

**Mercy Corps Guatemala**

**PROCOMIDA Program:**

Award Number: AID-FFP-A-09-00005-00

**External Midterm Evaluation Report:  
Review and Reporting for PROCOMIDA's Community  
Food Diversification Program for Mother and Child**

07 February 2013

**Submitted to Mercy Corps Guatemala by:**

**Health and Development Consulting International (HDCi) LLC**

Liesl Messerschmidt, MPH, Director

[www.healthdevinternational.com](http://www.healthdevinternational.com)

[HDCinternational@gmail.com](mailto:HDCinternational@gmail.com)



# CONTENTS

- Contents ..... 1
- List of Tables ..... 2
- List of Figures ..... 3
- Acronyms..... 4
- Executive Summary ..... 6
  - Background ..... 6
  - Methodology..... 6
  - Summary of Key Findings..... 6
  - Summary of Recommendations..... 7
- 1. Introduction ..... 8
  - 1.1 Purpose of Evaluation and Summary of SOW ..... 8
- 2. Evaluation Methods..... 9
  - 2.1 Study Design ..... 9
    - Sample Size..... 9
    - Data Collection ..... 10
    - Analyls ..... 11
  - 2.2 Limitations ..... 12
  - 2.3 About This Report..... 12
- 3. Context ..... 13
- 4. Results..... 17
  - 4.1 IPTT ..... 17
  - 4.2 Correlations ..... 21
    - Correlation #1 ..... 22
    - Correlation #2 ..... 22
    - Correlation #3 ..... 23
    - Correlation #4 ..... 24
    - Correlation #5 ..... 25
  - 4.3 Discussion of Findings by Objective ..... 26
    - Convergence Centers ..... 26
    - Community Healthcare..... 28
    - Households..... 29
    - Mothers..... 31
    - SPECIFIC OBJECTIVE 1..... 31
    - Intermediate Result 1.1 ..... 35

Intermediate Result 1.2 .....	35
Intermediate Result 1.3 .....	40
SPECIFIC OBJECTIVE 2.....	41
Intermediate Result 2.1 .....	42
Intermediate Result 2.2.....	43
Intermediate Result 2.3.....	44
5. Conclusions and Recommendations .....	44
References .....	47
Appendices .....	49
Appendix A: Terms of Reference: Estadística y Opiniones MKT.....	49
Appendix B: Terms of Reference: Health and Development Consulting International (HDCi) LLC .....	53
Appendix C: List of Sampled Convergence Centers .....	57
Appendix D: Data Collection Tools (Questionnaires and Surveys).....	59
Appendix E: Evaluation Dates .....	163
Appendix F: Information Sources.....	164
Appendix G: Questionnaire Modules (Topics).....	165
Appendix H: Implementation Area Map .....	167

## LIST OF TABLES

Table 1	Objectives and Results Framework (from PROCOMIDA proposal document)	Page 13
Table 2	Indicator Performance Tracking Table (IPTT)	17
Table 3	Average Household Dietary Diversity Score (HDDS, indicator 3) and percent of children 6-24 months with minimum acceptable dietary diversity (indicator 5)	22
Table 4	Average HDDS (indicator 3) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)	22
Table 5	Percent of children 6-24 months with minimum acceptable dietary diversity (indicator 5) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)	23
Table 6	Percent of children 0-6 months exclusively breastfed (indicator 9) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)	24
Table 7	Percent of mothers receiving minimum recommended antenatal care (indicator 14) and percent of mothers receiving minimum recommended postnatal care (indicator 16)	25
Table 8	CC characteristics	27
Table 9	Community healthcare characteristics	28

Table 10	Household characteristics	29
Table 11	Home utility characteristics	30
Table 12	Mother characteristics	31
Table 13	Distribution of malnourishment among children aged 0-59 months (<-2 z-score weight-for-age), by sex	31
Table 14	Distribution of stunting among children aged 0-59 months and 6-59 months (<-2 z-score height-for-age), by sex	32
Table 15	Household hunger and dietary diversity	33
Table 16	Average z-scores among children among households with different hunger levels	34
Table 17	Percentage of mothers reporting knowledge of specific feeding practices	36
Table 18	Percentage of pregnant women reporting knowledge of specific warning signs/dangers of pregnancy	37
Table 19	Health and care knowledge of mothers	37
Table 20	Use of prenatal care services	38
Table 21	Health care worker knowledge of danger signs that require medical attention	42
Table 22	Birth options and attendance of medical staff	43

## LIST OF FIGURES

Figure 1	Changes in the average HDDS and percent of children 6-24 months with minimum acceptable dietary diversity, at baseline and midterm	Page 22
Figure 2	Changes in the average household dietary diversity scale (HDDS) and the percent of mothers demonstrating improved nutritional knowledge, at baseline and midterm	23
Figure 3	Changes in the average HDDS and the percent of mothers demonstrating improved nutritional knowledge, from baseline to midterm	24
Figure 4	Changes in the percent of children 0-6 months who were exclusively breastfed and the percent of mothers demonstrating improved nutritional knowledge, from baseline to midterm	25
Figure 5	Changes in the percent of mothers receiving minimum recommended antenatal care and the percent of mothers receiving minimum recommended postnatal care, from baseline to midterm	26
Figure 6	Mean z-scores for weight-for-age, height-for-age, and weight-for-height, by age group at midterm	32
Figure 7	Comparison of food group consumption from baseline to midterm	34

## ACRONYMS

AIEPI-AINM-C	Integrated Care of Childhood Illness / Care for Children and Mother at the Community Level
ANTHRO	WHO's software for Assessing Growth of the World's Children and Adolescents
BCC	Behavior Change Communication
CC	Convergence Center
CDC	Centers for Disease Control and Prevention
CHC	Community Health Commission
CHV	Community Health Volunteer
CSB	Corn-soy Blend
ENA	Emergency Nutrition Assessment
FANTA III	Food and Nutrition Technical Assistance III
FEWSnet	Famine Early Warning System Network
FFP	Food for Peace
H-A	Height-for-age
HDCi	Health and Development Consulting International LLC
HDSS	Household Diet Diversity Scale
HP	Health Post
IFPRI	International Food Policy Research Institute
IPTT	Indicator Performance Tracking Table
IR	Intermediate Result
IY	Implementation Year
LNS	Lipid-based Nutritional Supplements
M&E	Monitoring and Evaluation
MCHN	Maternal Child Health and Nutrition
MIS	Management Information System
MKT	<i>Estadística y Opiniones</i> MKT
MNP	Micronutrient Powder ( <i>Chispitas</i> )
MoH	Ministry of Health
MSPAS	Ministry of Public Health and Social Work
MYAP	Multi-year Assistance Program
NGO	Non-governmental Organization
ORS	Oral Rehydration Salts
PM2A	Preventing Malnutrition in Children Under 2 Approach
PREP	Pipeline and Resource Estimate Proposal
PROCOMIDA	<i>Programa Comunitario Materno Infantil de Diversificación Alimentaria</i> (Community Food Diversification Program for Mother and Child)

S.D.	Standard Deviation
SAM	Severe Acute Malnutrition
SBCC	Social and Behavior Change Communication
SESAN	Secretary of Food Security and Nutrition, Government of Guatemala
SO	Strategic Objective
SPSS	Statistical Package for Social Sciences
SWOL	Strengths, Weaknesses, Opportunities, Limitations
TSU	Technical Support Unit (PROCOMIDA, Mercy Corps Guatemala)
USAID	United States Agency for International Development
W-A	Weight-for-age

## EXECUTIVE SUMMARY

### Background

Guatemala has some of the worst rates of chronic malnutrition in Latin America, and in the world. Conditions are severest in the northern lowland and highland areas converging in and around Alta Verapaz. Within these geographic areas, the most vulnerable and affected by food insecurity and malnutrition are pregnant and lactating women, and children under two years of age, particularly amongst poor, marginalized, and vulnerable indigenous and ethnic communities, including the Q'eqchi'. Malnutrition is especially harmful to children under two, as they can experience lifetime impairment due to weak physical and cognitive development.

'*Programa Comunitario Materno Infantil de Diversificación Alimentaria*' (Community Food Diversification Program for Mother and Child, or PROCOMIDA) is a six-year program that started in July 2009 and ends June 2015, and seeks to improve the nutritional status of 266,000 people in 936 vulnerable communities in the department of Alta Verapaz, Guatemala. The **goal** is *improved nutritional status and health of women and children vulnerable to food insecurity in northern Guatemala*. Mercy Corps Guatemala is implementing PROCOMIDA, a multi-year assistance program, with funding from the United States Agency for International Development Bureau of Democracy, Conflict and Humanitarian Assistance Office of Food for Peace.

### Methodology

Midterm evaluation activities covered two phases: (1) Field Data Collection, April to July 2012, and (2) Analysis and Reporting (January 2013). The purpose was twofold: to meet the midterm evaluation requirements of the donor, and to provide Mercy Corps Guatemala and implementation partners with sound information to use towards improving program implementation in order to achieve final targets and goals by 2015.

### Summary of Key Findings

More than half of the impact and monitoring indicators (17 out of 30) exceeded the target set for implementation year three.

All anthropometric impact indicators met or exceeded target. The distribution of food rations to pregnant and lactating women reached close to 20,000 – doubling the target set of 10,000. The distribution of food rations to children aged 6-24 months reached 30% over the midterm target (20,692 compared to the target of 16,000). The percentage of children aged 6-24 months with minimal acceptable dietary diversity almost met target, indicating a need to continue to stress the importance of appropriate feeding practices with mothers.

Along with the distribution of food rations, indicators that are related to mother knowledge all far exceeded their targets, demonstrating that the program has been able to transfer knowledge to participating mothers as a result of the BCC strategy. The percentage of mothers demonstrating increased nutritional knowledge exceeded the target of 10% by more than 4-fold (45.7%).

Among mothers with increased nutritional knowledge, however, there was no significant association with better average household dietary diversity score (HDDS), the dietary diversity of children aged 6-24 months, or in the practice of exclusive breastfeeding of children aged 0-6 months, compared to mothers with no increase in nutritional knowledge.

Households with action plans exceeded the target of 3% by nearly double. The number of Convergence Centers and Health Posts with emergency funds exceeded the target by 14. Both the number of health commissions with regular meetings and those demonstrating progress on action plans met their target, due to the addition of Health Posts. Community Health Commissions met monthly with PROCOMIDA staff, and had half-yearly assemblies to present

their progress towards annual work plans to their constituent communities. The expansion and inclusion of educators and staff at Health Posts is responsible for meeting the target for the percentage of detected severe acute malnutrition referred per Ministry of Health protocols. Those not referred (6%) presented no complications, and were able to be treated in the community as defined by the protocol. The number of persons trained in planning and advocacy around food security and health exceeded the target by 118%, which is directly related to the expansion of the program.

There are several indicators that did not achieve the midterm target by slight margins, and six indicators that showed values below those at baseline and thus clearly did not achieve midterm targets. For most of these, the drop from baseline was slight. The percent of newborns who receive essential newborn care, the percent of children between 0-6 months that are exclusively breastfed, and the percent of children aged 6-23 months with respiratory diseases that received adequate treatment, were all lower than target, and in all three cases also slightly lower than their baseline value, indicating a need to redirect programmatic efforts on translating improved knowledge into practice and health seeking behavior. The percentage of children receiving full vaccinations, however, dropped significantly to 50.7% from a high baseline figure of 85.9%. The lower MoH budget and subsequently lower coverage for full and timely vaccinations and other interventions compared to baseline largely explains this decrease. The availability of a minimal level of infrastructure, supplies, and medications at health facilities is also contingent upon the MoH budget, which has remained stagnant since baseline.

The percent of health facility staff and community health volunteers able to identify a minimum number of core health and nutrition practices was significantly unable to meet midterm target, and in fact dropped from baseline. The percentage of deliveries at health facilities has remained essentially unchanged from baseline, possibly related to the importance of traditional midwives.

## **Summary of Recommendations**

The overarching recommendation of this midterm evaluation is that PROCOMIDA needs **to redirect programmatic efforts on translating improved knowledge and access to rations into improved practice and health seeking behavior.** Towards addressing this recommendation, several suggestions or implementing recommendations are proposed.

- 1. Conduct extensive anthropological 'learning' research**
- 2. Pursue a stronger educational presence**
- 3. Reconsider the role of community health volunteers**

In addition to this overarching recommendation, it is noted that a number of factors affecting program performance are outside of the program's control. These include access to essential blood pressure monitors, stethoscopes, and thermometers by CCs (which decreased from baseline), and access to essential medications and vaccinations. The program should **consider renegotiating with USAID those indicators of access and quality of health services outside of programmatic control, or propose to change the indicators entirely to better measure direct interventions.**

# 1. INTRODUCTION

## 1.1 Purpose of Evaluation and Summary of SOW

Food insecurity disproportionately affects the poor, indigenous, smallholder farmer, and landless populations in rural communities. In Latin America, including in Guatemala, food insecurity has led to high rates of chronic child malnutrition. The most vulnerable and affected by food insecurity and malnutrition are pregnant and lactating women and children under two years.

'*Programa Comunitario Materno Infantil de Diversificación Alimentaria*' (Community Food Diversification Program for Mother and Child, or PROCOMIDA) is a six-year program that started in July 2009 and ends June 2015<sup>1</sup>, and seeks to improve the nutritional status of 266,000 people in 936 vulnerable communities in the department of Alta Verapaz, Guatemala. The goal is to improve nutritional status and health of women and children vulnerable to food insecurity in northern Guatemala. PROCOMIDA provides nutritional and health education to empower mothers (defined by the program as mothers) to adopt best practices, including seeking health services. PROCOMIDA works with NGOs and MOH health units to establish community structures organized to improve the provision of culturally and technically appropriate health services. It also provides beneficiaries a balanced ration of food that contains a family ration of rice, beans and vegetable oil with an additional individual ration of fortified corn-soy blend (CSB), which in the case of 40 Convergence Centers is replaced by micronutrients either in lipid based or powder form. Mercy Corps Guatemala is implementing PROCOMIDA, a multi-year assistance program (MYAP), with funding from the United States Agency for International Development (USAID) Bureau of Democracy, Conflict and Humanitarian Assistance Office of Food for Peace.

The purpose of this midterm evaluation report of PROCOMIDA is to interpret the results of the field data collection to measure progress against program objectives and indicators, and determine whether USAID-supported interventions are contributing to reducing malnutrition and related health conditions (see Appendix A, Estadística y Opiniones MKT Terms of Reference). This midterm report follows USAID *Forward* evaluation policy, inclusive of rigorous statistical analysis, conclusions, and recommendations. It covers the period July 2009 (project implementation) – June 2012.

The scope of work for the midterm report (see Appendix B, HDCi LLC Terms of Reference) specified the need for several correlations based on the following indicators:

- Average Household Diet Diversity Score (HDDS, indicator 3) and percent of children ages 6 - 24 months with minimum acceptable dietary diversity (indicator 5)
- Average HDDS (indicator 3) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)
- Percent of children ages 6 - 24 months with a minimum acceptable dietary diversity (indicator 5) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)
- Percent of children ages 0 - 6 months exclusively breastfed (indicator 9) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)
- Percent of mothers receiving minimum recommended antenatal care (indicator 14) and percent of mothers receiving minimum recommended post natal care (indicator 16)

In addition, the terms indicated that the midterm evaluation report should include:

---

<sup>1</sup> Originally, the program was for five years, but was extended with one year, to June 2015, as field work could not begin until after baseline data collection had been completed (July 2010).

- Description of findings and their statistical relevance, comparisons and correlations of results, conclusions and recommendations with a purpose of improving program implementation to achieve final targets and goals
- Tables of indicators showing statistical relevance in comparison with baseline findings
- Tables of indicators comparing midterm results with midterm targets
- Tables showing correlations between key indicators (noted above)

While this midterm report is intended for submission to the donor and to be shared with local stakeholders, it is also envisioned as a working document for Mercy Corps Guatemala's PROCOMIDA management team. Together with program partners and counterparts, the management team will use the discussion of findings, lessons, and recommendations to inform and advise the remaining full two years of program implementation, including strategies, priorities, and design changes, towards enhanced realization of the program goal and objectives.

## 2. EVALUATION METHODS

### 2.1 Study Design

Midterm evaluation activities covered two phases, over the period April 2012 through January 2013.

- **Phase 1: Data Collection** (April – July 2012) was conducted by MKT, a local consultancy team whose technical study group was comprised of a food safety specialist, nutritionist, and field coordinator. Under their leadership, eight field survey teams were formed. All study team members spoke both Spanish and Q'eqchí, were trained in using Tablets for data entry, and in using anthropometry equipment. Phase 1 consisted of literature review, field data collection (June 15 - July 13), and data cleansing in preparation for analysis.
- **Phase 2: Analysis and Reporting** (January 2013) was completed by HDCi LLC. The HDCi team included one public health expert, and one biostatistician. They were tasked with finalizing the midterm evaluation report, in English, including reviewing and verifying, and in some cases re-analyzing, the field data collected for statistical relevance in comparison with the program's baseline findings and implementation year 3 targets, and drawing conclusions and recommendations. The purpose was twofold: to meet the midterm evaluation requirements of the donor, and to provide Mercy Corps Guatemala and implementation partners with sound information to use towards improving program implementation in order to achieve final targets and goals by 2015.

### SAMPLE SIZE

Based on the terms of reference for Phase 1, the baseline survey modules were utilized as a basis for the midterm evaluation, with additional modules incorporated to measure indicators not included at the time of the baseline. Data collection was digitized using Tablets.

The sample was defined in a two staged cluster design. The sampling framework<sup>2</sup> used was:

$$n = \left[ t^2 \times \frac{p \times q}{d^2} \right] \times DEFF$$

Where: **n** = sample size

---

<sup>2</sup> [http://pdf.usaid.gov/pdf\\_docs/PNACG172.pdf](http://pdf.usaid.gov/pdf_docs/PNACG172.pdf)

**t** = 95% confidence interval for simple cluster (2.045)

**p** = expected prevalence (fraction of 1)

**q** = 1-p (unexpected prevalence)

**d** = desired precision

DEFF = Design Effect

With this calculation, total sample size was defined at 920 households. With the use of ENA<sup>3</sup> software, cluster size was defined at 50 clusters of 20 households (families), rounding the number of households up to 1000.

Clusters were selected through the Probability Proportional to Population method. It should be noted that at the community and health services level, PROCOMIDA is implemented through Convergence Centers (CCs), which are rally posts located in rural *aldeas* (small rural villages) that do not have any other health services. CCs are part of MOH first level of attendance and are managed by local Health implementing NGOs contracted by the Ministry. They generally attend other communities around the CC. Also, health services are only offered once a month, through a mobile health team. Community Health Volunteers are in charge of follow up visits, growth monitoring and emergencies. It was agreed that only CCs present in the program for a minimum of 10 months would be included in the evaluation. A list of all eligible CCs identified was compiled and were subsequently randomly ordered. ENA software automatically weighed each CC according to number of beneficiary households, thus assuring that each household in each CC had the same probability of being selected. Finally, the 20 households were randomly selected from the beneficiary list of each cluster, with an additional five replacements if a selected household was not present or did not want to answer the survey.

In addition to the 50 clusters selected, an additional six clusters were randomly selected as replacement, in case of security risks, flooding, landslide, or other factors hindered access by the study teams (see Appendix C for a complete list of CCs sampled, by municipality)

## DATA COLLECTION

MKT, with Mercy Corps Guatemala, developed data collection tools, based on IFPRI baseline tools, to answer the evaluation questions (see Appendix D for a complete list of survey and other interview tools). All study team members then attended a three-week orientation in data collection, digitization using the electronic Tablet devices<sup>4</sup> and standardization in anthropometric measures to determine nutritional status, and other components of the program and evaluation methodology. During this orientation training workshop, the methodology of the study was also reviewed, and conducting two-way translation between Spanish and Q'eqchi' was evaluated and practiced.

Actual fieldwork occurred over four weeks (15 June – 13 July 2012) in the municipalities of Cobán, San Pedro Carchá, Cahabon, Lanquin, and Senahú of the Alta Verapaz Department, Guatemala. Data entered was continuously crosschecked for accuracy. Anthropometric data was sent directly to field editors, who checked consistency in the ENA software, on laptop computers, and returned Z values to the surveyors to be included in the Tablet. These Z values were double-checked at the data analysis stage. A total of 984 surveys were completed at the household level, and no replacement CCs were needed (see Appendix E for a complete list of evaluation dates). After data cleaning, 946 household surveys (96.1% of completed surveys) were included in the analysis, excluding those with missing data or incomplete responses.

---

<sup>3</sup> Emergency Nutrition Assessment for SMART ([www.nutrisurvey.net/ena/ena.html](http://www.nutrisurvey.net/ena/ena.html))

<sup>4</sup> Cybertech 8170 Tablets were used, and the operating system was Java for Android 2.2.

Given that initial sample size was estimated at 920 households, the final number of surveys is representative for the entire beneficiary population.

Data collection occurred at three levels (see Appendix F for a complete list of informants, References for all information sources, and Appendix G for lists of topics according to respondent level):

- *Community Level:* the survey focused on the presence of health services (state), and access to them, as well as the presence of community-based healthcare (e.g., traditional doctors, midwives), and the function of Health Committees
- *CC Level:* knowledge interviews with Community Health Volunteers (CHV) were conducted, and infrastructure, medicines, and supplies surveyed
- *Beneficiary Level:* background information on household composition as well as questions about diet and feeding practices, knowledge, health seeking behavior, and household action plans were surveyed, and the results of anthropometry measures of all children under 5 years captured

In summary, information was collected on the following topics:

- Household composition
- Household diet diversity scale (HDDS, see FANTA<sup>5</sup> website for definitions)
- Hunger Scale (see FANTA website for definitions)
- Knowledge of mothers and health workers (pregnancy, childbirth, postpartum, new-born, children under two years)
- Pre-and postnatal health
- Infant feeding (including exclusive breastfeeding)
- Preventive health (mother and child)
- Morbidity and care seeking
- Housing conditions
- Resilience strategies
- Anthropometry of children under 5 years
- Consumption of program rations and micronutrient supplements
- Coverage of other programs in the area
- Levels of participation in the program
- Access to health services
- Conditions and infrastructure of CCs and the services provided
- Equipment and supplies available at CCs

## **ANALYSIS**

Initial data analysis was conducted in the fall of 2012 using Statistical Package for Social Sciences (SPSS). Unfortunately, there were delays, and after review the preliminary analysis was not found to meet the needs of the donor nor Mercy Corps Guatemala adequately. As a result, data collected during Phase 1 was re-examined under Phase 2. Additionally, interviews and SWOL (Strengths, Weaknesses, Opportunities, and Limitations) were conducted with members of the PROCOMIDA staff, to contextualize the statistical findings.

Data and documentation from the Phase 1 analysis were available in the form of the original (Spanish) and translated (English) survey questionnaires; SPSS data files (segregated into Sections); SPSS Syntax files; documentation on the calculation of specific indicators; the Indicator Performance Tracking Table (IPTT) and copies of previous written reports and drafts. The review and analysis process carried out included the following:

- Comparison of IPPT data entry across different versions of the previous reports

---

<sup>5</sup> Food and Nutrition Technical Assistance

- Review of SPSS datasets, and cross-checking these against survey questionnaires
- Translation Spanish-English, where required
- Review and re-running of the previous SPSS syntax files, where possible
- Finalizing IPPT indicator list and presentation
- Harmonizing any conflicting findings from previous draft reports
- Generating correlation graphs for selected indicators
- Running adding additional summary tables and data analysis, where relevant

## **2.2 Limitations**

There were a number of limitations that challenged the process in Phase 1:

- Delays in starting fieldwork due to late scheduling of Tablets for data digitization, MSPAS activities, festivities, competing priorities with deliveries of inputs from social programs of the government (e.g., cash transfer), and other training to MSPAS staff.
- Delays in receiving the Phase 1 field evaluation report, and in clarifying information with the consultant team.
- The quality of the Phase 1 field report, found particularly inadequate in terms of conclusions drawn and recommendations. As a result, Mercy Corps Guatemala was required to hire a second consulting company to finalize the midterm report (Phase 2), under a very tight deadline and budget.
- There were linguistic challenges as well due to the need to cross-translate between Spanish, Q'eqchí, and English, though in the field effort was taken to ensure surveyors were extensively trained and standardized in Q'eqchí.

