup ..... 08 Homeopathik medicine ..... 09 Quack medicine ..... 10 Other (specify) ..... 11 DNK..... 98	

## MODULE R. DIARRHEA AMONG CHILDREN 0-59 MONTHS

**INSTRUCTIONS:** Administer module R for the selected index child between 0-59 months

QUESTION	CODE/RESPONSE	SKIP
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	QUESTION	CODE/RESPONSE	SKIP
R1	Has (NAME) had diarrhea (having 3 or more loose stools in 24 hours) in the last 2 weeks?	Yes.....1 No.....2	<b>2→S1</b>
R2	Now I would like to know how much (NAME) was given to drink during the diarrhea (including breastmilk). Was he/she given less than usual to drink, about the same amount, or more than usual to drink? ++  <i>If "less", probe: Was he/she given much less than usual to drink or somewhat less?</i>	Much less .....1 Somewhat less .....2 About the same.....3 More.....4 Nothing to drink.....5 DNK .....8	
R3	When (NAME) had diarrhea, was he/she given less than usual to eat (solid/semi-solid food), about the same amount, more than usual, or nothing to eat? If "less", probe: Was he/she given much less than usual to drink or somewhat less?	Much less .....1 Somewhat less .....2 About the same.....3 More.....4 Nothing to drink.....5 DNK .....8	
R4	Are you still breastfeeding (NAME)?	Yes.....1 No.....2	<b>2→R6</b>
R5	Did you continue to breastfeed (NAME) during diarrhea?	Continued.....1 Did not continue .....2	
R6	Was anything given to (NAME) to treat the diarrhea?  [MULTIPLE RESPONSE]	A. Homemade (sugar/salt) saline ..... 01 B. Homemade (Labon-gur) saline..... 02 C. Packet saline/ORS ..... 03 D. Rice poser..... 04 E. Pill/capsule/syrup ..... 05 F. Injection ..... 06 G. Intravenous ..... 07 H. Home remedies/herbal medicine/ plants ..... 08 I. Plain drinking water ..... 09 J. Others (Specify)..... 11 K. Did not give anything ..... 12	

**MODULE S: Additional information on respondent for Part III**

**Information on respondent for Part III: Participation in SHOUHARDOII**

	QUESTION	CODE/RESPONSE	SKIP
S1	Are you a member of an EKATA group?	Yes..... 1 No ..... 2	2→ S4
S2	How often does the EKATA group usually meet?	Once a week .....1 Once a month .....2 Once a year .....3	
S3	How many EKATA group meetings have you attended in the last year (since last December)?	[ ]	
S4	Are you a member of a SHOUHARDO II savings group?	Yes..... 1 No ..... 2	
S5	Have you attended a SHOUHARDO II courtyard session (UthanBoithok) with other mothers on the health and nutrition of mothers and children?	Yes..... 1 No ..... 2	1→ S8
S6	How many of these courtyard sessions have you attended in the last year (since last December)?	[ ]	
S7	What subjects did you learn about at the courtyard sessions? <b>(Read each session type to enumerator)</b>		
S7a	Antenatal care (care for pregnant women)	Yes..... 1 No ..... 2 DNK ..... 8	

S7b	Food and nutrition for pregnant women and lactating mothers	Yes..... 1 No ..... 2 DNK ..... 8
S7c	Post-natal care for mothers and babies	Yes..... 1 No ..... 2 DNK ..... 8
S7d	Breastfeeding and complementary feeding of children	Yes..... 1 No ..... 2 DNK ..... 8
S7e	Children's illnesses: ARI, Diarrhoea	Yes..... 1 No ..... 2 DNK ..... 8
S7f	Immunization	Yes..... 1 No ..... 2 DNK ..... 8
S7g	Growth monitoring and promotion (GMP)	Yes..... 1 No ..... 2 DNK ..... 8
S7h	Good hygiene practices (e.g., hand washing, disposal of feces)	Yes..... 1 No ..... 2 DNK ..... 8
S7i	Safe drinking water/Sanitary latrine	Yes..... 1 No ..... 2 DNK ..... 8

S7j	Health in disaster	Yes..... 1 No ..... 2 DNK ..... 8	
S7k	Physical and mental torture during pregnancy	Yes..... 1 No ..... 2 DNK ..... 8	
S8	Have you attended a SHOUHARDO II cooking and feeding demonstration (khichuri) session?	Yes..... 1 No ..... 2	
S9	Does the SHOUHARDO II project have a place where you can take your child/children to be weighed and measured each month?	Yes..... 1 No ..... 2	<b>2→S11</b>
S10	How many months in the last year have you taken at least one of your children to be weighed and measured in the last year (since last December?).	[ ]	
S11	Have you ever received a food ration (wheat, oil or split peas) from the SHOUHARDO II program?	Yes..... 1 No ..... 2	<b>2→S15</b>
S12	Did you receive a food ration every month since last December?	Yes..... 1 No ..... 2	<b>2→S15</b>
S13	How many months since last December did you NOT receive a food ration?	[ ]	
S14	Why did you not receive a food ration in every month?	Not eligible (not pregnant or lactating) ..... 1 Did not pick up the ration ..... 2 Ration not available ..... 3	