There were several additional limitations and challenges in conducting this Phase 2 analysis. In many documents and datasets, including some of the statistical syntax files, the information is recorded in Spanish. The format for the coding of respondent data identification was also a challenge in terms of cross-referencing data from different survey sections (which were recorded in multiple separate files). The translation work required on these, as well as the need for additional data check, meant more time was spent on data management than what is normally expected.

Additionally, there was a lack of any qualitative data, as fieldwork was entirely based on quantitative data collection via survey questionnaires. This limited the ability to analyze and draw conclusions. Background literature review, interviews and SWOL (Strengths, Weaknesses, Opportunities, Limitations) conducted with members of the PROCOMIDA staff during Phase 2 attempted to overcome, at least partially, this limitation, while inserting an unavoidable bias towards the views of Mercy Corps Guatemala.

Despite close cooperation with Mercy Corps Guatemala in the report finalization, effort was taken by HDCi LLC to ensure that the conclusions and recommendations were drawn external to program personnel.

## **2.3 About This Report**

This report begins with background information on food insecurity and malnutrition in Guatemala, and the PROCOMIDA program. Midterm evaluation results are then discussed based on the IPTT, ordered by the percentage of target met, with reference to its Intermediate Result (IR) and in comparison to baseline figures. Indicators are given a unique number throughout the IPTT, in the first column of the table, which is used to guide the discussion. Trigger indicators and correlations are discussed separately. A more detailed discussion of findings is followed then by lessons learned/good practices, and recommendations. The intention is for the recommendations to inform program decisions for the remaining

implementation period, towards successful realization of program goal and objectives by mid-2015, and ultimately program sustainability following closeout.

### 3. CONTEXT

Guatemala has some of the worst rates of chronic malnutrition in Latin America, and in the world. Conditions are severest in the northern lowland and highland areas converging in and around Alta Verapaz. Within these geographic areas, the most vulnerable and affected by food insecurity and malnutrition are pregnant and lactating women, and children under two years of age, particularly amongst poor, marginalized, and vulnerable indigenous and ethnic communities, including the Q’eqchi’.<sup>6</sup> Malnutrition is especially harmful to children under two, as they can experience lifetime impairment due to weak physical and cognitive development.

Since 1979, Mercy Corps has worked globally to alleviate suffering, poverty, and oppression by helping people build secure, productive, and just communities. In the mid-1980s, Mercy Corps began operations in Central America, and in 2001 expanded programming to northern Guatemala, targeting poor areas in the Alta Verapaz Department. Mercy Corps pursued PROCOMIDA, or the Community Food Diversification Program for Mother and Child, at a time when more than 60% of children under five in Alta Verapaz were chronically malnourished, and infant and maternal mortality rates were among the worst in Guatemala. PROCOMIDA seeks to improve the nutritional status of more than 266,000 people in 936 vulnerable communities in selected municipalities in Alta Verapaz Department – areas classified by the Famine Early Warning System Network (FEWSnet) as having poor food security and livelihoods, and with some of the highest rates of stunting and infant and maternal mortality in the country.<sup>7</sup> With USAID Title II Food for Peace funding, program implementation initially covered the period July 2009 – June 2014, and was officially extended to June 2015 through Agreement Modification 6, signed June 2012.

The PROCOMIDA **goal** is improved nutritional status and health of women and children vulnerable to food insecurity in northern Guatemala. Two **strategic objectives** (SO) complement this goal (see Table 1 below). PROCOMIDA targets pregnant and lactating women and children less than two years of age, and healthcare service providers, in the municipalities of Cobán, San Pedro Carchá, Lanquin, Cahabon, Senahú. In August 2012, the additional municipalities of Chahal, Fray Barolomé de las casas, and Chisec were added (see Appendix H for a map of all implementation areas).

**Table 1: Objectives and Results Framework** (from PROCOMIDA proposal document)

<b>Goal: Improved nutritional status and health of women and children vulnerable to food insecurity in northern Guatemala</b>		
<b>Strategic Objectives</b>	<b>Intermediate Results</b>	<b>Activities</b>
<b>1. By 2015, pregnant and lactating women, children under 2, and malnourished children under 5 in program areas have improved and sustainable health and nutrition status</b>	<p><b>1.1</b> Increased consumption of energy and nutrient dense foods in households with pregnant/lactating women, a child 6-24 months of age, and/or a child 24-59 months with acute malnutrition</p> <p><b>1.2</b> Improved household knowledge, attitudes and practices for key care behaviors</p> <p><b>1.3</b> Increased engagement of households in reducing vulnerability</p>	<ul style="list-style-type: none"> <li>▪ Consultation with government and civil society leaders</li> <li>▪ Establish / strengthen community health commissions</li> <li>▪ Disseminate criteria and selection of beneficiaries</li> <li>▪ Provide preventative rations to all pregnant or lactating women and all children aged 6-24 months</li> <li>▪ Management of acute malnutrition</li> <li>▪ Develop behavior change</li> </ul>

<sup>6</sup> FEWSnet Guatemala Country Profile Website; FAO Socioeconomic Studies of Vulnerable Groups in Guatemala.

<sup>7</sup> World Food Program 2009; ENSMI 2009.

	to food insecurity	<ul style="list-style-type: none"> <li>▪ communication (BCC) messages</li> <li>▪ Enhance the capacity of community outreach actors (CHCs, CHVs, etc.) to deliver BCC</li> <li>▪ Form mothers' groups</li> <li>▪ Improved practices reinforced through home visits, ration distribution and radio</li> <li>▪ Establish community emergency funds to facilitate transportation to health services</li> <li>▪ Connect with ongoing Mercy Corps food security programs</li> </ul>
<b>2. By 2015, health care service providers at community through municipal levels have improved Service quality and delivery</b>	<p><b>2.1</b> Increased communication and interaction between vulnerable populations and health service providers</p> <p><b>2.2</b> Increased and improved provision of minimum standards in health services to women and children</p> <p><b>2.3</b> Increased promotion and planning by health care providers to meet community health care needs</p>	<ul style="list-style-type: none"> <li>▪ Enhanced technical capacity of health service providers to provide strong MCHN care</li> <li>▪ Improve MoH extension services through building capacity of SIAS NGOs</li> <li>▪ Strengthen recognition and treatment of children with SAM</li> <li>▪ Facilitate regular meetings among community health commissions, community leaders, health service providers to plan around community health-related priorities and concerns</li> <li>▪ Facilitate orientation visits to CCs, health posts and health centers by community members</li> <li>▪ Strengthen health facility capacity to provide culturally and linguistically appropriate care</li> <li>▪ Build the capacity of SIAS-implementing NGOs and MoH health post staff to prioritize, plan and advocate for community health priorities with key municipal, departmental and national actors and decision-makers</li> </ul>

PROCOMIDA employs a preventive methodology based on research and results from World Vision's PM2A<sup>8</sup> approach, which focuses on protecting children at the most critical period in their development. To do this, PROCOMIDA works with local non-governmental organizations (NGOs) and Ministry of Health (MoH) to establish and/or strengthen community structures to improve the provision of culturally and technically appropriate health services and adequate maternal child health and nutrition (MCHN) service coverage and quality. Under the preventive approach, *all* households with pregnant mothers, lactating mothers, and children under two are targeted, not just those already experiencing malnutrition. While the program defines the child as its main beneficiary, the involvement of the mothers is necessary at all levels of intervention, so the program measures beneficiaries in mother/child units. A fourth beneficiary group consists of mothers with children between 2-5 years of age with acute malnutrition, who are enlisted for a three month period. All beneficiaries are registered with a unique code, ultimately assigned to each household, and receive a beneficiary card that they take with them to trainings and food distributions. This allows PROCOMIDA to track their participation. Each of these beneficiary

<sup>8</sup> Preventing Malnutrition in Children Under 2 Approach

categories participate for a minimum of six months and a maximum of 30 months. As of June 2012, 28,783 households have participated in the program, the vast majority of the beneficiaries being children 6-24 months of age, as expected.

At baseline, while household hunger was found to be uncommon, the quality of household and child diets was poor. Growth faltering often starts in the first few months of life, and intensifies gradually throughout the first two years to reach a plateau at ages 2-3 years old, compounded by repeated bouts of illness (see Figure 6 below). Low quality household and infant diets mean that children lack essential micronutrients. Stunting is a major problem. Overall, the average height-for-age z-scores were significantly lower among boys compared to girls. However, there is no significant difference in the prevalence of stunting between boys and girls – boys were shorter in general, but no more were categorized as stunted. There was, however, almost no wasting found, and the prevalence of underweight was at moderate levels, with the majority of underweight likely explained by high levels of stunting.

To address these concerns, PROCOMIDA provides beneficiaries with a balanced ration to overcome food insecurity: individual rations of CSB, and household rations of rice, pinto beans, and vegetable oil. Food supplementation is an incentive for mothers' participation and a source of macro- and micro-nutrients for pregnant and lactating women and children between 6-24 months of age. As of June 2012, 181,400 household rations (rice, beans, vegetable oil) and 188,017 individual rations (CSB, LNS, or MNP) were distributed (100% on target). Additionally, in 40 Convergence Centers (CCs) micronutrients either in a lipid-based nutritional supplements (LNS, 20 CCs), or micronutrient powder (MNP, 20 CCs) is distributed as an individual ration, replacing CSB, as part of a research component (see below).

Program activities are implemented through CCs. The main tasks of the CCs are to carry out the Integrated Care of Prevalent Childhood Illnesses and Integrated Health Care for Women and Children at the Community Level (AIEPI-AINM-C) program, Guatemala's integrated healthcare strategy established by the Ministry of Public Health and Social Work (MSPAS). The AIEPI-AINM-C provides integrated case management of childhood illness, monthly growth monitoring and promotion for children, standard preventive care for pregnant and lactating women, and the provision of vaccinations and micronutrient supplements for pregnant and lactating women and children under five years of age. Additionally, they are essential to the new Presidential Initiative 'Zero Hunger'. CCs are, however, limited in their ability to supply quality healthcare due to lack of necessary medical equipment and supplies, including drugs, and limited health staff knowledge. PROCOMIDA enhances the activities of the CCs through targeted actions to strengthen all those that relate to health care in the population. As of June 2012, PROCOMIDA is being implemented in 270 CCs and 14 Health Posts, for a total of 284 locations for training and distribution of food rations.

The program baseline study found that two-thirds of mothers were illiterate and did not speak Spanish, and there was a high prevalence of overweight and obese mothers (BMI 24.8). Mothers are also very short in stature, associated with growth retardation *in utero* and also during early childhood. Knowledge of correct breastfeeding practices was high, but only half of mothers could identify the correct age to introduce complementary foods to infants. Early introduction of inappropriate foods along with poor food hygiene, poor water quality, and poor sanitation are a concern leading to poor nutritional status and morbidity, and contributing to high rates of stunting and diarrhea. Frequency of feeding was also inadequate in many children, pointing to the fact that mothers' knowledge does not always correspond to actual practice.

At baseline, few mothers knew the danger signs of pregnancy or the danger signs of childhood illness. While most attended a sufficient number of prenatal visits, postnatal care appeared inadequate, and less than half of recommended visits were attended. Growth monitoring and

promotion in children 12 - 23 months of age was nearly universal, yet less than half of children received a mega-dose of vitamin A, and only half received iron and folic acid. About one-third of children 18-23 months of age were not fully immunized, and most vaccinations were received later than recommended. Only 60% of the baseline sample of children under two consumed four or more food groups, and 52% consumed iron-rich or fortified foods in the previous 24 hours.

To address identified gaps in knowledge and health seeking behavior amongst beneficiary mothers, PROCOMIDA developed and implements a comprehensive and targeted behavior change communication (BCC) component that utilizes the BEHAVE Framework and a multi-level response designed to reinforce BCC information, education, and new behavior adoption at the household and community levels. Around 80 key messages were identified and organized around five themes: (i) food and health; (ii) exclusive breastfeeding; (iii) care of pregnant and lactating mothers; (iv) care of children from 6-24 months; and (v) sick and malnourished children. Materials include flip charts, ration bags with messages, and pamphlets. They are utilized during monthly trainings provided by program field staff (with the aid of a training guide). All training materials are pictorial with little or no text, and the BCC Strategy uses adult literacy techniques focused on collective participative learning through positive deviance. Trainers divide beneficiaries into four identified groups, according to interest and cultural necessity: (i) pregnant women; (ii) lactating mothers with children from 0-6 months of age; (iii) mothers with children from 6-24 months; and (iv) mothers of sick children. Each training focuses on a key message, coordinated with existing MOH messages. Educational sessions include recipe demonstrations with 'model' mothers, who replicate them with beneficiaries assigned to them, increasing local capacity in adequate diet and food preparation practices, and assuring sustainability and program impact. Field staff further complement trainings with household visits, stressing the importance of attending trainings, strengthening key messages, monitoring food ration use, and following up on malnourished children.

All program field staff themselves receive monthly trainings in BCC, nutrition, monitoring and evaluation (M&E), and data management (MIS), and in taking standardized anthropometric measurements, use of data collection forms, identification and referral of severe acute malnutrition (SAM), etc. Separately, community health volunteers (CHVs) working in intervention areas are trained in nutritional evaluation, nutrition, and malnutrition. Decentralized health service providers (local NGO Health Implementers) and their teams are invited to attend all trainings. Additional institutional strengthening is extended to these providers to improve data management capacity with the NGO Health Implementers and the MoH Alta Verapaz Area. NGO Health Implementer office staff receive quarterly training in areas of organizational capacity and strengthening. All of these activities build local capacity and contribute towards the sustainability of the program.

In addition to directly activity implementation, PROCOMIDA incorporates a research component, led by the International Food Policy Research Institute (IFPRI) in collaboration with Mercy Corps, and with funding from USAID's Food and Nutrition Technical Assistance (FANTA) project. There are five research arms and one control group, each comprised of 20 CCs randomly selected from the initial preselected CCs. As one of IFPRI's focuses is operations research, all data collected by PROCOMIDA to date is quantitative, though more qualitative monitoring for specific areas is being considered from IY4 onwards (e.g., quality of services, adoption of practices). The program utilizes an Indicator Performance Tracking Table (IPTT), to which several changes have been made since implementation in 2009.

## 4. RESULTS

### 4.1 IPTT

Table 2 below is an extract from the Indicator Performance Tracking Table (IPTT) to show the list of Impact Indicators, Monitoring Indicators, and Trigger Indicators with respect to the baseline, midterm target, and midterm evaluation (achieved) values. Values in the 'Midterm Evaluation' column are listed in blue for those that have exceeded the midterm targets, in black for those that are in progress but have not yet achieved the respective targets, and in red for those that recorded values that are less than the baseline values.

**Table 2: Indicator Performance Tracking Table (IPTT)**

Indicators		Baseline (2009)	Midterm Target (2012)	Midterm Evaluation
#	Indicator			
<b>Objective 1:</b>				
<b>By 2015, mothers<sup>9</sup> have the capacity to improve and maintain the health and nutritional status of household members, particularly for children less than 2 years of age, acutely malnourished children under 5 years of age, and pregnant and lactating women</b>				
#1	<i>Impact Indicator 1:</i> % children 0-59 months underweight (<-2 z-score weight-for-age)	12.9%	12.0%	12.3%
#2	<i>Impact Indicator 2:</i> % children 6-59 months stunted (<-2 z-score height-for-age)	59.2%	56.5%	56.1%
#3	<i>Impact Indicator 3:</i> Average Household Dietary Diversity Score (HDDS)	5.8 (±s.d. 1.6)	6.3	7.5 (±s.d. 1.9)
<b>Intermediate Result 1.1:</b>				
<b>Increased consumption of energy and nutrient dense foods by pregnant and lactating women, all children 6-24 months of age, and acutely malnourished children between 24-59 months of age</b>				
#4	<i>Monitoring Indicator 1:</i> # pregnant and lactating women receiving food rations (accumulative)	0	10,000	19,989
#5	<i>Monitoring Indicator 2:</i> % children 6-24 months with minimum acceptable dietary diversity	60.1%	70.0%	63.2%
#6	<i>Monitoring Indicator 2:</i> # children aged 6-24 months receiving food rations (accumulative)	0	16,000	20,692
<b>Intermediate Result 1.2:</b>				
<b>Improve household knowledge, attitudes and practices for key care behaviors</b>				
#7	<i>Monitoring Indicator 1:</i> % mothers <sup>10</sup> demonstrating increased nutritional knowledge	0	10%	45.7%
#8	<i>Monitoring Indicator 2:</i> % of newborns who receive essential newborn care	75.0%	80.0%	70.6%
#9	<i>Monitoring Indicator 3:</i> % children 0-6 months exclusively breastfed	65.1%	75.0%	60.8%

<sup>9</sup> The term 'mother' is used here, however this evaluation notes that the program defines 'mother' as 'mother', and has replaced all subsequent language to reflect this

<sup>10</sup> Mothers are primarily mothers, and the terms are interchangeable.

<b>#10</b>	<i>Monitoring Indicator 4:</i> % mothers that know the danger signs of pregnancy	5.9%	20.0%	34.0%
<b>#11</b>	<i>Monitoring Indicator 5:</i> % mothers with proper identification of childhood illness warning signs	4.9%	20.0%	69.6%
<b>#12</b>	<i>Monitoring Indicator 6:</i> % children aged 0-23 months with diarrhea that received adequate treatment	26.3%	50.0%	27.5%
<b>#13</b>	<i>Monitoring Indicator 7:</i> % children aged 6-23 months with respiratory diseases that received adequate treatment	40.5%	50.0%	39.0%
<b>#14</b>	<i>Monitoring Indicator 8:</i> % mothers receiving minimum recommended antenatal care	82.2%	86.0%	85.0%
<b>#16</b>	<i>Monitoring Indicator 10:</i> % mothers receiving minimum recommended postnatal care	26.9%	32.0%	60.1%
<b>#17</b>	<i>Monitoring Indicator 11:</i> % children receiving full vaccinations	85.9%	89.0%	50.7%
<b>#18</b>	<i>Monitoring Indicator 12:</i> % children receiving routine health services	18.3%	45.0%	27.4%
<b>Intermediate Result 1.3:</b> <b>Increased engagement of households in reducing vulnerability to food security</b>				
<b>#19</b>	<i>Monitoring Indicator 1:</i> % households with household actions plans	1.8%	3.0%	5.8%
<b>#20</b>	<i>Monitoring Indicator 2:</i> # Training and Distribution Points with emergency funds	0	270	284
<b>Objective 2:</b> <b>By 2015, health care service providers at the community through municipal levels have improved service quality and delivery</b>				
<b>#21</b>	<i>Impact Indicator 1:</i> % health facility staff and community volunteers able to identify minimum number of core health and nutrition practices	6.5%	20.0%	4.3%
<b>#22</b>	<i>Impact Indicator 2:</i> % health facilities meeting minimum standards for health and nutrition services and practices	0.0%	20.0%	19.1%
<b>#30</b>	<i>Impact Indicator 3:</i> % of local CHVs who meet minimum standards/thresholds for performance	0.0%	2.0%	2.1%
<b>Intermediate Result 2.1:</b> <b>Increased communication and interaction between community members and health service providers</b>				
<b>#23</b>	<i>Monitoring Indicator 1:</i> # health commissions with regular meetings	0	270	284
<b>#24</b>	<i>Monitoring Indicator 2:</i> # health commissions demonstrating progress on action plans	0	270	284
<b>#25</b>	<i>Monitoring Indicator 3:</i> # of pregnant women in health facility orientation visits	0	540	0

<b>#26</b>	<i>Monitoring Indicator 4:</i> % deliveries at health facilities	35.9%	38.0%	33.5%
<b>Intermediate Result 2.2:</b> <b>Increased and improved provision of minimum standards in health services to women and children</b>				
<b>#27</b>	<i>Monitoring Indicator 1:</i> # health facility staff trained in health and nutrition best practices	0	60	121
<b>#28</b>	<i>Monitoring Indicator 2:</i> Availability of a minimal level of infrastructure, supplies and medications at health facilities	0.0%	25.0%	0.0%
<b>#29</b>	<i>Monitoring Indicator 3:</i> % of detected SAM cases referred per MOH protocols	N/A	90.0%	94.0%
<b>Intermediate Result 2.3:</b> <b>Increased promotion and planning by health care providers to meet community health care needs</b>				
<b>#31</b>	<i>Monitoring Indicator 1:</i> # persons trained in planning and advocacy around food security and health	0	1,680	1,988
<b>Trigger Indicators*:</b>				
<b>#32</b>	<i>Trigger Indicator 1:</i> Wasting: Percent of children 6-59 months who are wasted (<-2 z-score weight for height)	-	<4.0%	0.8%
<b>#33</b>	<i>Trigger Indicator 2:</i> Change in food prices	-	8.74	4.01
<b>#34</b>	<i>Trigger Indicator 3:</i> Irregular rainfall	-	2,351	2,659
<b>#35</b>	<i>Trigger Indicator 4:</i> Security	-	35.7	N/A
<b>#36</b>	<i>Trigger Indicator 5:</i> Coping strategies	-	<10	25.1

\* Trigger indicators use colors to identify risk: red = high risk; yellow = moderate risk; green = no risk

As seen, at the time of the midterm evaluation, more than half of the impact and monitoring indicators (17 out of 30) exceeded the target set for IY3.

- SO 1: All anthropometric impact indicators met or exceeded target. These are extremely important results for the program, including the percentage of children 0-59 months underweight (which dropped from 12.9% to 12.3%), the percentage of children 6-59 months stunted (which dropped 3.1% from 59.2% to 56.1%), and the average HDDS (which improved from 5.8 to 7.5).
- IR 1.1: The distribution of food rations to pregnant and lactating women (indicator 4) reached close to 20,000 – doubling the target set of 10,000. The distribution of food rations to children aged 6-24 months (indicator 6) reached 30% over the midterm target (20,692 compared to the target of 16,000). As a result of agreed-upon ration reductions (after it was found that not all rations were being consumed), the program was able to expand its interventions, hence increasing coverage. Indicator 5 (the percentage of children aged 6-24 months with minimal acceptable dietary diversity) almost met target, indicating a need to continue to stress the importance of appropriate feeding practices with mothers.

- IR 1.2: Along with the distribution of food rations, indicators that are related to mother knowledge all far exceeded their targets, demonstrating that the program has been able to transfer knowledge to participating mothers as a result of the BCC strategy. The percentage of mothers demonstrating increased nutritional knowledge (indicator 7) exceeded the target of 10% by more than 4-fold (45.7%). This increase, however, does not appear to have any impact on nutritional diversity and breastfeeding practices. Among mothers with increased nutritional knowledge, there was no significant association with better average household dietary diversity score (HDDS), the dietary diversity of children aged 6-24 months, or in the practice of exclusive breastfeeding of children aged 0-6 months, compared to mothers with no increase in nutritional knowledge (see below, Correlations 2, 3 and 4, respectively).
- IR 1.3: Households with action plans (indicator 19) exceeded the target of 3% by nearly double. The number of CCs and Health Posts (HP) with emergency funds exceeded the target by 14.
- SO 2: Both indicators nearly or just met the target. Further involving CHVs in field activities, encouraging NGO Health Implementers to strengthen CHV support, and linking NGO Health Implementers, CHVs, and Community Health Commissions (CHCs) should further improve outcomes and ensure sustainability in this area.
- IR 2.1: Both the number of health commissions with regular meetings (indicator 23) and those demonstrating progress on action plans (indicator 24) met their target, due to the addition of HPs. CHCs meet monthly with PROCOMIDA staff, and have half-yearly assemblies to present their progress towards annual work plans to their constituent communities.
- IR 2.2: The expansion and inclusion of educators and staff at HPs is responsible for the meeting of indicator 29 (percentage of detected severe acute malnutrition, or SAM cases referred per MoH protocols). Those not referred (6%) presented no complications, and were able to be treated in the community as defined by the protocol.
- IR 2.3: The number of persons trained in planning and advocacy around food security and health (indicator 32) exceeded the target by 118%, which is directly related to the expansion of the program.

There are several indicators that did not achieve the midterm target by slight margins, and six indicators that showed values below those at baseline and thus clearly did not achieve midterm targets. For most of these, the drop from baseline was slight.