### Information on respondent for Part III: Time constraints

	QUESTION	CODE/RESPONSE	SKIP
S14.1	Is the current respondent the same respondent to respond to Module J2?	Yes ..... No .....	<b>1→ S29</b>

	QUESTION	CODE/RESPONSE	SKIP
S15	Do you do any agricultural production, gardening, or animal raising?	Yes .....1 No .....2	<b>2→ S17</b>
S16	On a typical day in the last month, how many hours did you spend on these activities?	[ ]	
S17	Do you do any post-harvest activities like threshing?	Yes .....1 No..... 2	<b>2→ S19</b>
S18	On a typical day in the last month, how many hours did you spend on post-harvest activities?	[ ]	
S19	Do you earn any cash income?	Yes .....1 No..... 2 .....	<b>2→ S21</b>
S20	On a typical day in the last month, how many hours did you spend earning cash income?	[ ]	
S21	Do you do any housework, like cooking, washing dishes and clothes, fetching wood and water?	Yes .....1 No..... 2	<b>2→ S23</b>
S22	On a typical day in the last month, how many hours did you spend on housework?	[ ]	
S23	Do you take care of any children?	Yes .....1 No.....2	<b>2→ S25</b>
S24	On a typical day in the last month, how many hours did you spend taking care of children?	[ ]	
S25	During the daytime do you spend time doing other things like socializing, watching TV, taking naps, or reading?	Yes .....1	<b>2→ S27</b>

		No.....2	
S26	On a typical day in the last month, how many hours did you spend in these kinds of “leisure” activities where you were not working?	[ ]	
S27	Imagine ten steps, where on the bottom, the first step, is a person who spends no time in the day doing these leisure activities, and on the highest step, the 10 <sup>th</sup> , is a person who spends the whole day doing them  [INSTRUCTION: Show picture of steps].  On a typical day in the last month, which step were you on?	[ ]	
S28	Which step were you on five years ago (before SHOUHARDO II began)?	[ ]	

**Information on respondent for Part III: Decision making in household**

**INSTRUCTION:** First answer Question S29 to determine whether the respondent should answer the rest of the questions in this module.

	QUESTION	CODE/RESPONSE	SKIP
S29	Is the respondent for PART III also the respondent for PART II?	Yes.....1 No .....2	1 → T0

**Decision making in household**

	QUESTION	CODE/RESPONSE	SKIP
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	QUESTION	CODE/RESPONSE	SKIP
	<p>In the last year, to what extent have you been able to make the following kinds of decisions?</p> <p><b>[INSTRUCTION:</b> First read the possible responses. Then list each item (S30.1 – S30.12) one-by-one and record code number of response.]</p> <p>Code list</p> <p>1 = Can decide alone</p> <p>2 = Can decide with husband or other adult male family member</p> <p>3 = Husband makes decision after discussion with wife</p> <p>4 = Not involved in decision</p> <p>5 = Not applicable (Decision not made)</p>		
S30.1	Buying small food items, groceries, toiletries	<input type="checkbox"/>	
S30.2	Buying clothing for yourself and your children	<input type="checkbox"/>	
S30.3	Spending money that you yourself have earned	<input type="checkbox"/>	
S30.4	Buying or selling major household assets (land, livestock, crops)	<input type="checkbox"/>	
S30.5	Buying or selling jewelry	<input type="checkbox"/>	
S30.6	Use of loans or savings	<input type="checkbox"/>	
S30.7	Expenses for your children’s education	<input type="checkbox"/>	
S30.8	Expenses for your children’s marriage	<input type="checkbox"/>	
S30.9	Medical expenses for yourself or your children	<input type="checkbox"/>	
S30.10	Expenses for family planning (contraceptives)	<input type="checkbox"/>	
S30.11	To move to shelter during time of disaster	<input type="checkbox"/>	
S30.12	Actively participate and involved in salish decision making	<input type="checkbox"/>	

	QUESTION	CODE/RESPONSE	SKIP
S31	<p>Imagine ten steps, where on the bottom, the first step, is a woman who can make none of these types of decisions, and on the highest step, the 10<sup>th</sup>, is a person who can make all of them.</p> <p>[INSTRUCTION: Show picture of steps].</p> <p>On a usual day in the last month, which step were you on?</p>	[ ]	
S32	Which step were you on five years ago (before SHOUHARDO II began)?	[ ]	

**MODULE T. HEIGHT AND WEIGHT OF ALL CHILDREN IN HOUSEHOLD 0-59 MONTHS AND MOTHER**

**\*\*\* For ALL children 0-59 months in household \*\*\***

[INSTRUCTION: Request permission of the respondent to measure her height and weight and that of her children under 5]

	QUESTION	CODE/RESPONSE		
		Child 1	Child 2	Child 3
T0	<b>Interviewer:</b> Write in the line number of the child from the right hand column of Question L2.	□	□	□
T1	<b>Interviewer:</b> Write in the birth date of the child from Question L2	Day.....□□ Month.....□□ Year..□□□□	Day .....□□ Month.....□□ Year ..□□□□	Day.....□□ Month.....□□ Year .□□□□
<p>Interviewer: If the child was born on TODAY's DATE in 2012 or later, he/she is 0-23 months. Measure length of child lying down.</p> <p>If the child was born before TODAY's DATE in 2012 or earlier, he/she is 24 to 59 months. Measure standing height.</p>				
T2	Sex of child	Male..... 1 Female ..... 2	Male .....1 Female.....2	Male .....1 Female.....2
T3	Height or length of child in centimeters  <b>988 = NOT MEASURED</b>	□□□.□cm	□□□.□cm	□□□.□cm
T4	Height of mother or caregiving centimeters	□□□.□cm	□□□.□cm	□□□.□cm

	QUESTION	CODE/RESPONSE		
		Child 1	Child 2	Child 3
T5	Weight of child (in kilograms)	□□.□□ kg	□□.□□ kg	□□.□□ kg
T6	Weight of the mother or caregiver(in kilograms)	□□.□□ kg	□□.□□ kg	□□.□□ kg
T7	Date of height measured/weighed (today)	Day.....□□ Month.....□□ Year..□□□□	Day .....□□ Month.....□□ Year ..□□□□	Day.....□□ Month.....□□ Year .□□□□
T8	Result for child	Child measured..... 1 Child sick..... 2 Child not present ..... 3 Child refused..... 4 Mother refused ..... 5 Other (Specify)..... 6	Child measured .....1 Child sick.....2 Child not present.....3 Child refused .....4 Mother refused .....5 Other (Specify) .....6	Child measured.....1 Child sick.....2 Child not present .....3 Child refused .....4 Mother refused .....5 Other (Specify) .....6

	QUESTION	CODE/RESPONSE	
		Child 4	Child 5
T0	<b>Interviewer:</b> Write in the line number of the child from the right hand column of Question L2.	<input type="text"/>	<input type="text"/>
T1	<b>Interviewer:</b> Write in the birth date of the child from Question L1	Day..... <input type="text"/> <input type="text"/> Month..... <input type="text"/> <input type="text"/> Year.. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Day ..... <input type="text"/> <input type="text"/> Month..... <input type="text"/> <input type="text"/> Year .. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
T2	Sex of child	Male..... 1 Female ..... 2	Male .....1 Female.....2
T3	Height or length of child in centimeters  <b>988 = NOT MEASURED</b>	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> cm	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> cm
T4	Height of mother or caregiver in centimeters	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> cm	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> cm
T5	Weight of child (in kilograms)	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> kg	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> kg
T6	Weight of the mother or caregiver(in kilograms)	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> kg	<input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> kg
T7	Date of height measured/weighed	Day..... <input type="text"/> <input type="text"/>	Day ..... <input type="text"/> <input type="text"/>

	QUESTION	CODE/RESPONSE	
		Child 4	Child 5
	(today)	Month..... <input type="text"/> <input type="text"/> Year.. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Month..... <input type="text"/> <input type="text"/> Year .. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
T8	Result for child	Child measured..... 1 Child sick..... 2 Child not present ..... 3 Child refused..... 4 Mother refused ..... 5 Other (Specify)..... 6	Child measured .....1 Child sick.....2 Child not present.....3 Child refused .....4 Mother refused .....5 Other (Specify) .....6

	RECORD TIME THE INTERVIEW ENDED.	HOUR ..... <input type="text"/> <input type="text"/> MINUTE ..... <input type="text"/> <input type="text"/>
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## Annex 4: Sample Weights

Calculation of sampling weights starts with construction of the design weight for units within each strata, where strata are denoted  $i=1, \dots, 8$ . The design weights are the reciprocal of each unit's probability of selection into the sample:

$$w_{i,design} = \frac{1}{p_i},$$

where  $p_i$  is the probability of selection.

### A. Household-level sampling weights

The household sampling weights are constructed by first calculating the design weight and response rate (rr) for households in each stratum as follows.

$$w_{i,hh,design} = \frac{\text{Proportion of population of households in stratum } i}{\text{Proportion of planned sample households in stratum } i}$$

$$rr_{i,hh} = \frac{\text{\# of households with completed questionnaires in stratum } i}{\text{\# of households sampled in stratum } i}$$

The final weight is the design weight divided by the response rate:

$$\text{hh sampling weight} = w_{i,hh} = \frac{w_{i,hh,design}}{rr_{i,hh}}.$$

### B. Child sampling weights

Construction of the child-level sampling weights starts with the household-level design weight as an approximation of the child-level design weight.<sup>4</sup>

$$w_{i,child,design} = w_{i,hh,design}.$$

The response rate takes into account both the household response rate and the fact that all under-5 children listed in a household won't be available for anthropometric measurements.

$$rr_{i,child} = rr_{i,hh} * \frac{\text{\# of completed child questionnaires in stratum } i}{\text{Total \# of hhs with completed hh questionnaires with children under five in stratum } i}$$

The final weight is the design weight divided by the response rate:

$$\text{child sampling weight} = w_{i,child} = \frac{w_{i,child,design}}{rr_{i,child}}$$

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<sup>4</sup> The proportion of households with children under five in the population and sample is not known in advance.