- IR 1.2: The percent of newborns who receive essential newborn care (indicator 8), the percent of children between 0-6 months that are exclusively breastfed (indicator 9), and the percent of children aged 6-23 months with respiratory diseases that received adequate treatment (indicator 13), were all lower than target, and in all three cases also slightly lower than their baseline value, indicating a need to redirect programmatic efforts on translating improved knowledge into practice and health seeking behavior. The percentage of children receiving full vaccinations (indicator 17), however, dropped significantly to 50.7% from a high baseline figure of 85.9%. The lower MoH budget and subsequently lower coverage for full and timely vaccinations and other interventions compared to baseline largely explains this decrease. For all of these indicators, and other indicators that exceeded baseline but failed to meet midterm target, it will be important for the program to address these issues with the MoH, or renegotiate these indicators, since they depend largely on the MoH budget and supply chain management.

- SO 2: The percent of health facility staff and CHVs able to identify a minimum number of core health and nutrition practices (indicator 21) was significantly unable to meet midterm target, and in fact dropped from baseline. This is an important issue and requires attention from the program. Currently the program is starting to involve more CHVs in its training sessions, in addition to holding separate quarterly training sessions specifically for CHVs. In IY3, training focused on improving their growth monitoring practices, and detection of SAM. For the next year, IY4, the focus will be on danger signs, in conjunction with traditional midwives, as well as nutrition issues. The program is also designing specific training materials for the CHV and traditional midwives that include danger signs and nutrition practices.
- IR 2.1: No impact has been measured for indicator 28 (number of pregnant women in health facility orientation visits), given the negative impact MoH supply chain problems have on it. The program is considering if it is more effective to take the traditional community midwives to visit the health facilities instead, as they play an important role in decision-making around where women deliver. Related to this issue, the percentage of deliveries at health facilities (indicator 26) has remained essentially unchanged from baseline, possibly related to the importance of traditional midwives. For this reason, the program is designing training materials for midwives and training will start once the MoH approves the training materials (occurred in December 2012).
- IR 2.2: As with indicators under IR 1.2, the availability of a minimal level of infrastructure, supplies, and medications at health facilities (indicator 28) is contingent upon the MoH budget, which has remained stagnant since baseline. The availability of community health funds to improve the CC structure is not enough, as it does not affect the availability of supplies and medications.

Trigger indicators were measured through secondary data sources, mostly from government institutions, with the exception of indicator 36 (coping strategies), which was calculated using the Coping Strategy Index and measured through the annual household survey. As trigger indicators are not linked directly to specific program activities, change cannot be attributable. Information on security was unavailable for this midterm evaluation (indicator 35) from the Governor of Alta Verapaz. Coping strategies (indicator 36) increased, meaning that people in intervention areas had to implement more strategies to cope with food insecurity, even though they received food rations. Additionally, there were changes in food prices (indicator 33).

## **4.2 Correlations**

In addition to the list of midterm indicator values listed in Table 2, further analysis on several indicators and other parameters are presented here. For comparisons of average values (e.g. mean HDDS scores) between two groups, the t-test was used. When analyzing the relationship between two categorical variables (e.g. percentage distribution between mothers with increased or no increase in nutritional knowledge, and the relationship to the distribution of households with children with or without the minimum acceptable dietary diversity), the chi-square test was used. For the analysis of the change in the percentage of mothers receiving the minimum recommended prenatal care compared to those receiving the minimum recommended postnatal care, the data (prenatal care versus postnatal care) was treated as paired for each mother. In this case, the McNemar test was used to measure whether there was a significant difference between access to prenatal care compared to postnatal care. In all statistical analyses, a 95% significance level was used and a *p*-value of less than 0.05 indicates a statistically significant association.

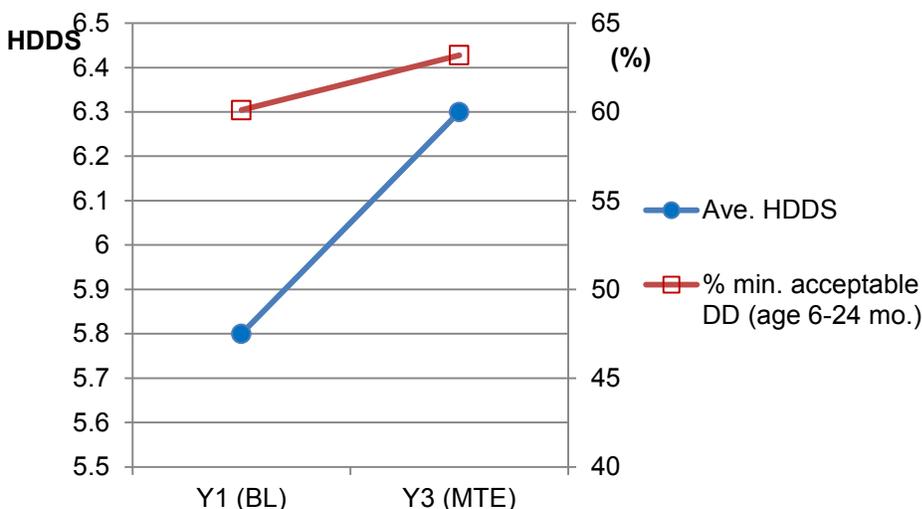
## CORRELATION #1

Table 3: Average household dietary diversity score (HDDS, indicator 3) and percent of children 6-24 months with minimum acceptable dietary diversity (indicator 5)

Dietary diversity (DD) among children aged 6-24 months	n (%)	Mean HDDS	(±s.d.)	t-test p-value
With minimum acceptable DD	369 (63.2%)	6.5	(2.1)	<0.001*
Below minimum acceptable DD	215 (36.8%)	8.0	(1.8)	

\* indicates statistical significance ( $p$ -value < 0.05).

Figure 1: Changes in the average HDDS and percent of children 6-24 months with minimum acceptable dietary diversity, at baseline and midterm



As noted, despite average HDDS significantly improving and exceeding the midterm target, 36.8% of children 6-24 months were found to have below the minimum acceptable dietary diversity, and demonstrate only a moderate improvement in overall dietary diversity from baseline to midterm. Interestingly, the mean HDDS is significantly higher for children with below minimum acceptable dietary diversity.

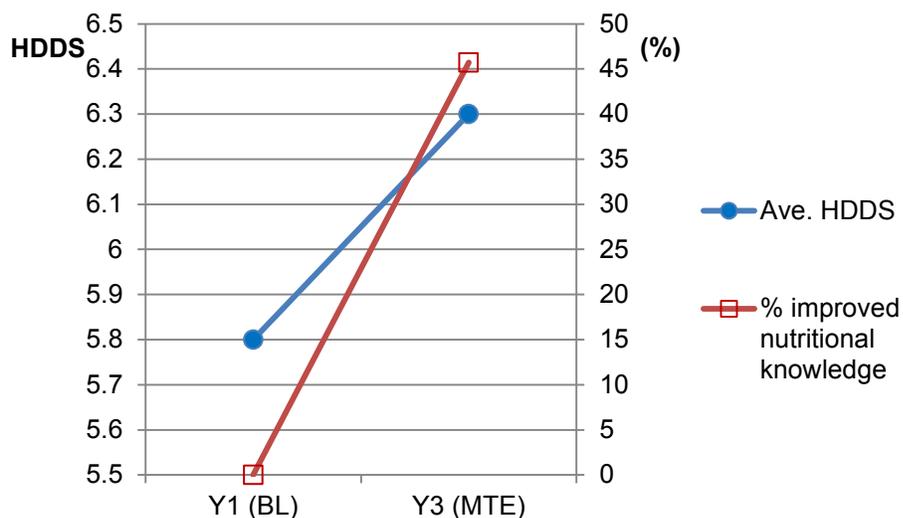
## CORRELATION #2

Table 4: Average HDDS (indicator 3) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)

Nutritional knowledge among mothers	n (%)	Mean HDDS	(±s.d.)	t-test p-value
Increased knowledge	288 (45.6%)	7.4	(1.9)	0.571
No increase in knowledge	344 (54.4%)	7.5	(2.0)	

Here, the number of mothers with an increase in nutritional knowledge versus those with no increase in knowledge is nearly equivalent. There was, however, no significant association between nutritional knowledge among mothers and the average HDDS.

Figure 2: Changes in the average household dietary diversity scale (HDDS) and the percent of mothers demonstrating improved nutritional knowledge, at baseline and midterm

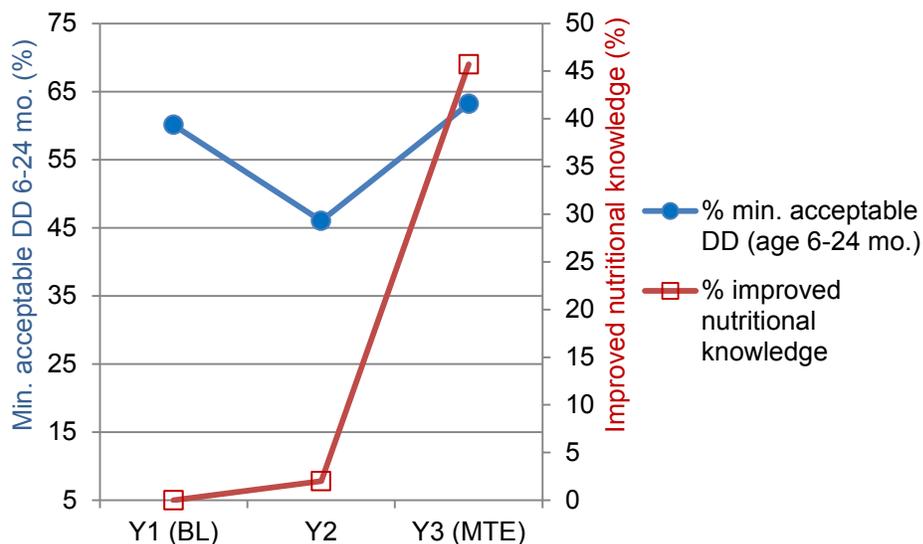


### CORRELATION #3

Table 5: Percent of children 6-24 months with minimum acceptable dietary diversity (indicator 5) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)

Nutritional knowledge among mothers	Dietary diversity (DD) among children aged 6-24 months			Chi <sup>2</sup> -test p-value
	With minimum acceptable DD	Below minimum acceptable DD	Total	
Increased knowledge	162 (63.3%)	94 (36.7%)	256 (45.2%)	0.948
No increase in knowledge	197 (63.5%)	113 (36.5%)	310 (54.8%)	
Total	359 (63.4%)	207 (36.6%)	566	

Figure 3: Changes in the average HDDS and the percent of mothers demonstrating improved nutritional knowledge, from baseline to midterm



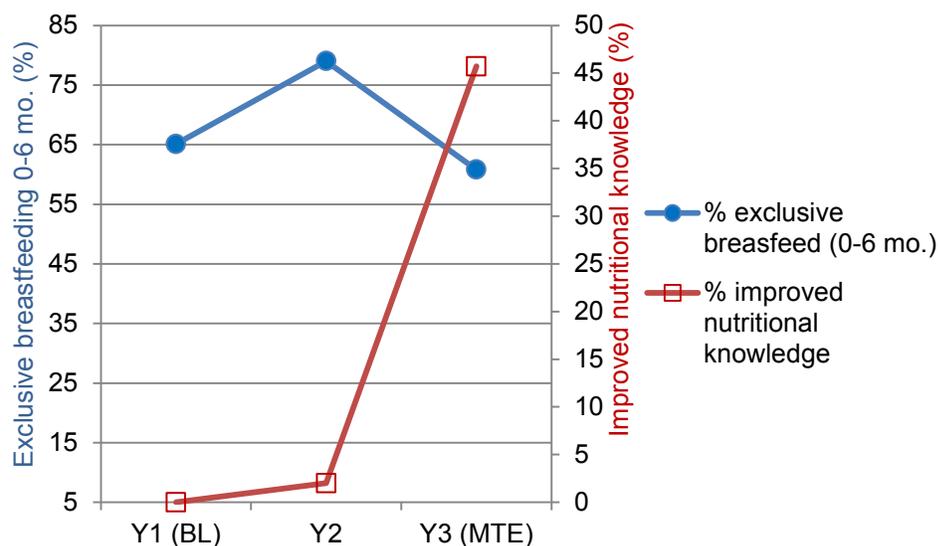
Among mothers of children aged 6-24 months (n=566), the mothers with increased nutritional knowledge had no significant difference in the average dietary diversity of their children, compared to mothers with no increase in nutritional knowledge.

#### CORRELATION #4

Table 6: Percent of children 0-6 months exclusively breastfed (indicator 9) and percent of mothers demonstrating increased nutritional knowledge (indicator 7)

Nutritional knowledge among mothers	Breastfeeding among children 0-6 months			Chi <sup>2</sup> -test p-value
	Exclusively breastfed	Not exclusively breastfed	Total	
Increased knowledge	21 (58.3%)	15 (41.7%)	36 (45.6%)	0.686
No increase in knowledge	27 (62.8%)	16 (37.2%)	43 (54.4%)	
Total	48 (60.8%)	31 (39.2%)	79	

Figure 4: Changes in the percent of children 0-6 months who were exclusively breastfed and the percent of mothers demonstrating improved nutritional knowledge, from baseline to midterm



Among mothers with increased nutritional knowledge, there was no significant association with the practice of exclusive breastfeeding of children aged 0-6 months, compared to mothers with no increase in nutritional knowledge.

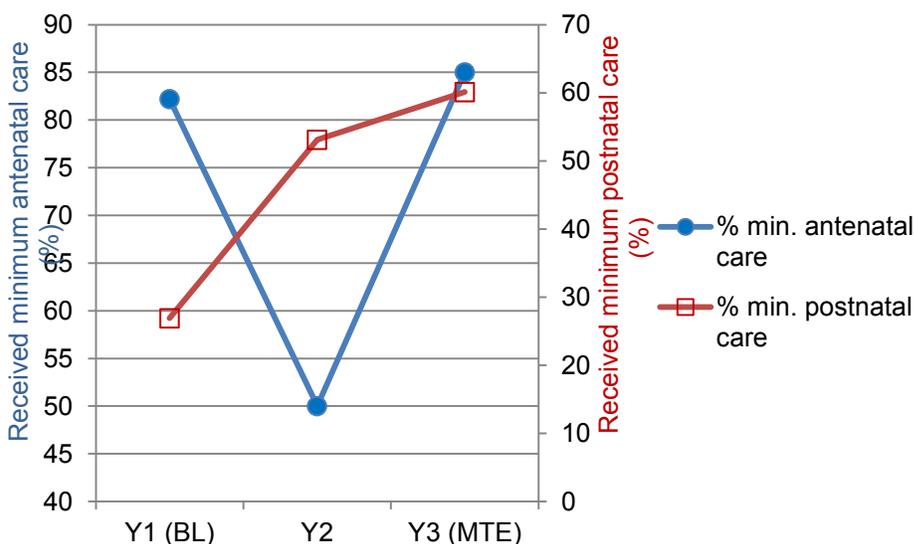
#### CORRELATION #5

Table 7: Percent of mothers receiving minimum recommended antenatal care (indicator 14) and percent of mothers receiving minimum recommended postnatal care (indicator 16)

Antenatal care	Postnatal care			McNemar test p-value
	Received the minimum recommended	Did not receive the minimum recommended	Total	
Received the minimum recommended	370 (65.7%)	193 (34.3%)	563 (87.8%)	<0.001*
Did not receive the minimum recommended	48 (61.5%)	30 (38.5%)	78 (12.2%)	
Total	418 (65.2%)	223 (34.8%)	641	

\* indicates statistical significance ( $p$ -value < 0.05).

**Figure 5: Changes in the percent of mothers receiving minimum recommended antenatal care and the percent of mothers receiving minimum recommended postnatal care, from baseline to midterm**



Despite a high percentage of mothers receiving the minimum recommended prenatal care (87.8%), there was a significant decrease in the percentage of mothers receiving the minimum required postnatal care (65.2%). Overall, however, the percentage of mothers receiving minimum recommended postnatal care increased dramatically from baseline to midterm.

### 4.3 Discussion of Findings by Objective

The presentation of findings begins with the characteristics of convergence centers, community healthcare, households, and mothers, with comparisons between the baseline and midterm evaluation findings.

This information provides a contextual framework for further discussion by strategic objectives and intermediate results.

As with the IPPT above, where possible, values in the ‘Midterm Evaluation’ column are listed in blue for those that exceed baseline figures, black for those equivalent or unchanged, and red for those that fall below baseline.

#### CONVERGENCE CENTERS

CCs were selected by PROCOMIDA used a two-step selection methodology. First, at the municipal level a list of CCs was compiled from those identified by the Guatemalan Government as being in food insecure communities (prioritized through the Secretary of Food Security and Nutrition, or SESAN). Then, the locations of these CCs were assessed for their accessibility by 5-ton delivery trucks, necessary for regular (monthly) ration distribution. It should be remembered that community members still walk from communities to the CCs to pick up rations.

PROCOMIDA is currently refining this methodology in consideration of smaller delivery trucks. This will reduce the issue of road access, and increase the number of eligible CCs and remote locations covered by the program. In addition, the program is negotiating with the MoH to shift resources in an effort to have full coverage by jurisdiction.

**Table 8: CC characteristics**

Characteristics	Baseline n = 45	Midterm n = 47
<b>Personnel: Percentage of CCs that had at least one...</b>		
Doctor	13.3	8.5
Nurse	86.7	83.0
Institutional facilitator	100	87.2
CC-approved midwife	100	97.9
Community facilitator	100	100
CHV	88.9	76.6
Has basic health team	88.9	97.9
<b>Optional Staff: Percentage of CCs that had at least one...</b>		
Traditional midwife	8.9	21.3
Technical worker	26.7	29.8
Health educator	68.9	59.6
<b>Infrastructure: Percentage of CCs that had...</b>		
Own building	82.2	89.4
Bathroom	75.6	87.2
Electricity	24.4	21.3
Cement floor	77.8	83.0
<b>Medical Equipment: Percentage of CCs that had at least one...</b>		
Hospital bed	82.2	72.4
Adult scale	95.6	100
Children scale	100	100
Fixed height board	20	23.4
Portable height boards	40	93.6
Blood pressure monitor	28.9	14.9
Stethoscope	31.1	12.8
Thermometer	35.6	17.7
<b>Essential medicine and micronutrient supplements: Percentage of CCs that had...</b>		
ORS	82.2	85.1
Amoxicillin	93.3	83.0
Trimetoprim-Sulfametoxazole	68.9	83.0
Penicillin	80.0	66.0
Albendazole	88.9	74.5
<b>Children supplements</b>		
Vitamin A	2.2	36.2
Chispitas (micronutrient powder)	44.4	61.7
<b>Women supplements</b>		
Iron	93.3	74.5
Folic acid	88.9	85.1
Prenatal supplements	11.1	10.6

Recalling the role of CCs in health delivery, it is of concern that the presence of key healthcare personnel (institutional team members) at CCs has declined compared to baseline (see Table 8). For example, only 8.5% of CCs have at least one doctor, compared to 13.3% at baseline. Additional reductions to team personnel are noted for ‘at least one’ nurse, institutional facilitator, CC-approved midwife, and educator.<sup>11</sup> Interestingly, those reporting the presence of a community health team (comprised of CHV as lead and receiving training, health guardian as their assistant, and a traditional midwife) increased from 88.9% at baseline to 97.9% at midterm.

Compared to personnel, CC infrastructure, with the exception of electricity, improved, and 89.4% of CCs report they now have their own building. Unfortunately, CC access to basic medical equipment and supplies continues to pose a challenge, which is beyond PROCOMIDA’s scope. While CCs report improved access to scales and height boards, provided as part of a start-up package to all participating CCs by the program, access to essential blood pressure monitors, stethoscopes, and thermometers decreased by half or more from baseline. The availability of essential medicines and micronutrient supplements decreased for six of ten drugs assessed, most notably for penicillin (66% at midterm compared to 80% at baseline) and iron for women (74.5% at midterm compared to 93.3% at baseline). This may represent seasonal variation as well as funding shortfalls. There is circumstantial evidence that the government is ‘blanketing’ CCs with supplies and medicines when there is funding, in an attempt to ‘make up’ for the times when there is no funding and thus no coverage. This indicates an overall weakening in the quality of CC services, and presents challenges to health providers unable to meet timeline needs (as with vaccinations) or mitigate health emergencies.

## COMMUNITY HEALTHCARE

Table 9: Community healthcare characteristics

Healthcare characteristics	Average (s.d.)	
	Baseline n = 45	Midterm Evaluation n = 47
CC-approved midwife	2.4 (1.5)	2.7 (1.5)
Community facilitator	1.1 (0.4)	1.2 (0.4)
CHV	4.9 (4.0)	4.5 (3.6)
Percent with a health commission	97.8%	97.9%
Number of members	5.4 (1.4)	6.3 (2.7)
CC-approved midwife	2.4 (1.5)	2.7 (1.5)

No significant changes in relation to community healthcare characteristics at midterm compared to baseline are reported (see Table 9). There is a slight decrease in the number of CHWs at CCs (average 4.5 at midterm compared to 4.9 at baseline), and a slight increase in the number of members (average 6.3 at midterm compared to 5.4 at baseline).

<sup>11</sup> Institutional teams must have at least one doctor or nurse

## HOUSEHOLDS

Table 10: Household characteristics

Characteristics	Baseline		Midterm Evaluation	
	Frequency (n = 1,307)	Percentage (%)	Frequency (n = 942)	Percentage (%)
<b>Type of floor</b>				
Dirt	1,120	85.7	774	82.2
Concrete	182	13.9	159	16.9
Tile, Wood, and other			9	1
<b>Type of wall</b>				
Corrugated sheets			9	1
Reed, palm, bamboo, cane	190	14.5	124	13.2
Clay, cane			16	1.7
Wood	809	61.9	582	61.8
Asbestos and aluminum roofing sheets			66	7
Cement, brick, and other	188	14.4	145	15.4
<b>Type of roof</b>				
Duralita roofing sheets			18	1.9
Palm, wood			38	4.0
Asbestos and aluminum roofing sheets	1,221	93.4	873	92.7
Tile			5	0.5
Cement and other			6	0.6
Other			2	0.2
<b>Kitchen</b>				
Kitchen in house	689	52.7	653	69.3
Kitchen doubles as bedroom	1,016	77.7	377	40
<b>Number of rooms</b>				
	Mean 2.2 (s.d. 1.9)			
Only one space			51	5.4
One room	193	14.8	353	37.5
Two rooms			365	38.7
Three rooms			115	12.2
Four or more rooms			58	6.2
<b>Number of bedrooms</b>				
One space for all			57	6.1
One room			669	71
Two rooms			167	17.7
Three rooms			38	4
Four or more rooms			11	1.2

A total of 942 households were included in the midterm household survey, with a total of 3,245 household members. According to program data, the average household size is 5.23. The male to female ratio was 1:1 (49.1% males and 50.9% females). Slightly over half of the sample population were aged 18 and above (53.0%). Overall, there were 1,484 children under the age

of five (742 males and 742 females), 72 of whom were aged 0-6 months. At baseline, the average household size was 5.3 people, with 3.4 members under 18 years of age, and 1.4 children under 20 months of age.

Houses were generally small and of poor quality, indicating families living in moderate to extreme poverty. The average house had 1.8 rooms, with 37.5% of the study sample living in one-roomed houses. In 69.3% of households, the kitchen was located inside the house, and in 40%, the kitchen also served as a bedroom. The majority of the houses had dirt floors (82.2%), wooden walls (61.8%), and aluminum roof (92.7%).

**Table 11: Home utility characteristics**

Characteristics	Baseline		Midterm evaluation	
	Frequency (n = 1,307)	Percentage (%)	Frequency (n = 942)	Percentage (%)
<b>Water Source</b>				
Faucet in the kitchen or bathroom			18	1.9
Faucet in home or yard	220	16.8	195	20.7
Public Faucet or hydrant			22	2.3
Well			48	5.1
Fresh water (river, lake)			25	2.7
Spring water	429	32.8	221	23.5
Collecting tank			24	2.7
Rainwater	578	44.2	386	41.0
Other water source	54	4.1	3	0.3
<b>Sanitation</b>				
Toilet with manual flush	193	14.8	19	2.0
Latrine	1070	81.9	867	92.0
Don't use			39	4.1
Don't know				
Other			17	1.8
<b>Electricity</b>				
Electricity	207	15.8	233	24.7
No electricity	1,100	84.2	709	75.3

Most households (92%) used latrines, a small percentage had a toilet that could be flushed manually by adding water (2%), and 4.1% of the households did not use any sort of latrine at all. The most common sources of water were rainwater (41%) and spring or river water (26%). Only a minority of the households had access to water from a faucet, with 20.7% of the households having a faucet in their home or yard, 1.9% in their kitchen or bathroom, and 2.3% access to a public faucet. Only 24.7% of the households had access to electricity, in an area with ample hydropower infrastructure.