## Annex 5: IPTT matrix and SAPQ

Indicator	Target	IPTT Baseline (computed baseline) <sup>†</sup>	Midterm	Endline	Percent Difference (Endline- Baseline)	Significance level	Target met? Percent difference (Endline-Target)
<b>SO 1: "Availability of" and "access to" nutritious foods enhanced and protected for 370,000 poor &amp; extreme poor (PEP) households</b>							
Average household dietary diversity score	<b>6.0</b>	5.1 (4.8)	5.9	8.7	81.3	*	45.0
Average number of months of adequate household food provisioning	<b>8.0</b>	6.8 (5.9)	9.9	11.0	86.4	*	37.5
<b>SO 2: Improved health, hygiene and nutrition status of 176,706 children under 2 years of age</b>							
Percent of underweight children under five years of age (0-59 months)	<b>38.4</b>	40.8 (42.2)	34.4	35.9	-14.9	*	-8.1
Females	<b>34.6</b>	36.6 (37.2)	34.9	36.4	-2.2		5.2
Males	<b>42.2</b>	44.6 (46.7)	33.4	34.3	-26.6	*	-18.7
Percent of stunted children under five years of age (6-59 months)	<b>55.1</b>	61.7	52.7	50.4	-18.3	*	-11.4
Females	<b>51.2</b>	56.5	52.2	47.8	-15.3	*	-6.6
Males	<b>58.9</b>	66.1	53.2	49.7	-24.9	*	-15.6
Percent of children under age two who had diarrhea in the prior two weeks	<b>10.3</b>	14.7 (13.8)	11.6	8.1	-41.3		-21.4
Percent of children underweight under the age of 2 years (0-23 months)	<b>31.1</b>	35.3 (33.2)	32.1	29.5	-11.1		-5.1
Percent of children immunized against 8 diseases by 12 months of age	<b>82.0</b>	59.9 (58.6)	74.9	73.0	24.6	*	-11.0
Percent of pregnant and lactating women taking iron supplements in last 7 days	<b>45.0</b>	16.1 (15.2)	29.8	52.0	242.1	*	15.6
Prevalence of exclusive breast feeding of children under six months	<b>66.2</b>	62.2 (64.1)	66.4	62.2	-3.0		-6.0

Percent of mothers who feel it is important to wash hands at five critical times <sup>£</sup>	35.0	na (9.8)	10.9	29.8	204.1	*	-14.9
Number of people in target areas with improved access to sanitation facilities	60.0	26.3 (20.3)	32.4	52.8	160.1	*	-12.0
Percent of children 6–23 months of age who receive a minimum acceptable diet	20.0	10.6 (8.7)	17.5	47.9	450.6	*	139.5
Number of people in target areas with improved access to drinking water supply	80.0	61.1 (59.5)	76.3	77.9	30.9	*	-2.6
<b>SO 3: PEP women and adolescent girls empowered in their families, communities and Union Parishad</b>							
Percent of women control over economic resources	25.0	10.5 (5.7)	11.3	19.8	247.4	*	-20.8
<b>SO 5: Targeted community members and government institutions are better prepared for, mitigate, and respond to disasters and adapt to climate change</b>							
Percent of PEP households distress selling	7	12.5 (9.6)	9.5	9.8	2.1		40.0
Taka value of distress sale (PEP households)	15000	25,274 (19979)	21304	16231	-18.8		8.2

Note: Stars indicate difference is statistically significant at the 10% (\*) level

Note: Under column "Target met?", red indicates that the target was not met and green indicates target was met (or that endline and target were not significantly different)

Note: There are no impact/outcome indicators in the SHOUHARDO II Indicator Performance Tracking Table (IPTT) under SO4.

£ The five critical times are: Before eating, before breastfeeding or feeding a child, before cooking or preparing food, after defecation/urination, and after cleaning a child that has defecated/changing a child's diaper.

‡ Values in parenthesis are the baseline numbers computed by TANGO during midterm and endline analysis. Some of these numbers differ from the baseline numbers in IPTT indicator table.

## FFP Standardized Annual Performance Questionnaire (SAPQ) - FY 2011

### AWARDEE FOOD AID PROGRAM INFORMATION

<b>Awardee Name(s)</b>	CARE Bangladesh
<b>Host Country</b> <i>(or Countries, for Regional Programs)</i>	Bangladesh
<b>Program location(s) in the host country</b>	11 Districts located in the North and Mid Chars, Haor and Coast
<b>Program Start Date (mm/dd/yy)</b>	6/1/10
<b>Program Expiration Date (mm/dd/yy)</b>	5/31/15
<b>Program Name</b>	SHOUHARDO II (Strengthening Household Ability to Respond to Development Opportunities)
<b>Award Number</b>	AID-FFP-A-10-00010

### AWARDEE CONTACT INFORMATION

<b>Contact Name (person filling out the SAPQ)</b>	AKM Abdul Wadud
<b>Contact Email</b>	wadud@bd.care.org
<b>Contact Address</b>	CARE Bangladesh, 20-21 Kawran Bazar (Level 12), Dhaka 1215, Bangladesh
<b>Contact Phone</b>	+880-2-9112315

**0** Was your food aid program awarded in FY2011?

Yes/No

No

## SECTION 1: Data from a Representative Population-based Survey

This section asks for impact data coming from a quantitative survey such as a baseline or final evaluation

**1** Did your food aid program conduct a quantitative, population-based, statistically representative survey such as a baseline or final evaluation in FY11 (or in FY10 and you did not report the results in last year's SAPQ)?