## MOTHERS

Table 12: Mother characteristics

Characteristics	Mothers with children between 0-59 months old	
	Baseline n = 1,308	Midterm Evaluation n = 942
Age (years)	28.1(7.2)	30.0 (7.6)
Has a spouse or partner (percent)	93.2	95.0
<b>Ethnicity and language</b>		
Maya ethnicity	98.9	99.4
Speaks Q'eqchí	98	96.5
Reads Q'eqchí	35.7	39.1
Understands Spanish	29.1	31.2
Speaks Spanish	20.4	23.3
Reads Spanish	34.9	38.0

Little difference is noted in the characteristics of the mothers, or primary mothers, from baseline to midterm (see Table 12). They average 30 years of age, are of Mayan ethnicity, and primarily speak Q'eqchí (96.5%). Only 31.2% understand Spanish, and 23.3% speak Spanish. Literacy, or the ability to read either Q'eqchí or Spanish, is low and nearly equivalent at 39.1% and 38% respectively.

### **SPECIFIC OBJECTIVE 1: By 2015, pregnant and lactating women, children under 2, and malnourished children under 5 in program areas have improved and sustainable health and nutrition status**

This strategic objective is primarily focused on the beneficiary. Key program activities include ration distribution and linked educational trainings aimed at improving food consumption and mother knowledge about nutrition and correct health practices. The program assumption is that with rations and knowledge, behavior will change, with positive impact towards reducing malnutrition and stunting in children. It should be noted that it is extremely difficult to change chronic malnutrition in children, particularly those aged 0-24 months, even by 1% per year.

Table 13: Distribution of malnourishment among children aged 0-59 months (<-2 z-score weight-for-age), by sex

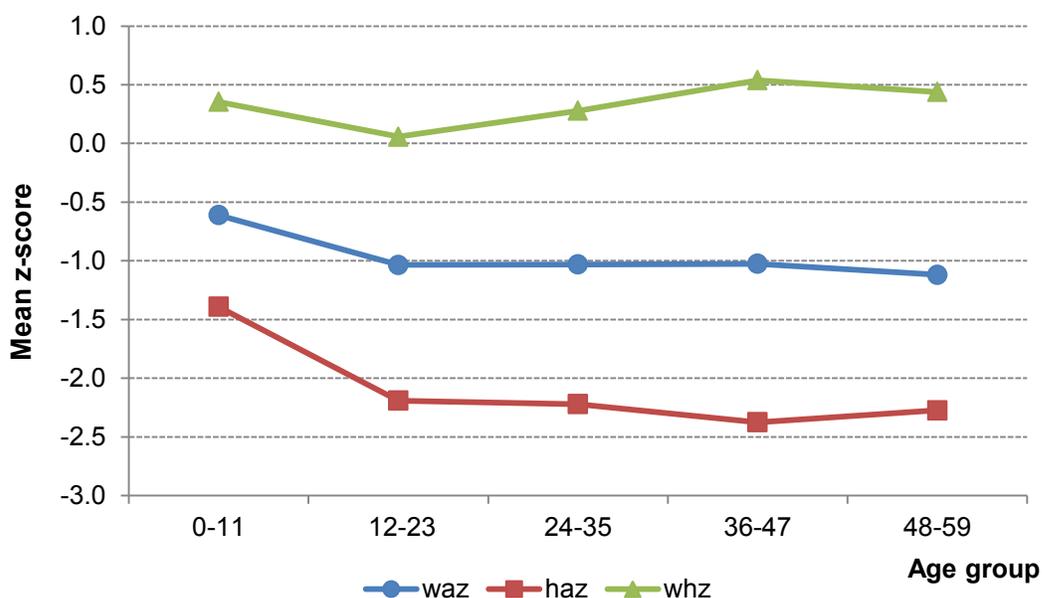
	Baseline (age 0-59 months)		Midterm evaluation (age 0-59 months)	
	n	% malnourished (<-2 z-score w-a)	n	% malnourished (<-2 z-score w-a)
<b>Total</b>	<b>1,819</b>	<b>235 (12.9%)</b>	<b>1,484</b>	<b>182 (12.3%)</b>
Boys	896	131 (14.6%)	742	90 (12.1%)
Girls	923	103 (11.2%)	742	92 (12.4%)

**Table 14: Distribution of stunting among children 6-59 months (<-2 z-score height-for-age), by sex**

	Baseline (age 6-59 months)		Midterm evaluation (age 6-59 months)	
	n	% stunted (<-2 z-score h-a)	n	% stunted (<-2 z-score h-a)
<b>Total</b>	<b>1,819</b>	<b>1,077 (59.2%)</b>	<b>1,412</b>	<b>792 (56.1%)</b>
Boys	N/A	N/A	703	402 (57.2%)
Girls	N/A	N/A	709	390 (55.0%)

From the data, at both baseline and midterm, there were no statistically significant difference ( $p>0.05$ ) in the percentage of boys and girls who were malnourished or stunted (indicators 1 and 2, see Tables 13 and 14).

**Figure 6: Mean z-scores for weight-for-age, height-for-age, and weight-for-height, by age group at midterm**



Of the total 1,412 children aged 6-59 months, 11 (0.8%) showed weight-for-height Z scores of less than -2, indicating wasting. This is still substantially below the 4.0% cut-off point as a trigger indicator (see Figure 6) but it is worth noting that there were no cases of wasting recorded in the baseline survey. Wasting is seasonal and can easily be influenced by recent events, including illness. As expected in conditions of poor diet, the biggest drop in z-scores tend to occur within the first two years of life.

**Table 15: Household hunger and dietary diversity**

Households with children between 0-59 months (%)		
	Baseline (n = 1,301)	Midterm evaluation (n = 942)
<b>Household hunger</b>		
No food in house	16.4	26.7
Went to bed hungry	8.8	10.3
Did not eat for a whole day	6.3	6.1
<b>Household hunger scale<sup>a</sup></b>		
Little or no hunger	91.2	89.7
Moderate hunger	8.8	9.9
Severe hunger	0	0.4
<b>Household dietary diversity</b>		
HDDS – mean (s.d.)	5.8 (1.6)	7.5 (1.9)
Percent with HDDS < 6	40.8	13.4

<sup>a</sup> household hunger scale (HHS) calculated using FANTA-2 indicator definition and measurement guide.

PROCOMIDA provides beneficiaries with a balanced ration to overcome this identified issue of food insecurity: individual rations of CSB or micronutrients (LNS or MNP), and household/family rations of rice, pinto beans and vegetable oil. Food supplementation is an incentive for mothers' participation and a source of macro and micronutrients for pregnant and lactating women and children between 6-24 months of age. To maximize efficiency in terms of delivery and reduce ration loss, Mercy Corps Guatemala has pioneered a process of repackaging rations into household-sized bags. Repackaging ensures the quality of the food, with very few losses (.01%). Food distribution at the CCs is also faster and more efficient. The experience, though novel, has been positive and the cost per beneficiary per year is only a minimal US\$6.25 per household.

In addition to flawless ration delivery, 100% of ration distribution events have delivered education sessions to beneficiaries on revolving topics according to PROCOMIDA's training curriculum. Follow-up home visits reinforce educational BCC messages, as do 'model' mothers trained in each community. Additionally, each packaged ration contains printed (graphic) educational messages, which rotate, allowing the program an additional BCC distribution method.

In the four weeks preceding the midterm survey, 26.7% of the households had at least one household member skip a meal due to insufficient funds to buy food, which is an increase of 10.3% compared to the baseline measurement (Table 15). In 10.3% of households, at least one member went to bed hungry, and 6.1% of households had at least one member who did not eat for a whole day. Overall, the prevalence of hunger has increased: 0.4% had severe hunger and 9.9% had moderate hunger. Up to 89.7% of the households reported having little or no hunger, compared to 91.2% reported at baseline. On the household hunger scale of 0 to 6, the average score overall was 0.44 (median = 0), with up to 95% of households reporting a score of 2 or less. The maximum hunger score recorded was 4 (four households). After the exclusion of missing data and accounting for multi-children households, there were a total of 1,287 children for whom the z-scores could be compared. For all three z-score measures (weight-for-age, height-for-age, and weight-for-height), there were no statistically significant difference observed when comparing children from households with little or no hunger and those from households with moderate to severe hunger (see Table 16). It is clear that seasonal differences and periods

of food shortage affect household hunger patterns, but both the baseline and midterm assessments occurred during critical months of food shortage intentionally, for greater comparability. The increases are concerning, given the program’s emphasis on ration distribution, and reductions in rations early on during program implementation after it was found that not all rations were being fully utilized. The program team, however, believes they are more related to external factors, including reduced income due to declines in demand for agricultural labor (especially cardamom harvest), and the effects of trigger indicators.

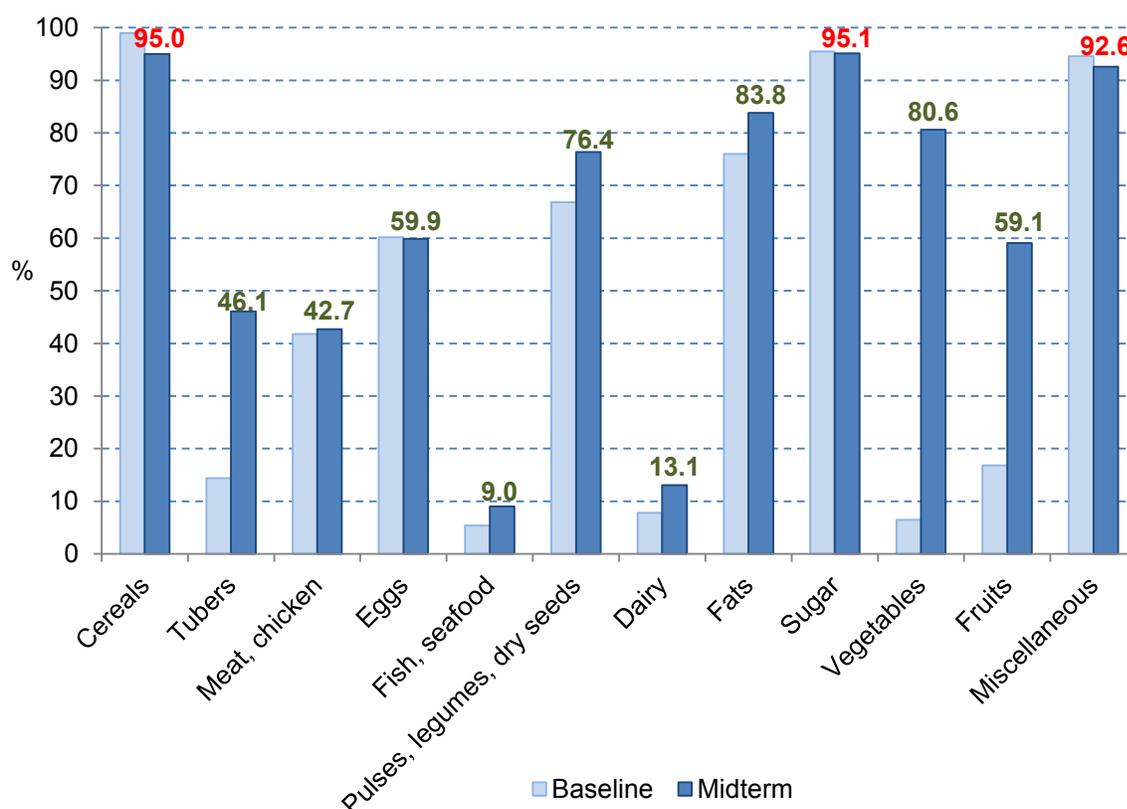
**Table 16: Average z-scores among children among households with different hunger levels**

Average Z-scores (s.d.)	Hunger levels in households <sup>a</sup>		
	Little or no hunger (n=1155)	Moderate to severe hunger (n=132)	t-test p-value
<b>Weight-for-age</b>	-0.971 (sd 0.918)	-0.984 (sd 0.923)	0.877
<b>Height-for-age</b>	-2.103 (sd 1.044)	-2.168 (sd 1.112)	0.498
<b>Weight-for-height</b>	0.293 (sd 0.903)	0.316 (sd 0.867)	0.782

<sup>a</sup>The total is 1,287 after accounting for missing data and multiple children households

Despite increases in hunger, looking at the data from 942 households, HDDS values ranged from a minimum of one to a maximum of 12 (indicator 3). On average, the HDDS value was 7.5 (±s.d. 1.9), an increase from the baseline 5.8 (±s.d. 1.6). In addition, there were substantially less households with a score of less than six at midterm (13.4%), compared to 40.8% at baseline.

**Figure 7: Comparison of food group consumption from baseline to midterm**



In the baseline survey, it was noted that families lived in small houses of poor quality and without good access to basic services such as water and electricity. The quality of household

diets was also found to be poor, and to consist predominantly of staple cereals, oils, and sugar, with some beans and eggs. Less than half of households consumed meats, and fruits, dairy products, vegetables, and fish were rarely eaten. While household hunger was found to be uncommon, the quality of household and child diets was poor.

Households at midterm consumed 7.5 food groups out of 12 in the past 24 hours. The most commonly consumed food groups were cereals, sugars, and miscellaneous including coffee, tea, and condiments (see Figure 7). Fish and dairy products were consumed the least (8.6% and 13.2% respectively). Meat was consumed in 42.3% of the households. The consumption of vegetables was relatively high at 80.4% compared to fruits, which were only consumed in 59.2% of the households. It should be noted that dietary patterns of course vary depending on the time of year, reflecting seasonal patterns related to fruit and vegetable availability, and duration of grain reserves in homes.

Comparing food consumption according to food groups, there are varying levels of increment in eight out of the 12 main food groups. The three groups with the largest incremental increases were vegetables, fruits, and tubers, which are not part of the donated food ration program. There were slight (insignificant) decreases among the three highest consumed food groups – cereals, sugar, and miscellaneous. Overall, however, midterm consumption patterns indicate that the food rations (cereals, fats, and pulses) combined with BCC messages that emphasize dietary diversity, have benefited households.

**INTERMEDIATE RESULT 1.1:** Increased consumption of energy and nutrient dense foods in households with pregnant/lactating women, a child 6-24 months of age, and/or a child 24-59 months with acute malnutrition

The targets set for the provision of food rations in the third year of PROCOMIDA were for food rations to be provided to 10,000 pregnant and lactating women, and to 16,000 children aged 6-24 months. Based on a PROCOMIDA record review, the target was almost doubled for pregnant and lactating women where food rations were given to a cumulative 19,989 women (Intermediate Result 1.1. - Monitoring Indicator #1). The target for children aged 6-24 months was also exceeded with 20,682 children receiving food rations (Intermediate Result 1.1. - Monitoring Indicator #2).

At baseline, 60.1% of households assessed satisfied the minimum acceptable dietary diversity score for children 6-24 months (indicator 5); whereas at midterm the proportion increased only slightly to 63.2%, short of the 70.0% target that was set. This is of concern to the program, as most training sessions (in conjunction with ration distribution, and followed-up at the household level during home visits) are focused on child dietary diversity, health and nutrition issues, and it is clear that knowledge has improved.

**INTERMEDIATE RESULT 1.2:** Improved household knowledge, attitudes and practices for key care behaviors

Prior to developing the BCC educational package to improve household and mother knowledge and behavior, formative research was conducted in implementation areas. As one of four research objectives, current maternal and infant and young child care, nutrition, and health-related practices to help inform the development of the program's social and BCC (SBCC) strategy were assessed. Based on the findings, key messages were defined to be addressed through training curriculum, and scope and sequence developed. Culturally specific training materials were developed, contextualized to the Q'eqchí population, and are delivered by bilingual (Q'eqchí and Spanish) field staff training teams who are additionally from the same region (local). All materials were extensively validated by field testing, and use self-explanatory images, rather than text, given the high levels of illiteracy.

Beneficiary educational training sessions are based on adult education principles (e.g., sessions are only 45 minutes long to ensure beneficiaries do not lose interest; punctual start times to show respect; participatory to increase learning ‘ownership’ as beneficiaries are guided to draw conclusions about good practices themselves). Male and female trainers handle different aspects of the training program, with respect for culture (e.g., female trainers work with mothers. Trainings are separate according to interest group – pregnant women, lactating mothers with children 0-6 months, mothers with children 6-24 months, and mothers with sick children – to ensure information is specific to their needs, and so that pregnant women and those recently delivered do not come into contact, a cultural taboo. Male trainers work with CHCs to oversee CCs, emergency plans, investment plans, etc.). Interest groups are kept small, not exceeding 20-25 mothers, to ensure participants have a sense of belonging, and feel free to express themselves. Messages are cross-fertilized during home visits throughout the month, and on ration distribution packages. All field staff trainers additionally receive monthly training updates on processes and techniques to improve the effectiveness of BCC message delivery.

The program has pursued a number of strategies to improve participation in educational training sessions, including allowing women in advanced pregnancy or those who are sick to identify a replacement to receive their ration and attend the training on their behalf. In addition to reasons of the woman’s health, training program attendance has often dropped during crop sowing and harvesting seasons, and when the government’s conditional cash transfer program planning that conflicted with ration distribution. The program is currently developing a communications strategy that will promote the program and improve educational training attendance through promotional local radio spots, identified by formative research as being an effective method of communication.

**Table 17: Percentage of mothers reporting knowledge of specific feeding practices**

Mothers of children between 0-23 months	Baseline (n = 708)	Midterm Evaluation (n = 633)
<b>Feeding knowledge: Percent who gave right answer:</b>		
Children should be breastfed less than one hour after birth <sup>b</sup>	82.5	84.0
Children should be given colostrum	86.3	94.8
Children < 6 months of age should not drink other liquids	71.6	85.6
<b>Reported age in months at which children should receive liquids<sup>c</sup></b>		
	7.3 (3.5)	
Percent women who said 6 months	52.6	60.7
Percent women who said < 6 months	6.8	3.6
Percent women who said > 6 months	40.6	34
<b>Reported age in months at which children should receive semi-solid foods<sup>d</sup></b>		
	7.4 (3.0)	
Percent women who said 6 months	49.8	62.9
Percent women who said < 6 months	2.1	1.4
Percent women who said > 6 months	48	34.4

From the data, the majority of mothers had adequate knowledge about feeding practices (see Table 17). Over 80% knew that a newborn should be breastfed within one hour of birth, and 94.8% knew that colostrum should be given to newborns. The majority of women (91.5%) also responded that infants less than 6 months of age should not drink any other liquids than breast milk. The increase in knowledge in breastfeeding mothers is especially reflected in the increase

in knowledge of the introduction of liquids and solid foods to infants, which at baseline was only answered correctly by 71.6% of mothers, and increased to 91.5% at midterm.

On average, mothers responded that children can start to receive liquids at 7.1 months of age, and start to receive semi-solid foods when they are 7.0 months old. The majority of women reported correctly the age of 6 months for the introduction of liquids (60.7%) and the introduction of semi-solid foods (62.9%). Of those who did not know the correct answer, only a small percentage of women responded that liquids (3.7%) and solid foods (1.4%) should be introduced before the age of six months.

**Table 18: Percentage of pregnant women reporting knowledge of specific warning signs/dangers of pregnancy**

Mother's knowledge of danger signs of pregnancy	Mothers of children between 0-23 months	
	Baseline (n = 708)	Midterm Evaluation (n = 633)
<b>Danger signs of pregnancy: when a pregnant woman should receive medical attention: Percent who responded...</b>		
Persistent back pain	57.2	35.1%
Severe headaches, blurry vision	42.5	46.8
Vaginal bleeding	31.2	58.6
Pelvic or abdominal pain	25.8	30.6
Swelling of the hands/face	24	22.7
Gush of fluid from vagina	3.5	7.0
Regular contractions prior to 37 weeks	2.8	3.6
No fetal movement	2.3	4.6
<b>Total signs mentioned out of eight</b>	1.9 (1.1)	2.1 (1.5)

Overall, 34.0% of mothers are aware of the danger signs of pregnancy, a substantial increase from the baseline value of 5.9% and exceeding the midterm target of 20.0%. On average, mothers knew only 2.1 out of eight standard danger signs of pregnancy. The most common danger signs of pregnancy mentioned by women at midterm were vaginal bleeding (58.6%), severe headaches or blurry vision (46.8%), persistent back pain (35.1%), pelvic or abdominal pain (30.6%), and swelling of hands or face (22.7%). Only 7% mentioned the gush of fluid from the vagina, early contractions, or no fetal movement.

**Table 19: Health and care knowledge of mothers<sup>a</sup>**

Responses	Mothers of children between 0-23 months (%)	
	Baseline n = 720	Midterm Evaluation n = 633
<b>Preventing diarrhea</b>		b,c
Wash child's hands	78.7	78.8
Keep children's clothes clean	57.3	58.0
Clean fruits and vegetables	28.4	37.1
Don't let children sit on ground	17.5	25.9
Give child purified water	6.4	8.5
<b>Treating diarrhea</b>		c,d

Give ORS	67.0	65.2
Give traditional medicine	30.4	22.0
Take to medical center	29.4	49.6
Give purified water	5.2	8.4
Continue breastfeeding	2.8	6.6
Percent who knew of ORS	96.0	92.9
<b>Feeding a sick child</b>		
Feed less	90.5	86.1
Feed the same	4.9	6.5
Feed more	4.5	6.6
<b>Giving liquid to a sick child</b>		
Less liquids	43.7	43.1
Same amount of liquids	6.1	11.7
More liquids	50.3	44.7
<b>Feeding a child recovering from sickness</b>		
Feed less	29.8	28.3
Feed the same	30.9	26.4
Feed more	39.3	44.7

<sup>a</sup> Values are mean (s.d.) or percent

<sup>b</sup> 43 mothers responded that they did not know

<sup>c</sup> Questions were open-ended and mothers could provide multiple answers

<sup>d</sup> 13 mothers responded that they did not know

Knowledge on how to prevent diarrhea in children was limited (see Table 19). Mothers mentioned washing the child's hands (78.8%), keeping the child's clothes clean (58%), and washing fruits and vegetables before eating them (37.1%). Only 8.5%, however, mentioned the importance of giving the child clean water, and no one mentioned washing their own hands. Very little improvement can be seen in the health and care knowledge of mothers on preventing diarrhea.

When asked how to care for a child with diarrhea, 65.2% of the mothers said that they should be given oral rehydration salts (ORS) - although as many as 92.9% of mothers knew what ORS was, 22% mentioned that children should be given local or traditional remedies, and 49.6% mentioned that a child should be taken to a local healthcare facility. Only a few women mentioned that children should be given purified water (8.8%) and breastfeeding continued (6.6%). More women mentioned that children should be taken to a local healthcare facility, given purified water, and breastfed compared to the baseline measurement. Of particular concern is that fewer than 50% of women, and less than baseline, mentioned giving children more liquids (44.7% compared to 50.3%).

**Table 20: Use of prenatal care services<sup>a</sup>**

Prenatal care for mothers with children between 0-23 months (%)		
	Baseline n = 720	Evaluation n = 646
<b>Had prenatal care: Percent who used...<sup>a</sup></b>	96.8	98.6
CHV	2.4	1.5

Convergence center	90.7	86.1
Government funded medical center	18.9	26.0
Private hospital or clinic	4.2	4.9
Health posts	N/A	2.2
Health centers	N/A	22.0
IGGS	N/A	1.4
APROFAM	N/A	2.5
Others	N/A	1.1
<b>Number of prenatal care visits</b>		
All visits <sup>b</sup>	5.5 (2.6)	6.0 (2.7)
Visits in medical facility <sup>b</sup>	5.4 (2.5)	5.8 (2.5)
<b>Services provided at prenatal visits: Percent who...</b>		
Received a tetanus shot	61.2	15.5
Had blood pressure taken	94.5	95.5
<b>Percent who took supplements of...</b>		
Iron	87.4	91.0
Folic acid	84.3	94.3
Other prenatal vitamins	20.7	32.4
<b>Newborns who received essential newborn care</b>		
Percent of children born in the last 23 months who were put to the breast within one hour of birth	75.0	77.9
Percent of children born in the last 23 months who were dried (wiped) immediately after birth before the placenta was delivered	98.8	91.0
Percent of children born in the last 23 months who were wrapped in an arm cloth or blanket immediately after birth before the placenta was delivered	99.0	92.7

<sup>a</sup> Mothers could provide multiple answers

<sup>b</sup> Values are mean (s.d.)