Answer "Yes, '11" if you conducted a survey in FY11. Answer "Yes, '10" if you conducted a survey in FY10 but you did not report on it in last year's FY10 SAPQ because the final data were not yet available. If you conducted a survey in FY10 and already reported the results in the FY10 SAPQ, choose "No".

Yes/No

Yes, '11

**2** Which type of quantitative survey did your program conduct in FY11 (or in FY10 and you did not report the results in last year's SAPQ)?

Choose your answer from the drop-down menu:

Baseline Survey

**3** Are the final data from your program's survey available at this time?

Do not answer "Yes" if you have preliminary data only. If final data are not yet available, answer "No" and report on them in next year's SAPQ. Only final data should be entered into the SAPQ.

Yes/No

Yes

**4** Does your program aim to improve household food access?

A program that aims to improve household food access generally promotes agricultural production, agricultural product processing and marketing, microcredit and other income- and employment-generation activities

Yes/No

Yes

### 1A: Months of Adequate Food Provisioning (Impact Indicator)

**5** What is the estimated total number of households in your target geographic area?

How many households live in your target geographic area? (This is not the *sample* size, it's the *population* size)

FY 11

# households in target areas

584,003

**6** In the survey, did your program measure average number of months of (in)adequate food provisioning, following the standard FANTA methodology for this indicator?

Yes/No

Yes

**What was the average number of months of adequate food provisioning ?**

Fill out the table below with the final data from your survey. If you measured INADEQUATE instead of ADEQUATE months, convert your data to ADEQUATE months (12 - number of inadequate months). Only provide data if you used the standard FANTA methodology.

If this is a baseline survey, please also provide your final evaluation target for this indicator.

**7** If this survey is a final evaluation, please also provide the average number of months of adequate food provisioning data from the most recent population-based survey prior to FY11 (probably from your baseline survey). Indicate the year in which the data were collected.

Indicator	FY 11	Most recent FY prior to FY11 (enter n/a if FY11 was the baseline)		Final Evaluation Target	
	# months	From which FY?	# months	What FY is the final evaluation?	# of months
Average number of months of ADEQUATE food provisioning	7	FY	#	FY15	8

**1B: Household Dietary Diversity (Impact Indicator)**

**8** In the survey, did your food aid program measure household dietary diversity, following the standard FANTA methodology for this indicator?

See the "Definitions" tab for a description of the standard methodology for this indicator.

Yes/No
Yes

**What was the average household dietary diversity score ?**

Fill out the table below with the data from your survey. Only provide data if you used the standard FANTA methodology.

If this is a baseline survey, please also provide your final evaluation target for this indicator.

**9** If this survey is a final evaluation, please also provide the average dietary diversity score from the most recent population-based survey prior to FY11 (probably from your baseline survey). Indicate the year in which the data were collected.

Indicator	FY 11	Most recent FY prior to FY11 (enter n/a if FY11 was the baseline)		Final Evaluation Target	
	# of food groups	From which FY?	# of food groups	What FY is the final evaluation?	# of food groups
Average household dietary diversity score	5	FY	#	FY15	6

**10** Does your program aim to improve the nutritional status of children 0-24 months old?

Yes/No
Yes

**1C: Underweight (Impact Indicator)**

**11** In the survey, did your food aid program measure the prevalence of underweight (WAZ <-2) in children 0 - 59 months of age?

If you measured underweight for a different age group, or you used a different measure or cutoff, answer NO.

Yes/No
Yes

**What was the prevalence of underweight (WAZ <-2) in children 0 - 59 months of age?**

If this survey is a baseline survey, please also provide your final evaluation target for this indicator.

If this survey is a final evaluation, please also provide the underweight data from the most recent population-based survey prior to FY11 (probably from your baseline survey). Indicate the year in which the data were collected.