Prenatal healthcare seeking by woman was high; almost all women (98.6%) visited a medical professional during their pregnancy (see Table 20). The majority of women met with medical professionals at a CC (86.1% - a slight decline from baseline, but against an increase in attendance at medical centers). Other healthcare facilities visited by pregnant women include government funded medical centers (26%) and private clinics (1.9%). Hardly any women met with a CHV (1.5%), a possible indication their knowledge and services are not valued at the community level.

Almost all pregnant women (95.5%) who had prenatal health care had their blood pressure measured, which is similar to the percentage of women at the baseline measurement (94.5%). The percentage of woman who received a tetanus shot (15.5%) is alarmingly lower than at baseline (61.2%), despite a 5% increase in availability compared to the previous year.

The majority of women took nutritional supplements during their pregnancy, 91% of the women took iron supplements, and 94.3% took folic acid supplements, an increase from 87.4% and 84.3% respectively at the baseline measurement. The percentage of women who took other prenatal vitamins also increased from 20.7% to 32.4%.

Ninety-one percent of the newborns were wiped immediately after birth and 92.7% of the newborns were wrapped in a cloth or blanket, both slightly reduced from baseline. Taking into consideration cultural preferences, there is a noticeable trend towards reduced care that can partially be explained by the previously noted reductions in CC staff (revisit Tables 8 and 9, i.e., fewer doctors, nurses, approved midwives, CHVs, etc.).

**INTERMEDIATE RESULT 1.3:** Increased engagement of households in reducing vulnerability to food insecurity

Through PROCOMIDA, CHCs are strengthened in a variety of ways. One of these is through the creation of community emergency health funds, managed by the CHC with amounts defined by the community, for the community, and compiled from voluntary contributions by community members. These funds are vitally important and not limited to program beneficiaries.

Towards the establishment of emergency health funds, PROCOMIDA holds a community assembly when a new CC is identified for program participation, and circulates the idea of the fund. The program does not handle any of the funds, and does not have access to them; rather they train the CHCs to manage the funds and help with auditing, establishing regulations, and defining investment plans. Four situations qualify to access the funds: (i) mother and/or child emergencies; (ii) support to improve the CC; (iii) improvement or creation of community store rooms; and (iv) loans to buy seeds for household gardens to encourage greater food diversity (as a revolving fund). There are only a handful of examples where community health funds have not been handled transparently and required intervention, first through dialogue, and when that failed, with threat of program withdrawal. For this reason, transparency of funds between CCs, CHCs, and community members, is essential.

PROCOMIDA is also implementing household management or action plans to assure healthy houses. This is tied into ration distribution and an assurance that high energy and diverse foods are available for families, to improve self-consumption. It also includes Model Mothers with kitchen gardens that are to be reproduced by other mothers, and trained in cooking healthy and nutritious foods that are taught to other mothers. During 2012, PROCOMIDA hired community strengthening workers to introduce and promote the kitchen gardens. While household action plans are not exclusively an idea of Mercy Corps, these plans take into consideration three things: (i) what is necessary to keep families healthy and happy; (ii) what is needed to keep houses and kitchens clean; and (iii) how backyards can be made more productive.

There has been considerable achievement in the target to increase the engagement of households in reducing their vulnerability to food insecurity. The percentage of households that possess household action plans almost doubles the target set for midterm (5.8% households with action plans compared to the target of 3%).

Based on information obtained from PROCOMIDA documentation, by the third year of project operations, 270 CCs and 14 HPs have created emergency funds, meeting the midterm target for the project. However, from the sample of the 47 centers surveyed, only 40 (85.1%) reported that they had an emergency fund, specifically with regards to needs of emergency transportation.

## **SPECIFIC OBJECTIVE 2: By 2015, health care service providers at community through municipal levels have improved service quality and delivery**

This strategic objective primarily addresses strengthening health providers, structures, and infrastructure to provide strong MNCH care.

PROCOMIDA actively works to strengthen local NGO Health Implementers identified and contracted through the MoH.<sup>12</sup> The program's main focus is BCC, with food distribution being a motivator for attendance to educational sessions (consistent with PM2A approach). In addition to training beneficiary mothers, PROCOMIDA has sub-grants with NGO Health Implementers, through which educators are hired and trained by the program in order to conduct home visits, work with lead/model mothers, and train CHVs as part of the health implementation structure. This structure is in fact two teams: (i) an institutional team comprised of a doctor or professional nurse and an educator/facilitator, and (ii) a community team with the CHVs, health guardians, and traditional midwives. Both teams, in theory, receive training with MoH support to manage the CCs and ensure the health needs of satellite communities are met. PROCOMIDA works directly with the NGO Health Implementers to strengthen their technical ability at both the organizational level, and the community level.

NGO Health Implementers are reliant upon funding, supplies (medicines, vaccines, etc.), and other training support from the MoH. Since program initiation, the departmental ministry has been able to improve local NGO Health Implementer visibility, to the program's advantage. Reporting remains a weakness, however, particularly the quality of growth monitoring data, with implications for program monitoring data and evaluation. This is acknowledged to be partly due to the fact that the program does not directly train the CHVs. It is also a result of frequent changes to ministry staff, and subsequently changes in focus and priorities.

PROCOMIDA is addressing reporting weaknesses through education focused on standardized anthropometric measurements, delivered to implementing NGOs, combined with institutional strengthening at the CCs. Changes in reporting procedures have also been recently affected. Program data will no longer be collected and uploaded by implementing NGOs, but recorded monthly by program field staff directly from the child's growth charts and uploaded to the database during the training sessions that coincide with ration distribution. Entered on the spot into the portable Tablet, it will be used immediately to identify if the child is growing well. If there is a delay in growth, the CHV will be alerted and mothers will be taken for counseling. In cases where a child is considered at risk, after the training session, his or her weight and height will be measured together with the CHV and entered into ENA or ANTHRO<sup>13</sup> to identify acute malnutrition. If a child is identified with acute malnutrition, he or she is immediately referred to the closest health center as per MoH protocols.

Amongst and between these NGOs, PROCOMIDA shares good practices and lessons learned, and facilitates networking and cross learning. PROCOMIDA is also working to address recommendations from implementing NGOs, one of which is that the program needs to be better involved in directly coordinating activities between CHVs and CHCs. This is of particular importance for sustainability of program inputs. If NGO Health Implementers are to continue to reach beneficiaries following program closeout, their need to be active linkages between all those trained under the program. Local NGO Health Implementers, CHVs, and CHCs are the correct channels to reach beneficiaries and make an impact.

---

<sup>12</sup> PROCOMIDA has no input in NGO selection

<sup>13</sup> WHO software for assessing growth of the world's children and adolescents, consisting of three modules: (i) anthropometric calculator; (ii) individual assessment; and (iii) nutritional survey

The three impact indicators to measure improved service quality and delivery by health care service providers at the community through municipal levels relate to: (i) the knowledge of health facility staff and community volunteers; (ii) minimum standards for health and nutrition services and practices of health facilities; and (iii) minimum standards for performance by local CHVs.

**Table 21: Health care worker knowledge of danger signs that require medical attention**

	Percentage correct response (%)	
	Baseline n = 109	Midterm Evaluation n = 47
<b>Danger signs of childhood illnesses</b>		
Child not able to drink or breastfeed	32.1	40.4
Child becomes sicker	12.8	31.9
Child develops a fever	72.5	70.2
Child has fast breathing	50.5	53.2
Child has difficulty breathing	52.3	40.4
Child has blood in the stool	1.8	40.4
Average total signs mentioned out of six – mean (s.d.)	2.2 (1.2)	2.8 (1.5)
	Baseline n = 115	Midterm Evaluation n = 47
<b>Danger signs of pregnancy</b>		
Vaginal bleeding	89.6	89.4
Pelvic or abdominal pain	56.5	61.7
Persistent back pain	6.9	21.3
Gush or fluid from vagina	26.9	42.6
Swelling of the hand/face	34.8	27.7
Severe headaches, blurry vision	81.7	83.0
Regular contractions prior to 37 weeks	6.9	10.6
No fetal movement	3.5	21.3
Average total signs mentioned out of eight – mean (s.d.)	3.1 (1.1)	3.6 (1.6)

While the targets for achieving minimum standards for the health facilities and are met, it must be noted that the targets set are relatively low. The knowledge level of health facility staff and community volunteers - measured in terms of their ability to identify the minimum number of core health and nutritional practices – lag behind as one of the poorest performing indicators. Not only was the target of 20% not met, the percentage of staff and volunteers who were able to identify minimum core health and nutritional practices dropped to 4.3%, lower than what was recorded at baseline (6.5%). On average, a health care worker was only able to name less than three warning signs out of six childhood illnesses, and less than four out of eight pregnancy danger signs. Table 21 shows a breakdown of the surveyed health care workers' responses to danger signs indicating the need for medical attention, for childhood illnesses and during pregnancies.

**INTERMEDIATE RESULT 2.1: Increased communication and interaction between community members and health service providers**

The targets for health commissions to conduct regular meetings and demonstrate progress on their action plans was set at 270 to cover all the program CCs. By the midterm evaluation all

270 CCs and 14 HPs reporting having regular meetings and demonstrating progress on their action plans. Thus, the targets for the first two monitoring indicators are exceeded. For the third monitoring indicator (the number of pregnant women in health facility orientation visits) the target set was 540; however, as no activities were implemented for this indicator, the data is zero. The program is rethinking how to approach this indicator with a focus on exposing TBAs to health facilities, rather than mothers.

**Table 22: Birth options and attendance of medical staff<sup>a</sup>**

Births of children between 0-23 months (%)		
	Baseline n = 720	Midterm Evaluation n = 646
<b>Location of birth: Percent who...</b>		
Delivered at home	64.1	65.2
Delivered at health facilities	35.9	34.8
<b>Medical Staff at birth: Percent who had presence of...</b>		
CC approved midwife	52.5	47.5
Doctor or nurse	35.1	43.8
Local CHVs	7.5	4.9
Untrained midwife	4.7	3.5

<sup>a</sup> Values are mean (s.d.) or percent

At both baseline and midterm, the majority of women delivered at home (65.0% and 63.8% respectively) compared to at a health facility (34.4% and 35.1% respectively, see Table 22). Deliveries were mainly attended by a CC-approved midwife (47.5%), or by a medical staff (43.81%), such as a doctor or a nurse. Only 4.1% of the births were attended by local CHVs, and 0.9% by a traditional midwife. At baseline, 4.7% of the women reported the presence of a traditional midwife. Furthermore, it can be seen that more women had a doctor or nurse present and less had a CC-approved midwife present, compared to the women at baseline (35.1% and 52.5% respectively), which is very encouraging.

**INTERMEDIATE RESULT 2.2:** Increased and improved provision of minimum standards in health services to women and children

As part of the comprehensive training package, program staff visit participating CCs every month for training and distribution, and also to assess the physical and economic infrastructure at the CC. In recognition of reporting weaknesses, and their impact on program monitoring data, all CCs have been provided measure boards, infant scales, and adult scales as part of a basic package. Other efforts are underway to advocate for a more efficient supply chain with access to, in particular, timely and sufficient vaccinations and other essential medications. It is acknowledged that MoH budgetary issues is reflected in the availability of funding for local implementing NGOs, and affects the availability of vaccines, medications, and micronutrients. Micronutrient and vaccination coverage in particular are very stationary. When the government has funding, they 'blanket' communities with vaccinations. Unfortunately, this means that many children are not receiving vaccines within the correct timeframe, reducing their efficacy. Additionally, during emergency cases (particularly diarrhea and respiratory-related), there are often inadequate essential medicines available at CCs. Families living in extreme poverty must then decide, in the absence of free medicines, whether they can afford to transfer sick household members long distances to hospitals, purchase medicines from private pharmacies, or do nothing and hope for the best.

It is encouraging to note that indicator 27 (the number of health facility staff trained in health and nutrition best practices) exceeded the midterm target of 60 by slightly more than double at 121. This is related to both the expansion and inclusion of educators and staff at the health posts. Additionally, as per program monitoring data, 94% of SAM cases (indicator 29) were referred following the protocols of the MoH, exceeding the target of 90%.

**INTERMEDIATE RESULT 2.3:** Increased promotion and planning by health care providers to meet community health care needs

The midterm target set for the number of persons trained in planning and advocacy around food security and health was 1,680. At midterm evaluation, program monitoring data suggest that 1,988 persons had been trained. This is directly related to the expansion of the program.

## 5. CONCLUSIONS AND RECOMMENDATIONS

Overall, the program has shown success, with important improvements noted to all three anthropometric impact indicator. This is important given that there are two red and one yellow triggers out of four trigger indicators measured, indicating that they have worsened in the last year. Despite supplement Title II rations, household hunger also increased over baseline. Clearly something has been going on that has adversely affected household diet. Yet despite the worsening of these external factors, the program has been able to show improvements in some important areas.

Unfortunately, the midterm evaluation does reveal a concerning gap between improved knowledge, and actual behavior change. It has to be noted that BCC theory and theory of change do recognize that one has to acquire knowledge in order to change behavior (practice) and attitudes. It is also known that the step from knowledge to actual practice, especially with behavior, is more difficult. That said, the program did expect to be more advanced in this area at this stage. It is yet to be seen if this is a factor of time, or of household decision-making.

This gap in knowledge is evident from the analysis of IR 1.2, where indicators that are related to knowledge all far exceeded midterm targets, demonstrating that the program has successfully transferred knowledge to participating mothers. For example, the percentage of mothers demonstrating increased nutritional knowledge exceeded the target of 10% by more than four-fold. Unfortunately, among these mothers demonstrating increased nutritional knowledge, there was no significant association with better average HDDS, dietary diversity of children aged 6-24 months, or in the practice of exclusively breastfeeding children aged 0-6 months. Rather, the percent of newborns who received essential newborn care, the percent of children between 0-6 months that were exclusively breastfed, and the percent of children aged 6-24 months with respiratory diseases that received adequate treatment were all not only lower than midterm targets, but lower than their baseline values. Despite rations and BCC, 36.8% of children 6-24 months were found to have below the minimum acceptable dietary diversity, and demonstrated only a moderate improvement in overall dietary diversity from baseline to midterm. Additionally, in the four weeks preceding the midterm survey, in 10.3% of households, at least one member went to bed hungry, and 6.1% of households had at least one member who did not eat for a whole day. Overall, the prevalence of hunger has increased slightly from baseline to midterm: 0.4% had severe hunger, and 9.9% had moderate hunger, despite access to rations.

The overarching recommendation of this midterm evaluation is that PROCOMIDA needs to ***redirect programmatic efforts on translating improved knowledge and access to rations into improved practice and health seeking behavior.***

Towards addressing this recommendation, several suggestions or implementing recommendations are proposed.

**1. Conduct extensive anthropological ‘action learning’ research.** Formative research conducted during IY1 highlights several interesting points that appear to have been overlooked or forgotten during program implementation. These include the fact that mothers expressed the need to get permission from their husbands to partake in some program components. They also include that mothers, fathers, and grandmothers all expressed willingness to learn from the program’s health and nutrition professionals, as combined caregivers. Despite this, the program appears to have focused on mothers as caregiver, with several important consequences: (i) the roles in inter-household power dynamics and decision-making that husbands, grandmothers, and other household members play in effecting positive behavior change around nutrition and health practices were ignored; (ii) nutrition and health behavior, which are family and household issues, were inadvertently relegated to those of ‘mother’s issues’, and presumably accorded lesser importance by households.

Anthropological ‘action learning’ research is important to gain a deeper and more comprehensive understanding of the broader cultural, social, and economic context of nutrition, care-seeking, and health behavior. This is necessary in order to remain innovative and engaged in the non-technical dynamics surrounding demand, supply, and utilization, and adoption of knowledge. It is also necessary to shed light on how innovations are stimulated in society. In this case, the innovations are improved nutrition and behavior, and even acknowledgement at the household level that nutrition (diet) and behavior (care seeking and associated practices) can and should be improved. The importance of creating and sustaining a learning environment throughout the program process is fundamental, particularly given the difficulties translating knowledge into positive action. Unlike barrier analysis, which is limited, action learning research will provide a fuller picture for the program by looking at the positive enablers as well, with potential lessons to be learned both from within and outside the health sector. At best, this research would involve a team of anthropologists, not enumerators, to do *in situ* participant observation and qualitative interviews specific to when and where household caregivers, including but not limited to mothers, are translating knowledge into behavior, and how decisions regarding nutrition and behavior are traditionally made and by whom.

**2. Pursue a stronger educational focus.** This is particularly important for adolescent boys and girls (i.e., before marriage), for whom nutrition and behavior change information provided in schools will have the most impact on the next generation of children. This is in line with the program’s preventive approach to malnutrition and stunting. The focus on education must not, however, be restricted to school-age children. It should include adult literacy components that engage and empower both women and men in decision-making processes. All members of the household must be convinced with the ease and importance of good nutrition, particularly the traditional decision-makers. It is suggested that health facility orientation visits could be incorporated into educational opportunities (indicator 28), as exposure to health infrastructure is the first of many steps necessary to address cultural and linguistic preferences when making decisions about care seeking behaviors.

**3. Reconsider the role of CHVs.** The formative research conducted in IY1 notes that CHVs expressed frustration about their position. This included feeling of obligation because they were ‘chosen’ by communities (as opposed to wanting the job), and resentment because their jobs take time and energy but provide little compensation (Q500/month) or training. As the CHVs are the primary interface with beneficiary communities at the household level, their lack of motivation and frustrations negatively affect the delivery of program activities.

As noted by the data, the percent of health facility staff and CHVs able to identify a minimum number of core health and nutrition practices was significantly unable to meet the midterm target, and in fact dropped below the baseline value. This is partly due to high CHV turnover, which might also be due to the same frustrations and lack of motivation.

Current the program is working to involve more CHVs in training sessions, in addition to holding separate quarterly training sessions specifically for CHVs. Additionally, the program is designing specific training materials for CHVs on danger signs and nutrition practices. CHVs are and can be further involved in field activities, and NGO Health Implementers encouraged to further strengthen CHV support. For sustainability purposes, strong linkages between NGO Health Implementers, CHVs, and the Community Health Commissions is important.

Beyond trainings, it is suggested that the program should raise the issue of some kind of compensation for this important grassroots-level outreach workforce with the MoH. Additionally, the program might consider, through USAID, engaging Peace Corps or other volunteers with nutrition and health strengths, and who speak Spanish and possibly even Q'uechí, to work directly in the villages with CHVs at the household level.

In addition to this overarching recommendation, it is noted that a number of factors affecting program performance are outside of the program's control. These include access to essential blood pressure monitors, stethoscopes, and thermometers by CCs (which decreased from baseline), necessary to conduct anthropometric measurements and ensure child nutritional health. It also includes access to essential medications and vaccinations. Many of these are linked to MoH budgetary and supply chain management issues. The formative research in IY1 noted frustration from respondents based on the inconsistent availability of supplies, and these frustrations clearly continue. It is important that the program continue to address these issues with the MoH. The program should **consider renegotiating those indicators of access and quality of health services outside of programmatic control, or propose to change the indicators entirely to better measure direct interventions.** The availability of community health funds, a program innovation to improve the CC structure and function, is not sufficient, as it does not affect the availability of supplies and medications.

## REFERENCES

Ballard, T., Coates, J., Swindale, A., Deitchler, M. 2011. Household Hunger Scale: Indicator Definition and Measurement Guide. Washington, DC: FANTA.
Carranza, R., Jackson, J., Janssen, M. 2012. Behavior Change Communication Strategy. Guatemala: Mercy Corps PROCOMIDA Program.
Cogill, B. Anthropometric Indicators Measurement Guide. 2003 Revised Edition. Food and Nutrition Technical Assistance Project (FANTA). Washington DC: Academy for Educational Development.
Deitchler, M., Ballard, T., Swindale, A., Coates, J. 2010. Validation of a Measure of Household Hunger for Cross-Cultural Use. Food and Nutrition Technical Assistance Project II (FANTA-2). Washington D.C.: Academy for Educational Development.
FANTA-2 Project. 2009. Alternative Sampling Designs for Emergency Settings: A Guide for Survey Planning, Data Collection and Analysis. Food and Nutrition Technical Assistance Project II (FANTA-2). Washington D.C.: Academy for Educational Development.
Instituto de Nutrición de Centro América y Panamá. (INCAP). 2008. Evaluación del Componente de Monitoreo y Promoción del Crecimiento de la Estrategia AIEPI AINM-C en el Programa de Extensión de Cobertura en Guatemala. Guatemala.
Magnani, R. 1997. Sampling Guide. Food and Nutrition Technical Assistance Project (FANTA). Washington DC: Academy for Educational Development.
Mercy Corps Guatemala. 2010. Fiscal Year 2010 Annual Results Report. Guatemala: PROCOMIDA Program.
Mercy Corps Guatemala. 2011. Fiscal Year 2011 Annual Results Report. Guatemala: PROCOMIDA Program
Mercy Corps Guatemala. 2012. Fiscal Year 2012 Annual Results Report. Guatemala: PROCOMIDA Program.
Mercy Corps Guatemala. 2012. Pipeline and Resource Estimate Proposal (PREP). Guatemala: PROCOMIDA Program.
Mercy Corps. 2009. Programa Comunitario Materno Infantil de Diversificación Alimentaria – PROCOMIDA: Final Proposal Revision. Portland: Mercy Corps Headquarters.
Ministry of Health and Social Assistance (Guatemala), University of Valle and Division of Reproductive Health, Centers for Disease Control and Prevention (CDC). 2009. Guatemala Reproductive Health Survey 2008-2009. Atlanta, United States: CDC.
MKT. 2012. Final Report PROCOMIDA 2012 Midterm Evaluation. Guatemala.
Richter, S., Harris, J., Leroy J., Olney, D., Ruel, M. 2011. Strengthening and Evaluating the ‘Preventing Malnutrition in Children Under Two years of Age Approach’ (PM2A) in Guatemala: Cross-Sectional Baseline Report. Poverty, Health, and Nutrition Division International Food Policy Research Institute (IFPRI). Washington DC.
Richter, S., Harris, J., Leroy, J., Olney, D., and Ruel, M. 2011. Strengthening and Evaluating the “Preventing Malnutrition in Children Under Two Years of Age Approach” (PM2A). Food and Nutrition Technical Assistance II (FANTA-2). Washington DC: Academy for Educational Development
Stukel, D., Deitchler, M. 2012. Addendum to FANTA Sampling Guide by Robert Magnani

(1997): Correction to Section 3.3.1 FHI 360 (FANTA-2 Bridge). Washington DC: Academy for Educational Development.

Swindale, A., Bilinsky P. 2006. Household Dietary Diversity Score (HDDS) for Measurement of Household Food Access: Indicator Guide, Version 2. Food and Nutrition Technical Assistance Project (FANTA). Washington DC: Academy for Educational Development.

WHO. 2010. Indicators for Assessing Infant and Young Child Feeding Practices: Part II Measurement. Geneva.

## **APPENDICES**

### **Appendix A: Terms of Reference: Estadística y Opiniones MKT**

#### **Midterm Evaluation**

#### **PROCOMIDA**

#### **MERCY CORPS GUATEMALA**

FEBRUARY 2012

#### **Introduction**

The purpose of the Field Study for the Midterm Evaluation of PROCOMIDA Program (Community Food Diversification Program for Mother and Child) is to measure progress in program objectives. This assessment is an opportunity to measure actual achievements compared to goals. The objective of this activity is to identify problems and constraints that influence the achievement of the goals and to develop recommendations to improve the design, within the proposal framework, and program execution in order to achieve sustainable results.

PROCOMIDA is a six-year program that started in July 2009, funded by USAID and seeks to improve the nutritional status than 227,000 people in 750 vulnerable communities in the department of Alta Verapaz. The goal is to improve nutritional status and health of women and children vulnerable to food insecurity in northern Guatemala. PROCOMIDA provides nutritional and health education to empower mothers and other mothers to adopt best practices, including seeking health services. PROCOMIDA works with NGOs and MOH health units to establish community structures organized to improve the provision of culturally and technically appropriate health services. PROCOMIDA has an important research component, which is coordinated with FANTA-2 and IFPRI. It also provides beneficiaries a balanced ration of food that contains corn-soy blend (CSB) rice, beans, vegetable oil and micronutrients either in lipid based or powder form.

The program has two objectives:

1. In 2015, pregnant or nursing women, children under 2 years and children under 5 malnourished in the program area have improved sustainable health and nutrition.
2. In 2015, service providers, community health and municipal level have improved their service quality and delivery.

#### **Purpose of Evaluation:**

Measure the progress of the project in view of the indicators set out in the program proposal and IPTT (Indicator Performance Tracking Table) (Annex 1) and assess the scope and compliance of the program's processes, results and impacts as planned in the proposal and operational plans.

#### **Survey context**

This study will be conducted through the hiring of a consultant or external consulting firm and will be conducted within PROCOMIDA, implemented by Mercy Corps Guatemala (MCG), in the municipalities of Cobán, San Pedro Carchá, Cahabon, Lanquin and Senahú in the department of Alta Verapaz. PROCOMIDA is a six-year Title II program, funded by USAID, which aims to improve the nutritional status of 227,000 vulnerable people in 750 communities from the department of Alta Verapaz.

## **Parameters of the study**

The consultancy will consist of data collection, digitization, analysis and reporting of the program midterm evaluation, which will serve as a measure of performance and progress of the program and also evaluates the effectiveness of the processes and strategies implemented. The study should measure IPTT indicators and other indicators that measure program performance and implementation processes. The study should contain the following topics:

- Family composition
- Diet diversity (see FANTA)
- Hunger Scale (see FANTA)
- Knowledge of mothers and health workers (pregnancy, childbirth, postpartum, neo-born, children under two years)
- Pre-and postnatal health
- Infant feeding (including exclusive breastfeeding)
- Preventive health (mother and child)
- Morbidity and care seeking
- House conditions
- Resilience strategies
- Anthropometry of children under 5 years
- Consumption of donated food and supplements
- Coverage of other programs in the area
- Levels of participation in the program
- Access to health services
- Conditions and infrastructure of Convergence Centers and the services provided
- Equipment and supplies available in the Convergence Centers

The program reserves the right to include some additional items to assess specific aspects, provided they do not have the greatest impact on the duration of the survey

## **Study size**

The sample (and the methodology for determining it) will be defined by the consultant hired, under the supervision and approval of the program. It will take into consideration that the universe involves all active (15.874) and graduated (6.857) beneficiaries of the program within the 269 convergence centers served.

Two types of surveys will be held:

### **Household survey:**

- Sample to be defined
- Includes anthropometry in boys/girls under five years
- The survey will take approximately 1:30 hours per household
- The household sample will be determined in two stages (two-staged cluster sample), first at convergence center level and then at beneficiary families level

### **Community and health services survey:**

- Sample to be defined
- The study of health services includes: interviews to Community Facilitators (FC) in each convergence centers (CC); CC survey; interview with health personnel and a review of the infrastructure (equipment, infrastructure and drugs) of the CC

The baseline study surveys will be used as a basis, subject to review by the consultant and the program and its subsequent approval by the Monitoring and Evaluation Unit.

Additional items will be added to assess consumption of the products provided by the program and the influence of other food security social assistance programs recently implemented in the area.

By mutual agreement, qualitative questionnaires may be added, especially at the community / CC level.

### **Location:**

Rural areas of Alta Verapaz, Guatemala, in the CCs where the program is implemented, in the municipalities of Cobán, San Pedro Carchá, Cahabon, Lanquin and Senahú.

### **Schedule:**

The consultant shall submit a detailed timetable which will start the week after hiring and must include:

- Online and onsite coordination for setting operational and programmatic details. Review of survey instruments, programming of surveying equipment (PDA or tablet), recruitment of field staff and survey pilot to validate the survey (lasting approximately two to three weeks)
- Training surveyors, including standardization and field practice. (Approximately two to three weeks).
- Data collection. (Approximately 5 weeks)
- Data cleaning and quality control. (3 weeks)
- Delivery of end products, including the survey report. (2 weeks)

### **Field methodology:**

- The data collection will be conducted in digital form by using PDA (Personal Digital Assistant) or Tablet.
- The programming of the tablets / PDA will be carried out using appropriate software for the equipment used, defined jointly with the consultant and the program;
- The program will provide the height boards, scales and PDA or tablet for this study.
- The consultant will define the assessment team, including number of field teams (enumerators, supervisors, editors, anthropometrists) according to the stipulated time for data collection and geographic coverage. It should take into account that will be held at two levels (family and CC/community)
- There will be a rigorous training of surveyors. This should include field practice and anthropometric standardization.
- Household surveys will be conducted in Q'eqchí, while surveys with health staff, as appropriate, may be in Spanish. Field staff should be standardized in survey methods and the formulation of questions in Q'eqchi.

- The field staff must be 100% Q'eqchí, subject to language assessment by the program.
- The field team should include one or various supervisors/editors to oversee surveyors during the interviews and review all surveys before being delivered to the field coordinator.
- The consultant should describe the quality controls implemented throughout the process to ensure the accuracy of the information and the completion of the survey sample.
- The result tables will be determined jointly between the consultant and the program. The parameters used in the baseline will be taken into account.
- Data cleaning, statistical analysis and production of the final report will be made by the consultant.

**Deliverables:**

- Detailed plan of study, including:
  - General methodology
  - Sampling framework
  - Formation of teams
  - Q'eqchí standardization
  - Detailed schedule
- Anthropometric standardization plan for enumerators. The standardization should follow MOH guidelines.
- Field survey plan by municipality, CC and families to be surveyed. It should be noted that, at the requirement of some indicators, the survey will be done 7 days a week. The consultant may consider including short rest periods, provided it does not affect the timing and in accordance with the Monitoring and Evaluation Unit.
- Quality control plan to ensure high quality of data
- Other relevant items.
- Training and anthropometric standardization report, including details of the adjustments made to the questionnaires.
- Weekly field progress report.
- Final field report, including response rate, number of surveys per segment of the population, observations and issues, any other information necessary for the interpretation of the data.
- Databases in a format suitable for use in common software for data analysis (SPSS). The databases will be accompanied by a dictionary of variables, including the name of each variable, label, type of variable, the values and labels (if it is a discrete variable) and method of calculation.
- Presentation of results to the Technical Support Unit, managers and program direction. In addition to a presentation to the Donor and National Partners.
- Final report in English and Spanish

## **Appendix B: Terms of Reference: Health and Development Consulting International (HDCi) LLC**

### **Midterm Evaluation Results Review and Reporting (Final Midterm Report Team)**

#### **PROCOMIDA**

#### **MERCY CORPS GUATEMALA**

DECEMBER 2012

#### **Introduction**

The purpose of the Midterm Evaluation of PROGRAMA COMUNITARIO MATERNO INFANTIL DE DIVERSIFICACIÓN ALIMENTARIA (PROCOMIDA) is to measure progress in program objectives. This assessment is an opportunity to measure actual achievements compared to goals. The objective of this activity is to identify problems and constraints that influence the achievement of the goals and to develop recommendations to improve the design, within the proposal framework, and program execution in order to achieve sustainable results.

PROCOMIDA is a six-year program that started in July 2009, funded by USAID and seeks to improve the nutritional status than 266,000 people in 936 vulnerable communities in the department of Alta Verapaz. The goal is to improve nutritional status and health of women and children vulnerable to food insecurity in northern Guatemala. PROCOMIDA provides nutritional and health education to empower mothers and other mothers to adopt best practices, including seeking health services. PROCOMIDA works with NGOs and MOH health units to establish community structures organized to improve the provision of culturally and technically appropriate health services. PROCOMIDA has an important research component, which is coordinated with FANTA-2 and IFPRI. It also provides beneficiaries a balanced ration of food that contains corn-soy blend (CSB) rice, beans, vegetable oil and micronutrients either in lipid based or powder form.

The program has two objectives: (1) In 2015, pregnant or nursing women, children under 2 years and children under 5 malnourished in the program area have improved sustainable health and nutrition; (2) In 2015, service providers, community health and municipal level have improved their service quality and delivery.

#### **Purpose of Evaluation:**

Measure the progress of the project in view of the indicators set out in the program proposal and IPTT (Indicator Performance Tracking Table) and assess the scope and compliance of the program's processes, results and impacts as planned in the proposal and operational plans.

#### **Purpose of this consultancy:**

Interpret the results of the evaluation and produce a final narrative report with statistical findings, conclusions and recommendations.

#### **Context**

PROCOMIDA had contracted a local consultant to conduct the midterm evaluation in the municipalities of Cobán, San Pedro Carchá, Cahabon, Lanquin and Senahú in the department of Alta Verapaz, Guatemala. PROCOMIDA aims to improve the nutritional status of 266,000 vulnerable people in 936 communities from the department of Alta Verapaz. The midterm consultancy consisted of data collection, digitization, analysis and reporting of the program

midterm evaluation to evaluate the effectiveness of the processes and strategies implemented through IPTT and other indicators and included the following topics:

- Family composition
- Household diet diversity scale (HDDS, see FANTA website for definitions)
- Hunger Scale (see FANTA website for definitions)
- Knowledge of mothers and health workers (pregnancy, childbirth, postpartum, new-born, children under two years)
- Pre-and postnatal health
- Infant feeding (including exclusive breastfeeding)
- Preventive health (mother and child)
- Morbidity and care seeking
- Housing conditions
- Resilience strategies
- Anthropometry of children under 5 years
- Consumption of Title II donated food and micronutrient supplements
- Coverage of other programs in the area
- Levels of participation in the program
- Access to health services
- Conditions and infrastructure of Convergence Centers and the services provided
- Equipment and supplies available in the Convergence Centers

The sample was calculated from the universe of all active (15,874) and graduated (6,857) beneficiaries of the program within the 269 convergence centers served, as per January 2012. Sample size was defined at 1,000 households and 50 Convergence Centers. The Midterm consultancy report describes the sampling framework.

Two types of surveys were collected:

**Household survey:**

- 1,000 households/families
- Includes anthropometry in boys/girls under five years;
- The household sample was determined in two stages (two-staged cluster sample), first at convergence center level (50, probability proportionate to size sampling) and then at beneficiary families level (20 per cluster, for a total of 1,000 families).

**Community and health services survey:**

- 50 CCs, as were defined in the cluster selection of the household survey
- The study of health services included: interviews to Community Facilitators (FC) in each convergence centers (CC); CC survey; interview with health personnel and a review of the infrastructure (equipment, infrastructure and drugs) of the CC.

The baseline study survey modules were used as a basis for the midterm, reviewed by the consultant and the program. Additional modules were incorporated to measure indicators not included in the baseline. Data collection was conducted in digital form by using Tablets.

After reviewing the report of the data collection midterm consultancy, it was considered necessary to contract a separate consultant to review the data and write a more comprehensive report that could be shared with the donor and other partners.

### **Description of this consultancy**

Based on the midterm results, PROCOMIDA requires the services of a consultant to convert these findings into a well written report in English, and preferably also in Spanish, to be shared with the donor and other actors/partners. The report should contain:

- Verify midterm results, compare with baseline results and midterm targets, as presented in the IPTT. This includes probable explanation of targets not met or exceeded
- Analysis of correlation/dependence between key indicators
- Work with the program staff to produce conclusions and recommendations that are plausible and practical

For the interpretation, the IPTT and SPSS databases will provide all inputs. For each indicator the consultant will analyze statistical relevance with regards to the baseline results. In addition, results will be compared with the midterm targets. A correlation of the following indicators will be analyzed by the consultant:

- Average Household Diet Diversity Score (HDDS, indicator 3) and % Children 6 – 24 months with minimum acceptable dietary diversity (indicator 5)
- Average HDDS (indicator 3) and % mothers demonstration increased nutritional knowledge (indicator 7)
- % Children 6 – 24 months with minimum acceptable dietary diversity (indicator 5) and % mothers demonstration increased nutritional knowledge (indicator 7)
- % children 0 – 6 months exclusively breastfed (indicator 9) and % mothers demonstration increased nutritional knowledge (indicator 7)
- % mothers receiving minimum recommended antenatal care (indicator 14) and % mothers receiving minimum recommended post natal care (indicator 16)

The consultant is asked to propose additional pertinent correlations, identified through a correlation matrix.

Based on midterm findings, analysis and review of earlier reports, the consultant will work with PROCOMIDA TSU staff to draw plausible conclusions and recommendations for PROCOMIDA, with the purpose of improving program implementation to achieve final targets and goals.

The consultant will receive from Mercy Corps Guatemala the following documents as input:

- IPTT with results from mi-term evaluation included
- Draft final report from midterm consultant (in Spanish)
- Table outlines
- Program proposal
- Annual Result Reports for years 2 and 3.
- Cleaned databases in SPSS

- Survey modules in MS Word

Additional information and documents can be provided if needed.

**Deliverables:**

The following deliverables are expected:

- Tables of indicators showing statistical relevance in comparison with baseline
- Tables of indicators comparing midterm results with midterm targets
- Tables showing correlations between key indicators, as defined in these ToR.
- Final report in English describing findings in statistical relevance, results comparison and correlations, as well as conclusions and recommendations
- If possible, translation of the final report to Spanish

**Supervision:**

Direct supervision of all processes will be in charge of the PROCOMIDA Technical Support Unit. Final approval of the report is under responsibility of the PROCOMIDA Chief of Party.

**Timeframe and cost**

The consultancy is expected to finalize between January 10 and 15, 2013 and is hence required to start as soon as possible. The consultant will present a work plan with specific deliverables (see list above) and a total cost. Mercy Corps will cancel the negotiated total cost at reception and approval of the final product.

## Appendix C: List of Sampled Convergence Centers

Convergence Center List ('replacement' CC's are highlighted in grey)

No.	Name of the Convergence Center	Municipality
1	Belén	Cahabón
2	Champerico	Cahabón
3	Julhix	Cahabón
4	San Martin Chinantal	Cahabón
5	Saquihá	Cahabón
6	Chichaic	Cobán
7	Chicuxab	Cobán
8	Chinasayub	Cobán
9	Chirrepec	Cobán
10	Guadalupe	Cobán
11	Las Promesas	Cobán
2	Nuevo Porvenir	Cobán
13	Ostúa	Cobán
14	Plan Nuevo Amanecer	Cobán
15	San José La Colonia	Cobán
16	San Lucas Samox	Cobán
17	San Luis Vista Hermosa	Cobán
18	Sayaxut I	Cobán
19	Semuy I	Cobán
20	Uculá	Cobán
21	Chinama	Lanquín
22	Jobchacob	Lanquín
23	San Javier	Lanquín
24	Candelaria Yalicar	San Pedro Carchá
25	Chaimal	San Pedro Carchá
26	Chicojl	San Pedro Carchá
27	Chiquisis	San Pedro Carchá
28	Chiquixji	San Pedro Carchá
29	Chirreacte	San Pedro Carchá
30	Chitaña Esquipulas	San Pedro Carchá
31	Cipresales	San Pedro Carchá
32	El Rosario	San Pedro Carchá
33	Esperanza Chilatz	San Pedro Carchá
34	Pequicuch	San Pedro Carchá
35	Quiha Esperanza	San Pedro Carchá
36	San Antonio I	San Pedro Carchá
37	San Vicente	San Pedro Carchá
38	San Vicente Chicatal	San Pedro Carchá
39	Secaranilá	San Pedro Carchá
0	Seconon	San Pedro Carchá
41	Semox Setinta	San Pedro Carchá
42	Senimlaha	San Pedro Carchá
43	Sequilá	San Pedro Carchá
44	Sesajal	San Pedro Carchá
45	Sesaquiquib	San Pedro Carchá
46	Tontem	San Pedro Carchá
47	Vista Hermosa Xalihá	San Pedro Carchá

<b>48</b>	Alpes	Senahú
<b>49</b>	La Montañesa	Senahú
<b>50</b>	Los Naranjales	Senahú
<b>51</b>	San Antonio Semarac	Senahú
<b>52</b>	San Francisco I	Senahú
<b>53</b>	Secuachil	Senahú
<b>54</b>	Sepamac	Senahú
<b>55</b>	Seritquiche	Senahú
<b>56</b>	Seyuc Tuila	Senahú



<b>ECOM12</b>	12. THIS name		
<b>ECOM12 A</b>	12.a. Charge	1 = Community Facilitator 2 = Health Guardian 3 = Midwife 4 = institutional Facilitator 5 = Educator 6 = Itinerant NURse / Itinerant Doctor 7 = Other (specify)	<input type="checkbox"/>
<b>CARGO</b>		Conditional (jump other)	
<b>ECOM12B</b>	12b. Specify other charges		
<b>ECOM 13</b>	13. THIS name		
<b>ECOM 13A</b>	13.a. Charge	1 = CF 2 = HG 3 = Midwife 4 = institutional Facilitator 5 = Educator 6 = IN/ ID 7 = Other (specify)	<input type="checkbox"/>
---		Conditional (jump other)	
<b>ECOM 13B</b>	13b. Specify other charges		
<b>ECOM 14</b>	14. THIS name		
<b>ECOM 14A</b>	14.a. Charge	1 = CF 2 = HG 3 = Midwife 4 = institutional Facilitator 5 = Educator 6 = Intinerant Nurse / Itinerant Doctor 7 = Other (specify)	
---		Conditional (jump other)	
<b>ECOM 14B</b>	14b. Specify other charges		
<b>SECTION 2</b>		Link next section n	
<b>VARIABLES</b>	<b>QUESTIONS</b>	<b>CODES</b>	<b>ANSWER</b>
<b>NAME</b>			
SecciÃ³n 2. Health infrastructure of the town			
<b>ECOMS201A</b>	2.1.A Is there a private practice in the town?	1 = 2 = NO	<input type="checkbox"/>   <input type="checkbox"/>

		88 = Do not know 99 = No answer	
<b>CARGO1</b>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS201B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS201C	
<b>ECOMS201 B</b>	2.1.B private practice quantity 88 = NS, 99 = NR	amount 88 = Do not know 99 = No answer	<input type="text"/>
<b>CARGO10</b>	<b>JUMP</b>	<input type="checkbox"/> ECOMS202A	
<b>ECOMS201C</b>	2.1.C A Distance in km is the most s private practice nearby	km 88 = Do not know 99 = No answer	<input type="text"/>
<b>ECOMS201D</b>	2.1.d. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	time in 24-h format 8888 = Do not know 9999 = No answer	<input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>
<b>ECOMs 202A</b>	2.2. A. Is there a local Midwife or Health Assistant?	1 = YES 2 = NO 88 = Do not know 99 = No answer	<input type="text"/>   <input type="text"/>
<b>Charge2</b>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS202B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS202C	
<b>ECOMs 202B</b>	2.2.B Number of Midwife or Health Assistant 88 = NS, 99 = NR	amount 88 = Do not know 99 = No answer	<input type="text"/>
<b>CARGO1 1</b>	<b>SALTO</b>	<input type="checkbox"/> ECOMS203A	
<b>ECOMS202C</b>	2.2.C Distance in km is the Assistant Health Midwife or more nearby	km 88 = Do not know 99 = No answer	<input type="text"/>
<b>ECOMS202D</b>	2.2.D. How much takes in public transportation - -- Time? (8888 = NS; 9999 = NR)	Time in 24-h format 8888 = Do not know 9999 = No answer	<input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>
<b>ECOMs 203A</b>	2.3. A Is there a healer or other traditional practitioner?	1 = YES 2 = NO 88 = Do not know 99 = No answer	<input type="text"/>   <input type="text"/>
<b>CARGO3</b>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS203B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS203C	
<b>ECOMs 203B</b>	2.3.B Healer quantity, or other traditional practitioner 88 = NS, 99 = NR	amount 88 = Do not know 99 = No answer	<input type="text"/>
<b>CARGO12</b>	<b>SALTO</b>	<input type="checkbox"/> ECOMS204A	
<b>ECOMS203C</b>	2.3.C Distance in km to healer or other traditional practitioner nearby	km 88 = Do not know 99 = No answer	<input type="text"/>
<b>ECOMS203D</b>	2.3.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 =	time in 24-h format 8888 = Do not	<input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>

	NR)	know 9999 = No answer	
<b>ECOMs 204A</b>	2.4. A. There is a pharmacy in the town to be addressed?	1 = YES 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<i>Count 4</i>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS204B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS204C	
<b>ECOMs 204B</b>	2.4.B. Quantity of pharmacy 88 = NS, 99 = NR	Quantity 88 = Do not know 99 = No answer	[ ]
<i>CARGO1 3</i>	<b>JUMP</b>	<input type="checkbox"/> ECOMS205A	
<b>ECOMS204C</b>	2.4.C. Distance in km to the pharmacy?	km 88 = Do not know 99 = No answer	[ ]
<b>ECOMS204D</b>	2.4.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	time in 24-h format 8888 = Do not know 9999 = No answer	[ ]   [ ]   [ ]   [ ]
<b>ECOMs 205A</b>	2.5. A. There is a Dispensary locally?	1 = YES 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<i>Count 5</i>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS205B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS205C	
<b>ECOMs 205B</b>	2.5.b Number of Dispensary 88 = NS, 99 = NR	Quantity 88 = Do not know 99 = No answer	[ ]
<i>CARGO1 4</i>	<b>JUMP</b>	<input type="checkbox"/> ECOMS206A	
<b>ECOMS205C</b>	2.5.C. Distance in km to Dispensary	km 88 = Do not know 99 = No answer	[ ]
<b>ECOMS205D</b>	2.5.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	time in 24-h format 8888 = Do not know 9999 = No answer	[ ]   [ ]   [ ]   [ ]
<b>ECOMs 206A</b>	2.6. A. Exists in the village health center?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<i>Count 6</i>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS206B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS206C	
<b>ECOMs 206B</b>	2.6.b Number of Health Center 88 = NS, 99 = NR	amount 88 = Do not know 99 = No answer	[ ]
<i>CARGO1 5</i>	<b>SALTO</b>	<input type="checkbox"/> ECOMS207A	
<b>ECOMS206C</b>	2.6.C. Distance in Km to health center	km 88 = Do not know	[ ]

		99 = No answer	
<b>ECOMS206D</b>	2.6.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	time in 24-h format 8888 = Do not know 9999 = No answer	<input type="text"/>   <input type="text"/>   <input type="text"/>
<b>ECOMs 207A</b>	2.7. A exists in the village health post?	1 = 2 = NO 88 = Do not know 99 = No answer	<input type="text"/>   <input type="text"/>
<b>CARGO 7</b>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS207B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS207C	
<b>ECOMs 207B</b>	2.7.B Number of Health post 88 = NS, 99 = NR	Quantity 88 = Do not know 99 = No answer	<input type="text"/>
<b>CARGO1 6</b>	<b>JUMP</b>	<input type="checkbox"/> ECOMS208A	
<b>ECOMS207C</b>	2.7.C. Distance in km to health post	km 88 = Do not know 99 = No answer	<input type="text"/>
<b>ECOMS207D</b>	2.7.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	time in 24-h format 8888 = Do not know 9999 = No answer	<input type="text"/>   <input type="text"/>   <input type="text"/>
<b>ECOMs 208A</b>	2.8. A. Exist a public hospital in the town?	1 = YES 2 = NO 88 = Do not know 99 = No answer	<input type="text"/>   <input type="text"/>
<b>CARGO 8</b>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS208B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS208C	
<b>ECOMs 208B</b>	2.8.b Number of public hospital 88 = NS, 99 = NR	Quantity 88 = Do not know 99 = No answer	<input type="text"/>
<b>CARGO1 7</b>	<b>JUMP</b>	<input type="checkbox"/> ECOMS209A	
<b>ECOMS208C</b>	2.8.C. Distance in km to public hospital	km 88 = Do not know 99 = No answer	<input type="text"/>
<b>ECOMS208D</b>	2.8.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	Time in 24-h format 8888 = Do not know 9999 = No answer	<input type="text"/>   <input type="text"/>   <input type="text"/>
<b>ECOMs 209A</b>	2.9. I there other health service locally?	1 = YES 2 = NO 88 = Do not know 99 = No answer	<input type="text"/>   <input type="text"/>
<b>Count 9</b>	<b>JUMP: response</b>	1 = yes <input type="checkbox"/> <input type="checkbox"/> ECOMS209B 2 = No <input type="checkbox"/> <input type="checkbox"/> ECOMS209C	
<b>ECOM209Aesp</b>	Other health service 2.9A (Specify)		
<b>ECOMs 209B</b>	2.9.b Number of other health service 88 = NS,	Quantity	<input type="text"/>