Indicator	FY 11	Most recent FY prior to FY11 (enter n/a if FY11 was the baseline)		Final Evaluation Target	
	% underw eight	From which FY?	% underw eight	What FY is the final evaluation?	% underw eight
% of underweight (WAZ<-2) children 0-59 months of age	41%	FY	#	FY15	38%

**13** What is the estimated total number of children 0-59 months of age, living in your target geographic area?

How many children 0-59 months live in your geographic area? (This is the population size, not the sample size)

FY 11
# 0-59 mo
319,683

### 1D: Stunting (Impact Indicator)

<b>14</b>	<p><b>In the survey, did your food aid program measure the prevalence of stunting (HAZ &lt;-2) in children 6 - 59 mo of age?</b></p> <p>If you measured stunting for a different age group, or you used a different measure or cutoff, answer NO.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Yes/No</td></tr> <tr><td style="text-align: center;">Yes</td></tr> </table>	Yes/No	Yes
Yes/No				
Yes				

<b>15</b>	<p><b>What was the prevalence of stunting (HAZ &lt;-2) in children 6 - 59 mo of age?</b></p> <p>If this survey is a baseline survey, please also provide your final evaluation target for this indicator.</p> <p>If this survey is a final evaluation, please also provide the stunting data from the most recent population-based survey prior to FY11 (probably from your baseline survey). Indicate the year in which the data were collected.</p>																			
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;"></th> <th style="width: 10%;">FY 11</th> <th colspan="2" style="width: 20%;">Most recent FY prior to FY11 (enter n/a if FY11 was the baseline)</th> <th colspan="2" style="width: 20%;">Final Evaluation Target</th> </tr> <tr> <th style="text-align: center;">Indicator</th> <th style="text-align: center;">% stunted</th> <th style="text-align: center;">From which FY?</th> <th style="text-align: center;">% stunted</th> <th style="text-align: center;">What FY is the final evaluation?</th> <th style="text-align: center;">% stunted</th> </tr> </thead> <tbody> <tr> <td>% of stunted (HAZ&lt;-2) children 6-59 months of age</td> <td style="text-align: center;">59%</td> <td style="text-align: center;">FY</td> <td style="text-align: center;">#</td> <td style="text-align: center;">FY15</td> <td style="text-align: center;">55%</td> </tr> </tbody> </table>		FY 11	Most recent FY prior to FY11 (enter n/a if FY11 was the baseline)		Final Evaluation Target		Indicator	% stunted	From which FY?	% stunted	What FY is the final evaluation?	% stunted	% of stunted (HAZ<-2) children 6-59 months of age	59%	FY	#	FY15	55%	
	FY 11	Most recent FY prior to FY11 (enter n/a if FY11 was the baseline)		Final Evaluation Target																
Indicator	% stunted	From which FY?	% stunted	What FY is the final evaluation?	% stunted															
% of stunted (HAZ<-2) children 6-59 months of age	59%	FY	#	FY15	55%															

<b>16</b>	<p><b>What is the estimated total number of children 6-59 months of age, living in your target geographic area?</b></p> <p>How many children 6-59 months of age live in your geographic area? (This is the <i>population</i> size, not the <i>sample</i> size.)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">FY 11</td></tr> <tr><td style="text-align: center;"># 6-59 mo</td></tr> <tr><td style="text-align: center;">292,591</td></tr> </table>	FY 11	# 6-59 mo	292,591
FY 11					
# 6-59 mo					
292,591					

## SECTION 2: Annual Monitoring Data

This section asks for data about direct beneficiaries, coming from your routine monitoring system

<b>17</b>	<p><b>Did your food aid program implement activities (deliver goods and services (assistance) to beneficiaries) in FY11?</b></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Yes/No</td></tr> <tr><td style="text-align: center;">Yes</td></tr> </table>	Yes/No	Yes
Yes/No				
Yes				

### 2A: Anthropometry (Monitoring Indicators)

<b>18</b>	<p><b>Did your food aid program implement activities to maintain or improve the nutritional status of beneficiaries in FY11?</b></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;">Yes/No</td></tr> <tr><td style="text-align: center;">Yes</td></tr> </table>	Yes/No	Yes
Yes/No				
Yes				

<b>19</b>	<p><b>What anthropometric indicators does your program use for regular monitoring of the nutritional status of beneficiaries?</b></p> <p>For each indicator, fill in the desired direction of change (increase or decrease) and the data for FY 11 and the previous year, FY 10. It is OK to leave prior year data blank if you do not have beneficiary data from the prior year.</p> <p>Fill out the table below with the ANTHROPOMETRIC indicators used by your program for annual monitoring of the nutritional status of your program's beneficiaries. Please write the precise definition for each indicator, including the measure used and the age group (e.g. % of children 0 - 23 mo old with WAZ &lt; -2). In other words, do not write simply "Malnutrition rate" or "Recovery rate" or "% graduating from feeding program" without explaining what anthropometric measure and cutoff is used.</p> <p>Please provide only ANTHROPOMETRIC indicators which are a measure of the physical body. Acceptable anthropometric measures include prevalence of stunting (height for age Z - HfA), underweight (weight for age - WfA), wasting (weight for height WfH), weight gain, growth faltering (trend of weight gain), body mass index (BMI), middle-upper arm circumference (MUAC); average HfA Z score (HAZ), WfA Z score (WAZ), WfH Z score (WHZ); proportion of children/adults recuperating to defined cutoffs (e.g. WAZ 80% median). Measures such as breastfeeding, vaccination rates, or numbers of ration recipients are NOT anthropometric.</p> <p>Only include data for indicators that you monitor <u>annually among direct beneficiaries</u>. These data will be based on regular monitoring of your program beneficiaries and not on a representative sample survey of a broader population. <b>DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION</b></p>																									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 10%;">Desired direction (+/-)</th> <th style="width: 10%;">FY 11 actual %</th> <th style="width: 10%;">FY 10 actual %</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">Indicators</td> <td></td> <td></td> <td></td> </tr> <tr> <td>19.1 % of children 0 - 23 mo old with WAZ &lt; -2</td> <td style="text-align: center;">- decrease</td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> <tr> <td>19.2</td> <td></td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> <tr> <td>19.3</td> <td></td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> <tr> <td>19.4</td> <td></td> <td style="text-align: center;">%</td> <td style="text-align: center;">%</td> </tr> </tbody> </table>		Desired direction (+/-)	FY 11 actual %	FY 10 actual %	Indicators				19.1 % of children 0 - 23 mo old with WAZ < -2	- decrease	%	%	19.2		%	%	19.3		%	%	19.4		%	%	
	Desired direction (+/-)	FY 11 actual %	FY 10 actual %																							
Indicators																										
19.1 % of children 0 - 23 mo old with WAZ < -2	- decrease	%	%																							
19.2		%	%																							
19.3		%	%																							
19.4		%	%																							