	99 = NR		88 = Do not know 99 = No answer
<b>CARGO18</b>	<b>JUMP</b>		<input type="checkbox"/> <b>SECTION 3</b>
<b>ECOMS209C</b>	2.9.C. Distance in km's another health service s more close	km	<input type="checkbox"/> 88 = Do not know 99 = No answer
<b>ECOMS209D</b>	2.9.D. How much time takes in public transportation --- Time? (8888 = NS; 9999 = NR)	Time in 24-h format	<input type="checkbox"/>   <input type="checkbox"/>   <input type="checkbox"/> 8888 = Do not know 9999 = No answer
<b>SECTION 3</b>		<a href="#">Link next section n</a>	
VARIABLES NAME	QUESTIONS	CODES	ANSWER
Section 3. Health personnel available in the Community			
<b>ECOMS301A</b>	3.1.A. Number of trained midwives in community (total)		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMS301 B</b>	3.1.B. Number of trained midwives present during the visit		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMS302A</b>	3.1.A. Number of traditional midwives in the community (total)		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMS302B</b>	3.1.B. Number of traditional midwives present during the visit		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMs 303A</b>	3.1.A. Number of community facilitators in the community (total)		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMs 303B</b>	3.1.B. Number of community facilitators present during the visit		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMs 304A</b>	3.1.A. Number of health guardians in the community (total)		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMs 304B</b>	3.1.B. Number of health guardians present during the visit		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOM305</b>	3.5 There are other people working on health issues in the community?		<input type="checkbox"/>   <input type="checkbox"/>
<b>CHARGE 20</b>	<b>JUMP: response</b>	<b>1 = yes</b> <input type="checkbox"/> <b>ECOMS305A.A</b> <b>2 = No</b> <input type="checkbox"/> <b>Section 4</b>	
<b>ECOMS305A.A</b>	CHARGE 3.5.AA		
<b>ECOMS305A.B</b>	Quantity 3.5.AB		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMS305B.A</b>	3.5. BA CHARGE		
<b>ECOMS305B. B</b>	3.5.b. B. Quantity		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMs 305C.A</b>	3.5.c. A. CHARGE		
<b>ECOMS305C. B</b>	3.5.c. B. Quantity		<input type="checkbox"/>   <input type="checkbox"/>
<b>ECOMs 305D.A</b>	3.5.D. A. CHARGE		
<b>ECOMS305D. B</b>	3.5.D. B. Quantity		<input type="checkbox"/>   <input type="checkbox"/>
<b>SECTION 4</b>		<a href="#">Link next section n</a>	
VARIABLES NAME	QUESTIONS	CODES	ANSWER
Section 4. Community Participation			
<b>ECOMS401</b>	4.1.Is there a health committee /	1 = YES	<input type="checkbox"/>   <input type="checkbox"/>

	commission of health in the community?	2 = NO 88 = Do not know 99 = No answer	
<b>ECOMS401 A</b>	4.1.A. How many members in the health commission --- 88 = NS, 99 = NR	Number 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401B</b>	4.1.B. Is in operation?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
-----	4.1.C. ¿What are the functions of them?		TEXT
<b>I ECOMS401C</b>	4.1.Ci. Ensure the health of the residents and make health promotion and education	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>li ECOMS401C</b>	4.1.C.ii. To ensure a healthy environment?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Ciii</b>	4.1.C.iii. Proper handling of garbage?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Civ</b>	4.1.C.iv. Supervise the proper use of health projects and environment?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cv</b>	4.1.Cv Ensure a healthy school?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cvi</b>	4.1.C.vi. Having a community emergency plan?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cvii</b>	4.1.C.vii. Report on the health of the community?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cviii</b>	4.1.C.viii. Managing health projects?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cix</b>	4.1.C.ix. Identify where to go in an emergency?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cx</b>	4.1.Cx Manage resources to authorities?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS401Cxi</b>	4.1.C.xi. Collaborate in the Organization of the community?	1 = yes 2 = NO	[ ]   [ ]

		88 = Do not know 99 = No answer	
<b>41Cxii</b>	4.1.C.xii. Other? Specify		
<b>ECOMS402</b>	4.2. The community has a health community plan?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>CARGO19</b>	<b>JUMP: response</b>	<b>1 = yes</b> [ ] [ ] <b>ECOMS402A</b> <b>2, 88.99 = NO</b> [ ] [ ] <b>RECORD ---- its information passing knowledge survey.</b>	
<b>ECOMS402A</b>	4.2.A. The health commission is providing Community Emergency plans?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]
<b>ECOMS402B</b>	4.2.B. Health commission has established links do with the health service more s nearby?	1 = yes 2 = NO 88 = Do not know 99 = No answer	[ ]   [ ]

Convergence Center Surveys

#	QUESTION	RESPONSE CODES
<b>CODCC</b>	<i>Convergence Center Code</i>	[ ][ ][ ][ ][ ]
<b>CCMI01</b>	1. # OF SURVEY	[ ][ ][ ][ ][ ][ ][ ]
<b>CCMI02</b>	2. SUPERVISOR CODE	[ ][ ]
<b>CCMI03</b>	3. EDITOR CODE	[ ][ ]
<b>CCMI04</b>	4. INTERVIEWER CODE	[ ][ ]
<b>CCMI05</b>	5. CC municipality location	[ ][ ][ ][ ][ ][ ]
<b>CCMI06</b>	6. CC community location	[ ][ ][ ][ ][ ][ ][ ][ ][ ]
<b>CCMI07</b>	7. CC NGO responsible for?	[ ][ ]
<b>CCMI08</b>	8. CC jurisdiction location	[ ][ ][ ]
<b>Interview information</b>		
	<b>VISIT NUMBER</b>	A. 1st                      B. 2nd                      C. 3rd
<b>CC MI09</b>	9. DATE OF INTERVIEW	[ ][ ][ ][ ][ ]                      [ ][ ][ ][ ][ ]                      [ ][ ][ ][ ][ ] month day                      month day                      month day
<b>CC MI10</b>	10. START TIME OF THE VISIT (24 hour format)	[ : ]                      [ : ]                      [ : ] Hour Min                      Hour Min                      Hour Min
<b>CC MI11</b>	11. The survey was carried out at the same day that the CC is open for medical assistance?	1 = Yes 2 = No                      [ ]
<b>CC MI12</b>	12. Where the survey was done?	1 = CC, 2 = CF House, 3 = HG House, 4 = Other place                      [ ]
<b>CC MI13</b>	13. INTERVIEWER INTRODUCE IT SELF AND ASK FOR ACCEPTANCE TO ASK RHE QUESTIONS	1 = Accepts answer questions----- <b>NEXT QUESTION</b> 2 = Not accept answer questions (interviewee <u>not</u> want to answer the questions). You <u>cannot</u> continue the interview in this case, talk to your supervisor.                      [ ]
<b>SECTION 1</b>		
<b>QUESTION CODE</b>	<b>QUESTIONS</b>	<b>CODES</b> <b>ANSWER</b>
<b>CCS101</b>	1. Name of Informant, <b>- Must be Community Facilitator –CF-</b>	
<b>CCS102</b>	2. ¿What other people is present in the survey?	
<b>CCS102A</b>	2a) Record name	
<b>CCS102B</b>	2b) Record Charge	1 = Community Facilitator 2 = Ambulatory Nurse 3 = Ambulatory Doctor 4 = institutional Facilitator 5 = Midwife 6 = Other ---- <b>2b1</b> [ ]
<b>CCS102B1</b>	2b.1) Other specify	
<b>CCS102C</b>	2c) Record Name	

<b>CCS102D</b>	2d) Record charge	1 = Community Facilitator 2 = Ambulatory Nurse 3 = Ambulatory Doctor 4 = institutional Facilitator 5 = Midwife 6 = Other ----- <b>2d1</b>	<input type="checkbox"/>
<b>CCS102D1</b>	2d.1) other Specify		
<b>CCS102E</b>	2e) Record Name		
<b>CCS102F</b>	2f) Record charge	1 = Community Facilitator 2 = Ambulatory Nurse 3 = Ambulatory Doctor 4 = institutional Facilitator 5 = Midwife 6 = Other ----- <b>2f1</b>	<input type="checkbox"/>
<b>CCS102F1</b>	2f.1) other Specify		

### SECTION 2

**Now I'd like to ask some questions related as people working here and the services they offer.**

**Table 1. Personnel serving in the Convergence Center**

QUESTION CODE	QUESTIONS	CODES	ANSWER
<b>CCS201</b>	1. Does the convergence center have an ambulatory doctor?	1 = Yes 2 = Yes, and is present 3 = No <input type="checkbox"/> <input type="checkbox"/> <b>3</b>	<input type="checkbox"/>
<b>CCS202</b>	2. What is the name of?		
<b>CCS203</b>	3. Does the convergence center have an ambulatory nurse?	1 = Yes 2 = Yes, and it is present 3 = No <input type="checkbox"/> <b>5</b>	<input type="checkbox"/>
<b>CCS204</b>	4. What is the name of?		
<b>CCS205</b>	5. Does the convergence center have an institutional facilitator?	1 = Yes 2 = Yes, and it is present 3 = No	<input type="checkbox"/>
<b>CCS206</b>	6. Does the convergence center have technicians?	1 = Yes 2 = Yes, and this present 3 = No <input type="checkbox"/> <input type="checkbox"/> <b>8</b>	<input type="checkbox"/>
<b>CCS207</b>	7. How many technicians have?		<input type="text"/> <input type="text"/>
QUESTION CODE	QUESTIONS	NUMBER (TOTAL)	Number (present during the visit)
<b>CCS208</b>	8. How many educators have the convergence center?	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<b>CCS209</b>	9. How many trained midwives have the convergence center?	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<b>CCS210</b>	10. How many traditional midwives have the convergence center?	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<b>CCS211</b>	11. How many community facilitators have the convergence center?	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<b>CCS212</b>	12. How many Health Guardians have convergence center?	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>
<b>CCS213</b>	13. Do you have a commission of health at the center of convergence?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>15</b>	<input type="checkbox"/>

<b>CCS214</b>	14. Record how many members at the health commissions	<input type="text"/>   <input type="text"/>	<input type="text"/>   <input type="text"/>
<b>CCS215</b>	15. Are there other people who work in the center of convergence?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>Table 2</b>	<input type="text"/>
<b>QUESTION CODE</b>	<b>CHARGE</b>	<b>NUMBER (TOTAL)</b>	<b>Number (present during the visit)</b>
<b>CCS215A</b>	15a.	<input type="text"/>   <input type="text"/>	<input type="text"/>   <input type="text"/>
<b>CCS215B</b>	15b.	<input type="text"/>   <input type="text"/>	<input type="text"/>   <input type="text"/>
<b>CCS215C</b>	15c.	<input type="text"/>   <input type="text"/>	<input type="text"/>   <input type="text"/>
<b>CCS215D</b>	15d.	<input type="text"/>   <input type="text"/>	<input type="text"/>   <input type="text"/>
<b>CCS215E</b>	15e.	<input type="text"/>   <input type="text"/>	<input type="text"/>   <input type="text"/>
<b>Section 3</b>			
<b>Ask the community facilitator that this information is to complete the following questions (note):</b>			
<b>Table 2 Equipment available in the Convergence Center</b>			
<b>The CC have the following equipment and materials:</b>			
<b>QUESTION CODE</b>	<b>QUESTIONS</b>	<b>CODES</b>	<b>ANSWER</b>
<b>CCS301</b>	1. Is there a person in charge of measuring the <b>weight</b> of children?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>4</b>	<input type="text"/>
<b>CCS302</b>	2. Record Name		
<b>CCS303</b>	3. Record charge	1 = Community Facilitator 2 = Educator 3 = Ambulatory Nurse 4 = Ambulatory Doctor 5 = Institutional Facilitator 6 = Other (ESP) <input type="checkbox"/> <input type="checkbox"/> <b>3A</b>	<input type="text"/>
<b>CCS303A</b>	3A. Specify other		
<b>CCS304</b>	4. Is there a person in charge of measuring the <b>size</b> of children?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>7</b>	<input type="text"/>
<b>CCS305</b>	5. Record Name		
<b>CCS306</b>	6. Record charge	1 = Community Facilitator 2 = Educator 3 = Ambulatory Nurse 4 = Ambulatory Doctor 5 = Institutional Facilitator 6 = Other (ESP) <input type="checkbox"/> <input type="checkbox"/> <b>6A</b>	<input type="text"/>
<b>CCS306A</b>	6A. Specify other		
<b>CCS307</b>	7. How many floor scales are used for weighing adults? <b>IF NO RECORD 0 and move to the P9.</b>	Record the # of units	<input type="text"/>
<b>CCS30 7A</b>	7A. It was observed	1 = Yes 2 = yes (BHT bring in to) 3 = No <b>SKIP TO Q9</b> 4 = not (BHT bring in to) <b>SKIP TO Q9</b>	<input type="text"/>
	8. Observe the status of each (evaluate up to four units )		
<b>CCS3081</b>	Unit 1	G = Good F = Fair C = Poor	<input type="text"/>
<b>CCS3082</b>	Unit 2	G = Good F = Fair C =	<input type="text"/>

		Poor	
CCS3083	Unit 3	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3084	Unit 4	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS309	9. How many hanging scales are used to weigh children? <b>IF NO RECORD 0 and move to the Q11.</b>	Record the # of units	<input type="checkbox"/>
CCS309A	9A. It was observed	1 = Yes 2 = yes (BHT bring in to) 3 = <b>No</b> Go to <b>Q12</b> 4 = not (BHT bring in to) <b>SKIP TO Q12</b>	<input type="checkbox"/>
	10. Note the status of each (evaluate up to four units) <b>GO TO P12</b>		
CCS3101	Unit 1	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3102	Unit 2	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3103	Unit 3	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3104	Unit 4	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS311	11. If there is no weighing scale for children, Do you weigh with mother's weighing scale?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
CCS312	12. How many special scales for new born are there? (Show PHOTO) <b>IF NO RECORD 0 and move to the Q14.</b>	Record the # of units	<input type="checkbox"/>
CCS312A	12A. It was observed	1 = Yes 2 = yes (BHT bring in to) 3 = <b>No</b> Go to <b>Q14</b> 4 = not (BHT bring in to) <b>SKIP TO Q14</b>	<input type="checkbox"/>
	13. Observe the status of each (evaluate up to four units ) G works, in good condition, F: It works but is in disrepair. C: It does not work, bad.		
CCS3131	Unit 1	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3132	Unit 2	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3133	Unit 3	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS3134	Unit 4	G = Good F = Fair C = Poor	<input type="checkbox"/>
CCS314	14. How many height board (fixed) are used to measure adults? <b>IF NO RECORD 0 and move to the Q16.</b>	Record # of units	<input type="checkbox"/>
CCS314A	14A. It was observed	1 = Yes 2 = If (run the EBS) 3 = <b>No</b> Go to <b>Q16</b> 4 = not (BHT bring in to) <b>GO TO Q16</b>	<input type="checkbox"/>
	15. Observe the status of each (evaluate up to four units)		
CCS3151	Unit 1	G = Good F = Fair C =	<input type="checkbox"/>

		Poor	
<b>CCS3152</b>	Unit 2	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS3153</b>	Unit 3	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS3154</b>	Unit 4	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS316</b>	16. How many Portable height boards are used to measure children lying and standing? <b>IF NO RECORD 0 and move to the Q18.</b>	Record # of units	<input type="checkbox"/>
<b>CCS316A</b>	16A. It was observed	1 = Yes 2 = If (BHT bring in to) 3 = <b>No</b> Go <b>to Q18</b> 4 = not (BHT bring in to) <b>GO TO Q18</b>	<input type="checkbox"/>
	17. Observe the status of each (evaluate up to four units)		
<b>CCS3171</b>	Unit 1	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS3172</b>	Unit 2	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS3173</b>	Unit 3	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS3174</b>	Unit 4	G = Good F = Fair C = Poor	<input type="checkbox"/>
<b>CCS318</b>	18. How many tailor meters usable are there? <b>IF NO RECORD 0 AND GO TO Q 20</b>	Record # of units	<input type="checkbox"/>
<b>CCS319</b>	19. For what use these meters?		
<b>CCS319 01</b>	19.1. Measure size of baby	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS319 02</b>	19.2. Measure uterine height of pregnant mothers	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS319 03</b>	19.3. Measure arm circumference of children	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS319 04</b>	19.4. Other (specify)	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS320</b>	20. Is there blood pressure monitor? <b>Show PHOTO</b> <b>IF NO RECORD 0</b>	Record # of units	<input type="checkbox"/>
<b>CCS321</b>	21. How many Thermometers are there? <b>IF NO RECORD 0</b>	Record # of units	<input type="checkbox"/>
<b>CCS322</b>	22. How many stethoscopes are there? <b>IF NO RECORD 0</b>	Record # of units	<input type="checkbox"/>
<b>CCS323</b>	23. How many laryngoscopes, to examine the ears, nose and throat? <b>SHOW PHOTO IF NO RECORD 0</b>	Record # of units	<input type="checkbox"/>
<b>CCS324</b>	24. How many brachial tapes (Shakir) are there? <b>Show IF NO RECORD 0</b>	Record # of units	<input type="checkbox"/>
<b>CCS325</b>	25 Is there a clean delivery kit (in good condition) like this? ( <b>Show PHOTO or KIT</b> )	1. yes 2. No 8. Do not know	<input type="checkbox"/>
	26. What does midwife use to cut the umbilical cord during labor? <b>NOTE ALL THE ANSWERS.</b> <b>Check the boxes of the answers.</b> <b>DO NOT READ OPTIONS.</b>		

IF a midwife is present, verify response.			
How to codes: 1 = Yes 2 = No mentions 8 = Do not know			
<b>CCS3 2601</b>	1 = new razor blade, without boiling	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2602</b>	2 = new razor blade and boiled	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2603</b>	3 = Razor blade used, without boiling	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2604</b>	4 = Razor blade used and boiled	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2605</b>	5 = new Scissors	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2606</b>	6 = new and boiled Scissors	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2607</b>	7 = Scissors used	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2608</b>	8 = Scissors used and boiled	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2609</b>	9 = Knife	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2610</b>	10 = reed	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2611</b>	11 = unboiled scalpel	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2612</b>	12 = boiled scalpel	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2697</b>	97 = Other (especify)	1 = Yes ---26A 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 2698</b>	98 = Do not know / no answer	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>26A CCS3</b>	26A. Specify other		
<b>CCS327</b>	27. Do you have a register to control the delivery of medicine? ASK IF YOU CAN SEE.	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = If in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS328</b>	28. Is there a person in charge of registering the distribution of micronutrients?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> 30 8 = Do not know <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 30	<input type="checkbox"/>
<b>CCS329</b>	29. Do you know who is it?	1 = IF 2 = AN/AD 3 = CF 4 = Educator 5 = Other (specify) --- 29A	<input type="checkbox"/>
<b>CCS329A</b>	29A. Specify other		
<b>CCS330</b>	30. Is there a person in charge of registering the distribution of the vaccines?	1 = Yes 2 = No -----32 8 = Do not know <input type="checkbox"/> <input type="checkbox"/> 32	<input type="checkbox"/>

<b>CCS331</b>	31. Do you know who is it?	1 = IF 2 = AN/AD 3 = CF 4 = Educator 5 = Other (specify ) --- <b>31A</b>	<input type="checkbox"/>
<b>CCS331A</b>	31A. Specify other		
	32. ¿What vaccines are available on the day of consultation with BHT? <b>NOTE ALL THE ANSWERS. Check the boxes of the answers.</b> <b>READ NO OPTIONS</b>		
<b>CCS3 321</b>	1. BCG	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS3 322</b>	2. Polio	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS3 323</b>	3. Penta	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS3 324</b>	4. DPT	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS3 325</b>	5. Viral or 3 SPR	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS3 326</b>	6. TDA	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS3 33</b>	33. Do you have disposable syringes for vaccination? (On the day of vaccination)	1 = Yes <input type="checkbox"/> <input type="checkbox"/> <b>35</b> 2 = No	<input type="checkbox"/>
<b>CCS3 34</b>	34. How do you to apply vaccines then?	_____ response, record _____	
<b>CCS3 35</b>	35. Is there a record of doses and vaccines coverage (shots)? <b>ASK IF YOU CAN SEE.</b>	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 36</b>	36. Is there a record of doses and micronutrient coverage? <b>ASK IF YOU CAN SEE.</b>	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 37</b>	37. Does the record of entries and outputs of micronutrients accessible? <b>ASK IF YOU CAN SEE.</b>	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know 1 = Yes, it loads the FC 2 = Yes, it loads the FC, unverified 3 = Yes, it loads the EBS 4 = If it loads the EBS, unverified	<input type="checkbox"/>

		5 = No 8 = Do not know	
<b>CCS3 38</b>	38. Is there a record of doses applied and micronutrient coverage? <b>ASK IF YOU CAN SEE.</b>	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 39</b>	39. Is there a record of growth monitoring at convergence center level? (Ex CF notebook) <b>ASK IF YOU CAN SEE.</b>	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 40</b>	40. Are there vaccination card, new, unused?	1 = yes 2 = No 3 = in charge of BHT 8 = Do not know	<input type="checkbox"/>
<b>CCS3 41</b>	41. Are there record forms for pregnant women, new unused?	1 = yes 2 = No 3 = in charge of BHT 8 = Do not know	<input type="checkbox"/>
<b>CCS3 42</b>	42. Are there record forms of IMCI / AINM-C, new unused?	1 = yes 2 = No 3 = in charge of BHT 8 = Do not know	<input type="checkbox"/>
<b>CCS3 43</b>	43. Are there record forms for children, new unused?	1 = yes 2 = No 3 = in charge of BHT 8 = Do not know	<input type="checkbox"/>
	44. Do you have promotional posters? <b>RECORD THOSE</b>		
<b>CCS3 441</b>	1. Exclusive breastfeeding	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 442</b>	2. Pregnancy warning signals (symptoms)	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 443</b>	3. New born warning signals (symptoms)	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No	<input type="checkbox"/>

		8 = Do not know	
<b>CCS3 444</b>	4. Warning signs of under 5 years childhood illness	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 445</b>	5. Vaccination	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 446</b>	6. Vitacereal	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS3 447</b>	7. Other	1 = Yes, remain in the CC 2 = Yes, in charge of BHT 3 = No 8 = Do not know	<input type="checkbox"/>
<b>44A CCS3</b>	44A. Specify other		

#### Section 4

**Are there at convergence center (these conditions are related with time of visit) some of these medicines and materials?**

**Always request to view**

**If consultation day, always request to view, but taking into account that should not interfere with services provision, or with AN / AD activities.**

**Table 3 Convergence Center Inventory of medicines**

QUESTION CODE	QUESTIONS	CODES	ANSWER
<b>CCS 401</b>	1. Is there soap: Liquid or bar?	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 402</b>	2. Is there disinfectants to clean wounds?	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 403</b>	3. Do you have clean water (use cleaning patients,	1 = Yes, in charge of CF	<input type="checkbox"/>

	such as wounds, taking medications, etc.)?	2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	
<b>CCS 404</b>	4. ORS sachets	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 405</b>	5. Amoxicillin or ampicillin: pills , capsules, syrup	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 406</b>	6. trimethoprim-sulfamethoxazole: pills , capsules, syrup	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 407</b>	7. Ophthalmic Antibiotic: Dropper 15 ml	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 408</b>	8. Penicillin (procaine, benzathine)	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know 3 = Yes, in charge of BHT	<input type="checkbox"/>
<b>CCS 409</b>	9. Erythromycin	1 = Yes, it loads the FC	<input type="checkbox"/>