**2B: Behavior Change: Health, Nutrition, Hygiene (Monitoring Indicators)**

<b>20</b>	<b>Did your program implement activities to improve the health, nutrition or hygiene behaviors of beneficiaries in FY11?</b>	Yes/No
		Yes

**21** **What behavior change indicators does your program use for regular monitoring of beneficiaries?**

For each indicator, fill in data on the FY 11 indicator value (i.e. the result achieved) and the number of beneficiaries reached in FY11. Please provide future year targets for the indicator, as applicable.

Use the drop down menu to select the indicator on which you are reporting. Give the percentage (%) of **beneficiaries** adopting the improved health, nutrition or hygiene behaviors. You may take a census or a sample of your beneficiaries. **DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.** Only the indicators on the drop down menu can be included.

See FFP Information Bulletin 07-02 ([http://www.usaid.gov/our\\_work/humanitarian\\_assistance/ffp/fy08\\_ffpib\\_new\\_reporting.pdf](http://www.usaid.gov/our_work/humanitarian_assistance/ffp/fy08_ffpib_new_reporting.pdf)) for further information on these indicators. For indicators with an \*, the specific behaviors that comprise these indicators are to be defined by the awardee. See the "Definitions" tab for a definition of "beneficiaries".

Indicators	FY 11		Future Targets			
	actual %	# beneficiaries	FY 12	FY 13	FY 14	FY 15
	target %	target %	target %	target %	target %	
21.1 % children 0-6 months of age exclusively breastfed	%	#	63%	64%	65%	66%
21.2 % of women taking iron supplements in last 7 days	%	#	18%	20%	23%	25%
21.3	%	#	%	%	%	%
21.4	%	#	%	%	%	%

**2C: Agricultural Extension (Monitoring Indicator)**

<b>22</b>	<b>Did your food aid program provide farmers with extension/outreach services in FY11?</b>	Yes/No
		Yes

**23** **How many farmers (individuals, not households) received extension/outreach services in FY11?**

Please provide future year targets for number of farmer beneficiaries, as applicable.

FY 11	Future Targets			
	FY 12	FY 13	FY 14	FY 15
# farmers	# farmers	# farmers	# farmers	# farmers
4,580	60,425	75,839	75,839	75,839

<b>24</b>	<b>How many sustainable agricultural technologies did your program transfer in FY11?</b> See the "Definitions" tab for more information about "agricultural technologies"	# technologies
		4

**25** **What are the sustainable agricultural technologies your program made available for transfer in FY11?**

If you transferred more than 10 technologies, you can list the others in the comments column to the right.

25.1	Improved bed system
25.2	Improved pit/heap systems
25.3	Organic fertilizer
25.4	Compost preparation
25.5	
25.6	
25.7	
25.8	
25.9	
25.10	

<b>26</b>	<b>What is the minimum number of sustainable agricultural technologies your program would like an individual farmer to use/adopt as a result of your program's assistance?</b>	# technologies
		3

See the "Definitions" tab for a definition of "minimum number." This number should be less than the response to question 22.

<b>27</b>	<b>What percentage (%) of program beneficiaries (farmers) adopted the minimum number of technologies in FY11?</b> Please provide the future year targets, as applicable.  DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.	Future Targets				
		FY 11	FY 12	FY 13	FY 14	FY 15
		% beneficiary farmers				
		%	44%	50%	55%	55%

**2D: Disaster Early Warning Systems (Monitoring Indicator)**

<b>28</b>	<b>Did your food aid program assist communities to develop disaster early warning and response systems in FY11?</b> See the "Definitions" tab for a definition of "disaster early warning and response system".	Yes/No
		No

<b>29</b>	<b>How many communities does your program plan to assist to develop disaster early warning and response systems over the life of the award?</b>	# communities

<b>30</b>	<b>How many of your program's targeted communities had disaster early warning and response systems in place in FY11 as a result of your program's assistance?</b>  Please provide the future year targets for # of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have early warning systems in Year 1 and another 25 are added in Year 2, the Year 2 target would be 50, not 25.  DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.	Future Targets				
		FY 11	FY 12	FY 13	FY 14	FY 15
		# communities	# communities	# communities	# communities	# communities
		(Automatic Calculation) % of communities with disaster early warning systems in place	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

**2E: Infrastructure To Mitigate Shocks (Monitoring Indicator)**

<b>31</b>	<b>Did your food aid program assist communities to improve or develop physical infrastructure to mitigate the impact of shocks in FY11?</b> See the "Definitions" tab for a definition of "infrastructure"	Yes/No
		Yes

<b>32</b>	<b>How many communities does your program plan to assist to improve or develop infrastructure to mitigate the impact of shocks over the life of the award?</b>	# communities
		225

<b>33</b>	<b>What kinds of physical infrastructure did your program improve or develop in FY11?</b> If there are more than 5 kinds of infrastructure, you can list the others in the comments column to the right.
33.1	School Maintenance/Renovation/ Ground Raising
33.2	Flood Shelter cum School Development
33.3	Community Place Development
33.4	
33.5	

<b>34</b>	<b>How many of your program's targeted communities had improved physical infrastructure to mitigate the impact of shocks in FY11 as a result of your program's assistance?</b>  Please provide the future year targets for number of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have infrastructure in place in Year 1 and another 25 are added in Year 2, then the Year 2 target would be 50, not 25.  DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.	Future Targets				
		FY 11	FY 12	FY 13	FY 14	FY 15
		# communities	# communities	# communities	# communities	# communities
		16	76	136	181	225
	(Automatic Calculation) % of communities with disaster early warning systems in place	7%	34%	60%	80%	100%

**2F: Safety Nets (Monitoring Indicator)**

<b>35</b>	<p><b>Did your food aid program assist communities to strengthen safety nets to address the needs of their most vulnerable members in FY11?</b></p> <p>A community-based safety net supported under a Title II development program can be a broadly defined system for addressing the food security needs of a community's most vulnerable members during a shock. A community-based safety net is: managed and maintained by the community; internally resourced, at least in part; and can be year round or seasonal. Examples include community food banks or insurance schemes.</p>	Yes/No
		Yes

<b>36</b>	<p><b>How many communities does your program plan to assist to strengthen safety nets over the life of the activity?</b></p>	# communities
		905

<b>37</b>	<p><b>How many of your programs targeted communities that had safety nets in place in FY11 as a result of your program's assistance?</b></p> <p>Please provide the future year targets for number of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have safety nets in place in Year 1 and another 25 are added in Year 2, then the Year 2 target would be 50, not 25.</p> <p>DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.</p> <p align="center">(Automatic Calculation) % of communities with disaster early warning systems in place</p>	FY 11	Future Targets			
			FY 12	FY 13	FY 14	FY 15
		# communities	# communities	# communities	# communities	# communities
		0	452	814	905	905
		0%	50%	90%	100%	100%

**2G: Community Capacity (Monitoring Indicator)**

<b>38</b>	<p><b>Did your food aid program assist communities to strengthen community capacity in FY11?</b></p> <p>Community capacity refers to a community's ability to govern itself; to organize, analyze, plan, manage, problem-solve, implement actions, and represent its interests and participate in broader fora. This goes beyond targeted efforts to strengthen communities in nutrition, agriculture, infrastructure, early warning, or other topics covered elsewhere in the SAPQ.</p>	Yes/No
		Yes

<b>39</b>	<p><b>How many communities does your program plan to assist to strengthen community capacity over the life of the award?</b></p>	# communities
		1,509

<b>40</b>	<p><b>What are the components of community capacity that your program strengthened in FY11?</b></p> <p>Select from the drop down menu. If there are more than 10 components, you can list the others in the comments column to the right.</p>
	40.1 Analysis and planning capacity
	40.2 Implementation capacity
	40.3
	40.4
	40.5
	40.6
	40.7
	40.8
	40.9
	40.10

<b>41</b>	<p><b>How many of your program's targeted communities had strengthened community capacity in FY11 as a result of your program's assistance?</b></p> <p>Please provide the future year targets for number of communities, as applicable. Future targets should be cumulative. For instance, if 25 communities have strengthened capacity in Year 1 and another 25 are added in Year 2, then the Year 2 target would be 50, not 25.</p> <p>DO NOT PROVIDE DATA FROM A POPULATION BASED SURVEY SUCH AS A BASELINE OR FINAL EVALUATION.</p> <p align="center">(Automatic Calculation) % of communities with disaster early warning systems in place</p>	FY 11	Future Targets			
			FY 12	FY 13	FY 14	FY 15
		# communities	# communities	# communities	# communities	# communities
		1,509	1,509	1,509	1,509	1,509
		100%	100%	100%	100%	100%

Congratulations! You have finished the SAPQ