		<p>2 = Yes, it loads the FC, unverified</p> <p>3 = Yes, it loads the EBS</p> <p>4 = If it loads the EBS, unverified</p> <p>5 = No</p> <p>8 = Do not know</p>	
<b>CCS 410</b>	10. Azithromycin	<p>1 = Yes, in charge of CF</p> <p>2 = Yes, in charge of CF, unverified</p> <p>3 = Yes, in charge of BHT</p> <p>4 = Yes, in charge of BHT, unverified</p> <p>5 = No</p> <p>8 = Do not know</p>	<input type="checkbox"/>
<b>CCS 411</b>	11. Malaria tablets recommended (Chloroquine or Primaquine)	<p>1 = Yes, in charge of CF</p> <p>2 = Yes, in charge of CF, unverified</p> <p>3 = Yes, in charge of BHT</p> <p>4 = Yes, in charge of BHT, unverified</p> <p>5 = No</p> <p>8 = Do not know</p>	<input type="checkbox"/>
<b>CCS 412</b>	12. albendazole / mebendazole / piperazine: pills, syrup	<p>1 = Yes, in charge of CF</p> <p>2 = Yes, in charge of CF, unverified</p> <p>3 = Yes, in charge of BHT</p> <p>4 = Yes, in charge of BHT, unverified</p> <p>5 = No</p> <p>8 = Do not know</p>	<input type="checkbox"/>
<b>CCS 413</b>	13. Paracetamol / aspirin // Ibuprofen / diclofenac: pills, syrup	<p>1 = Yes, in charge of CF</p> <p>2 = Yes, in charge of CF, unverified</p> <p>3 = Yes, in charge of BHT</p> <p>4 = Yes, in charge of BHT, unverified</p> <p>5 = No</p> <p>8 = Do not know</p>	<input type="checkbox"/>
<b>CCS 414</b>	14. Vitamin A	<p>1 = Yes, in charge of CF</p> <p>2 = Yes, in charge of CF, unverified</p> <p>3 = Yes, in charge of BHT</p> <p>4 = Yes, in charge of BHT, unverified</p> <p>5 = No</p> <p>8 = Do not know</p>	<input type="checkbox"/>
<b>CCS 415</b>	15. Iron / Ferrous Sulfate: pills, syrup	<p>1 = Yes, in charge of CF</p> <p>2 = Yes, in charge of</p>	<input type="checkbox"/>

		CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	
<b>CCS 416</b>	16. Folic acid: pills	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 417</b>	17. prenatal supplements	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 418</b>	18. Zinc pills	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 419</b>	19. Chispitas nutritional	1 = Yes, in charge of CF 2 = Yes, in charge of CF, unverified 3 = Yes, in charge of BHT 4 = Yes, in charge of BHT, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 420</b>	20. Benzoate Bencillo solution	bottles	<input type="checkbox"/>
<b>CCS 421</b>	21. Epinephrine	1 = Yes, it loads the FC 2 = Yes, it loads the FC, unverified 3 = Yes, it loads the EBS 4 = If it loads the EBS, unverified 5 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS 422</b>	22. Metronidazole tablets or syrup	solution	<input type="checkbox"/>
<b>CCS 423</b>	23. Feature IVs (for cases of severe dehydration).	1 = Yes, it loads the FC	<input type="checkbox"/>

		2 = Yes, it loads the FC, unverified 3 = Yes, it loads the EBS 4 = If it loads the EBS, unverified 5 = No 8 = Do not know	
<b>CCS 424</b>	24. Are there vaccines at CC? (If the BHT handles vaccines, mark <b>NO</b> )	1 = YES <input type="checkbox"/> <input type="checkbox"/> <b>25</b> 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>30</b> 8 = Do not know <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>30</b>	<input type="checkbox"/>
<b>CCS 425</b>	25. Vaccine BCG	1 = yes 2 = No 3 = yes (unverified) 8 = Do not know	<input type="checkbox"/>
<b>CCS 426</b>	26. Vaccine OPV / Polio	1 = yes 2 = No 3 = yes (unverified) 8 = Do not know	<input type="checkbox"/>
<b>CCS 427</b>	27. Vaccine DPT / Pentavalent	1 = yes 2 = No 3 = yes (unverified) 8 = Do not know	<input type="checkbox"/>
<b>CCS 428</b>	28. Vaccine SPR / 3 viral	1 = yes 2 = No 3 = yes (unverified) 8 = Do not know	<input type="checkbox"/>
<b>CCS 429</b>	29. Vaccine TT	1 = yes 2 = No 3 = yes (unverified) 8 = Do not know	<input type="checkbox"/>
<b>CCS 430</b>	30. other drugs used in women and children under 5 years?	1 = yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>Table 4</b>	<input type="checkbox"/>
<b>CCS 431</b>	31. Specify other		
<b>Section 5</b>			
<b>Table 4 Administration</b>			
<b>(These questions are related with the time of the visit)</b>			
<b>QUESTION CODE</b>	<b>QUESTIONS</b>	<b>CODES</b>	<b>ANSWER</b>
<b>CCS501</b>	1. This month how many days remain opened the CC for consultation with BHT?	1 = one day per month 2 = 2 days per month 3 = 3 days per month 4 = 4 days per month 6 = more than four days per month 7 = Other (specify) - <b>1A</b> 8 = Do not know / cannot remember 9 = No answer	<input type="checkbox"/>
<b>CCS501A</b>	1a. Specify other		
<b>CCS502</b>	2. How many children under 6 months receive medical attention per month with BHT?		<input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/>

<b>CCS503</b>	3. How many children between 6 months and 2 year receive monthly medical attention per month with BHT?		[ ]   [ ]   ] ]
<b>CCS504</b>	4. How many pregnant and lactating women receive monthly medical attention with BHT?		[ ]   [ ]   ] ]
<b>CCS505</b>	5. How many home visits does the BHT per month?	Record number of visits	[ ]
<b>CCS506</b>	6. How many days this month remain opened CC for attention (with the CF)?	1 = Once a month 2 = 2 -4 times a month 3 = 5 - 10 times per month 4 = 10 times per month 6 = always (in the house / HR) 7 =Other---- <b>6A</b> 8 = Do not know / can not remember 9 = No answer	[ ]
<b>CCS506A</b>	6A. Specify other		
<b>CCS507</b>	7. How many home visits does the CF per month?	REcord number of visits	[ ]
<b>CCS508</b>	8. How many children under 6 months receive health services per month with CF?		[ ]   [ ]   ] ]
<b>CCS509</b>	9. How many children between 6 months and 2 year receive health services per month with CF?		[ ]   [ ]   ] ]
<b>CCS510</b>	10. How many pregnant and lactating women receive health services per month with CF?		[ ]   [ ]   ] ]
<b>CCS511</b>	11. Does CC have own transport, to move any emergency?	1. yes 2. No--- <b>P14</b>	[ ]
<b>CCS512</b>	12. Where is located the CC's own transport?	1 = In the parking lot of cc (always) <input type="checkbox"/> <input type="checkbox"/> <b>P15</b> 2 = CF Home 3 = Other (specify) -- <b>12A</b> 8 = Do not know	[ ]
<b>CCS512A</b>	12A. Specify other		
<b>CCS513.</b>	13. What distance of CC is parked?	Distance:	[ ]
<b>CCS513A</b>	13A. Measurement unit: <b>(SKIP TO Q15)</b>	1. Meters 2. Kilometers	[ ]
<b>CCS514</b>	14. In case of not having transportation, What is the distance to the particular nearby vehicle who may carry emergency?	Distance:	[ ]   [ ]   ] ]
<b>CCS514A</b>	14A. Unit of measure:	1. Meters 2. Kilometers	[ ]
<b>CCS515</b>	15. Does the convergence center have an emergency fund for the emergency transportation?	1 = yes 2 = No 8 = Do not know	[ ]
	16. Severe cases, women in emergency situation of pregnancy, childbirth and postpartum. Where does the BHT refer normally?		
<b>CCS516 1</b>	1 = Health Center	1 = Yes 2 = No	[ ]
<b>CCS516 2</b>	2 = Health Post	1 = Yes 2 = No	[ ]
<b>CCS516 3</b>	3 = public hospital	1 = Yes 2 = No	[ ]
<b>CCS516 4</b>	4 = Clinic or private hospital	1 = Yes 2 = No	[ ]
<b>CCS516 5</b>	5 = Clinic of the church	1 = Yes 2 = No	[ ]

<b>CCS516 6</b>	6 = Do not refer	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS516 7</b>	7 = Other, specify	1 = Yes 2 = No ---16A	<input type="checkbox"/>
<b>CCS516 9</b>	9 = Do not know / can not remember	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS516 A</b>	16A. Specify other		
	17. Severe cases, women in emergency situation of pregnancy, childbirth and postpartum. Where does the CF refer normally?		
<b>CCS51 71</b>	1 = Health Center	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 72</b>	2 = Health Post	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 73</b>	3 = public hospital	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 74</b>	4 = Clinic or private hospital	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 75</b>	5 = Clinic of the church	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 76</b>	6 = Do not refer	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 77</b>	7 = Other, specify	1 = Yes----17 A 2 = No	<input type="checkbox"/>
<b>CCS51 79</b>	9 = Do not know / can not remember	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS51 7A</b>	17A. Specify other		
<b>CCS518</b>			<input type="checkbox"/>
<b>CCS519</b>	19. In severe cases, to transport the sick woman. How long it takes the transportation? (Ask this question to more place mentioned in questions 16 and 17)	Amount	<input type="checkbox"/>   <input type="checkbox"/>
<b>CCS519A</b>	19A. Measurement unit	1 = Minutes 2 = hours	<input type="checkbox"/>
	20. Severe cases, emergencies of children. Where the BHT usually referred to?		
<b>201 CCS5</b>	1 = Health Center	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 202</b>	2 = Health Post	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 203</b>	3 = public hospital	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 204</b>	4 = Clinic or private hospital	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 205</b>	5 = Clinic of the church	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 206</b>	6 = Do not refer	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 207</b>	7 = Other, specify	1 = Yes 2 = No ---20A	<input type="checkbox"/>
<b>CCS5 209</b>	9 = Do not know / can not remember	1 = Yes 2 = No	<input type="checkbox"/>
<b>20A CCS5</b>	20A. Specify other		
	<b>21. Severe cases, emergencies of children. Where the CF usually referred to?</b>		
<b>CCS5 211</b>	1 = Health Center	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 212</b>	2 = Health Post	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 213</b>	3 = public hospital	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 214</b>	4 = Clinic or private hospital	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 215</b>	5 = Clinic of the church	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 216</b>	6 = Do not refer	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5 217</b>	7 = Other, specify	1 = yes ---21 A 2 = No	<input type="checkbox"/>
<b>CCS5 219</b>	9 = Do not know / can not remember	1 = Yes 2 = No	<input type="checkbox"/>
<b>21A CCS5</b>	21A. Specify other	1 = Yes 2 = No	
<b>CCS522</b>	22. In 10 cases of severe children referrals, Do you know how many of them parents accept the transfer ?		<input type="checkbox"/>
<b>CCS523</b>	23. In severe cases, to transfer a child. How long it takes the transportation? (Ask this question for more places mentioned in questions 16 and 17)	Amount	<input type="checkbox"/>   <input type="checkbox"/>
<b>CCS523A</b>	23A. Unit of measure:	1 = Minutes 2 = hours	
<b>CCS524</b>	24. Do they wash medical equipment in the center of convergence?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> P27	<input type="checkbox"/>

		3 = do not know <input type="checkbox"/> <input type="checkbox"/> P27	
	25. During washing medical equipment, What protection uses the person in charge? DO NOT READ OPTIONS. Check the boxes MENTIONING		
		How to codes: 1 = It mentioned 2 = Not mentioned	
CCS5251	1 = Service Heavy gloves	1 = Yes 2 = No	<input type="checkbox"/>
CCS5252	2 = thin disposable gloves (surgical)	1 = Yes 2 = No	<input type="checkbox"/>
CCS5253	3 = plastic apron	1 = Yes 2 = No	<input type="checkbox"/>
CCS5257	7 = Other (specify)	1 = yes -- 25 A 2 = No	<input type="checkbox"/>
CCS525A	25A. Specify other		
	What uses the person in charge to wash this : _____? Read the three response options READ OPTIONS Check the boxes MENTIONING		
		How to codes: 1 = It mentioned 2 = Not mentioned	
CCS5261	1 = Running Water	1 = Yes 2 = No	<input type="checkbox"/>
CCS5262	2 = Soap or detergent	1 = Yes 2 = No	<input type="checkbox"/>
CCS5263	3 = Brush	1 = Yes 2 = No	<input type="checkbox"/>
CCS5267	7 = Other (specify)	1 = yes --- 26 A 2 = No	<input type="checkbox"/>
CCS526A	26A. Specify other		
CCS527	27. Where is located the center of convergence?	1 = Building with environments defined 2 = Local inside a building 3 = room inside a house 4 = Other (specify) -- 27 A	<input type="checkbox"/>
CCS527A	27A. Specify other		
CCS528	28. The space allocated to the center of convergence (see previous question) A Is assigned exclusively for that purpose, or shared?	1 = use only for CC (no other activities in ) 2 = Sharing 8 = Do not know	<input type="checkbox"/>
CCS529	29. ¿ Does the CC is within the field / the house / the FC?	1 = yes 2 = No	<input type="checkbox"/>
<b>OBSERVED DURING THE VISIT, NOT ASK QUESTIONS</b>			
CCS530	30. How many bedrooms have CC?		<input type="checkbox"/>   <input type="checkbox"/>
CCS531	31. Does the convergence center have access to a toilet?	1 = yes 2 = No <input type="checkbox"/> P35	<input type="checkbox"/>
CCS532	32. Does the toilet is for the exclusive use of the center of convergence?	1 = Exclusive 2 = Shared 8 = Do not know	<input type="checkbox"/>
CCS533	33. What type of toilet is?	1 = toilet washable 2 = latrine washable 3 = traditional latrine 4 = other, ----33A	<input type="checkbox"/>
CCS533A	33A. Specify other		
CCS534	34. The toilet is working?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
CCS535	35. Lighted and ventilated physical space	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>

	36. The physical space of the front desk service is adequate:		
<b>CCS536 A</b>	1 = no desk / table	1 = Yes 2 = No 3 = Does not exist	<input type="checkbox"/>
<b>CCS536 B</b>	2 = chair	1 = Yes 2 = No 3 = Does not exist	<input type="checkbox"/>
	37. Archive space is suitable		
<b>CCS537 A</b>	1 = no desk / table	1 = Yes 2 = No 3 = Does not exist	<input type="checkbox"/>
<b>CCS537 B</b>	2 = chair	1 = Yes 2 = No 3 = Does not exist	<input type="checkbox"/>
<b>CCS537 C</b>	3 = File	1 = Yes 2 = No 3 = Does not exist	<input type="checkbox"/>
<b>CCS538</b>	38. The area of attention and procedures have furniture equipment in proper condition for use?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS539</b>	39. The Education area for health is adequate	1 = yes 2 = No 3 = Does not exist 8 = Do not know	<input type="checkbox"/>
<b>CCS540</b>	40. Are there disposable gloves? <b>MUST BE IN CC SHOULD NOT BE TAKEN BY CF</b>	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS541</b>	41. Is there cotton?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS542</b>	42. Do you have a refrigerator that works?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS543</b>	43. Do you have thermo and ice for vaccines?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS544</b>	44. Do you have electricity?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS545</b>	45. Do you have kitchen?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS546</b>	46. Do you have gas stove?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS547</b>	47. The convergence center floor is:	1 = brick, ceramic, lozeta, granite 2 = Iron cement / concrete 3 = Earth compacted 4 = Loose Soil 5 = Other (specify) -- <b>47A</b> 8 = Do not know	<input type="checkbox"/>
<b>CCS547A</b>	47A. Specify other		
	48. Is there is running water:		
<b>CCS5481</b>	1. Sinks	1 = yes 2 = No 3 = Does not exist 6 = Not able to observe	<input type="checkbox"/>
<b>CCS5482</b>	2. The sinks / dishwasher	1 = yes 2 = No 3 = Does not exist 6 = Not able to observe	<input type="checkbox"/>
<b>CCS5483</b>	3. Stack (laundry)	1 = yes 2 = No 3 = Does not exist 6 = Not able to observe	<input type="checkbox"/>

<b>CCS5484</b>	4. Discharges from toilets	1 = yes 2 = No 3 = Does not exist 6 = Not able to observe	<input type="checkbox"/>
<b>CCS5485</b>	5. Other (specify)	1 = yes ---48A 2 = No	<input type="checkbox"/>
<b>CCS548A</b>	48A. Specify other		
Do the following areas are free of dust, dirt or contaminated For solid waste?			
<b>CCS54901</b>	1. External area	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54902</b>	2. Admission and Waiting Room	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54903</b>	3. Corridor	1 = yes is clean 2 = Not clean 3 = Does not exist corridor 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54904</b>	4. Clinics / clinic, procedures area	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54905</b>	5. Exam table / stretcher	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54906</b>	6. Pharmacy / drug shelf	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54907</b>	7. Health Services	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54908</b>	8. Kitchen	1 = SA is clean 2 = Not clean 3 = No such Ñ rea 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54909</b>	9. Cleaning kit area	1 = yes is clean 2 = Not clean 3 = Does not exist area 6 = Unable to observe	<input type="checkbox"/>
<b>CCS54910</b>	10. Another area (specify)	1 = yes ---49A 2 = No--- 50	<input type="checkbox"/>
<b>CCS549A</b>	49A. Specify other		
<b>CCS549B</b>	49B. Specify the status of another area	1 = yes is clean	<input type="checkbox"/>

		2 = Not clean 6 = Unable to observe	
	50. How to collect slightly hazardous waste? <b>Do not read options, mark all that apply.</b>		
		How to codes: 1 = it mentioned 2 = Not mentioned	
<b>CCS5501</b>	1. In separate bag or container with different color than normal waste or bio hazardous waste	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5502</b>	2. In separate bag or container, together with the highly hazardous waste	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5503</b>	3. Bag or container in conjunction with regular trash	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS5504</b>	4. Other (specify):	1 = Yes 2 = No --- <b>50A</b>	<input type="checkbox"/>
<b>CCS550A</b>	50A. Specify other		
	51. What used to collect medical highly dangerous waste? <b>MARK ALL THAT APPLY</b> <b>(skip all the items marked with 1)</b>		
<b>CCS5511</b>	1 = plastic bottle	1 = Yes--- <b>P52</b> 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS5512</b>	2 = Carton Box	1 = Yes --- <b>P53</b> 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS5513</b>	3 = closed plastic container with a small hole for disposal syringes with needles	1 = Yes --- <b>P54</b> 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS5514</b>	4 = Guard	1 = Yes --- <b>P55</b> 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS5515</b>	5 = Other (specify)	1 = Yes --- <b>P56</b> 2 = No 8 = Do not know	<input type="checkbox"/>
	52. If Answering "YES" for plastic bottle :		
<b>CCS552A</b>	A. Are there in the following places?		
<b>CCS552A1</b>	1. Area of cures	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS552A2</b>	2. injections and vaccines area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS552A3</b>	3. dry place nearby to procedures area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS552B</b>	B. What is their status?	B = good R = regular M = bad	<input type="checkbox"/>
	53. If Answering "YES" for carton box:		
<b>CCS553A</b>	A. Are there in the following places?		
<b>CCS553A1</b>	1. Area of cures	1 = yes 2 = No	<input type="checkbox"/>

		3 = Not able to observe 4 = Does not exist	
<b>CCS553A2</b>	2. injections and vaccines area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS553A3</b>	3. dry place nearby to procedures area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS553B</b>	B.What is their status?	B = good R = regular M = bad	<input type="checkbox"/>
54. If answering "YES" for plastic container:			
<b>CCS554A</b>	A. Are there in the following places?		
<b>CCS554A1</b>	1. Area of cures	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS554A2</b>	2. injections and vaccines area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS554A3</b>	3. dry place nearby to procedures area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS554B</b>	What is their status?	B = good R = regular M = bad	<input type="checkbox"/>
55. If you answer "YES" for a Guard			
<b>CCS555A</b>	A. Are there in the following places?		
<b>CCS555A1</b>	1. Area of cures	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS555A2</b>	2. injections and vaccines area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS555A3</b>	3. dry place nearby to procedures area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS555B</b>	B. What is their status?	B = good	<input type="checkbox"/>

		R = regular M = bad	
	56. If you answer YES to other		
<b>CCS556X</b>	56X. Specify other		
<b>CCS556A</b>	A. Are there in the following places?		
<b>CCS556A1</b>	1. Area of cures	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS556A2</b>	2. injections and vaccines area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS556A3</b>	3. dry place nearby to procedures area	1 = yes 2 = No 3 = Not able to observe 4 = Does not exist	<input type="checkbox"/>
<b>CCS556B</b>	B. What is your status	B = good R = regular M = bad	<input type="checkbox"/>
<b>CCS557</b>	57. Do you prepare and use Antiseptics for cleaning and sanitizing medical utensils at the center of convergence?	1 = yes 2 = No <input type="checkbox"/> <input type="checkbox"/> P60 3 = not prepared Antiseptics (use alcohol) <input type="checkbox"/> <input type="checkbox"/> P60 8 = do not know <input type="checkbox"/> <input type="checkbox"/> P60	<input type="checkbox"/>
<b>CCS558</b>	58. Antiseptics are prepared in small containers , closed and reusable for everyday	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>CCS559</b>	59. Reusable containers to prepare Antiseptics are washed with soap and water, dried and made prior washing with the solution to use before refill them with the solution n Antiseptic?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>See if the following conditions apply:</b>			
<b>CCS560</b>	60. Are There general waste container with a plastic bag in the areas of reception, waiting and corridors	1. yes 2. No	<input type="checkbox"/>
<b>CCS561</b>	61. The cotton gauze are stored inside special containers	1. yes 2. No	<input type="checkbox"/>
<b>CCS562</b>	62. Auxiliary forceps, thermometers, catheter or other instruments are stored in containers with antiseptic solutions?	1. yes 2. No	<input type="checkbox"/>
<b>CCS563</b>	63. Is there pot autoclave (for sterilizing pot)?	1 = yes 2. No <input type="checkbox"/> Table 5	<input type="checkbox"/>
<b>CCS564</b>	64. What type of autoclave have?	1 = Pot autoclave (with Manometer) 2 = pressure pot 3 = electric Autoclave 4 = Other (specify) --- <b>64A</b>	<input type="checkbox"/>

		8 = Do not know	
<b>CCS564A</b>	64A. Specify other		
	65. Check if the pot autoclave:		
<b>CCS5651</b>	1. It is clean	1 = Yes 2. No 3 = does not exist 6 = Not able to observe 7 = Other, ---1A	<input type="checkbox"/>
<b>CCS5651A</b>	1A. Specify other		
<b>CCS5652</b>	2. Manometer is working	1 = Yes 2. No 3 = does not exist 6 = Not able to observe 7 = Other, ---2A	<input type="checkbox"/>
<b>CCS5652A</b>	2A. Specify other		
<b>CCS5653</b>	3. The electricity source works (if included)	1 = Yes 2. No 3 = does not exist 6 = Not able to observe 7 = Other, ----3A	<input type="checkbox"/>
<b>CCS5653A</b>	3A. Specify other		
<b>CCS5654</b>	4. Autoclaving tape used	1 = Yes 2. No 3 = does not exist 6 = Not able to observe 7 = Other, ----4A	<input type="checkbox"/>
<b>CCS5654A</b>	4A. Specify other		
<b>CCS5655</b>	5. The person responsible, knows how to use properly the autoclave	1 = yes 2. No 3 = Does not exist 6 = Not able to observe 7 = Other, ----5A	<input type="checkbox"/>
<b>CCS5655A</b>	5A. Specify other		
<b>Section 6</b>			
<b>Table 5 Health services provided</b>			
<b>QUESTION CODE</b>	<b>QUESTIONS</b>	<b>CODES</b>	<b>ANSWER</b>
<b>I. Integral Women assistance</b>			
	1. ¿What are the services or care for a woman during her prenatal care in the CC offered by the <b>BHT</b> ? <b>Mention and record 1 = Yes, 2 = No.</b>		
<b>CCS60101</b>	1. Prenatal	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60102</b>	2. Complete physical exam	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60103</b>	3. Weight monitoring	1 = Yes 2 = No	<input type="checkbox"/>

<b>CCS60104</b>	4. Application of TDA scheme	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60105</b>	5. micronutrients: ferrous sulfate tablets, folic acid	1 = Yes 2 = No	<input type="checkbox"/>
	¿What are the services or care for a woman during her prenatal care in the CC for the <b>CF?</b> <b>Inquire (not to mention).</b> <b>Record: 1 = mentioned 2 = not mentioned</b>		
<b>CCS60201</b>	1. Weight Monitoring	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60202</b>	2. Promotion of exclusive breastfeeding	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60203</b>	3. AINM-C-IMCI protocols	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60204</b>	4. Signals of danger and reference	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60205</b>	5. Explain to the woman the findings of medical history and obstetric exam.	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60206</b>	6. <b>Nutrition counseling</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60207</b>	7. <b>Hygiene counseling</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60208</b>	8. <b>Safe Sex counseling</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60209</b>	9. Early and exclusive breastfeeding in the first 6 months	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60210</b>	10. Signs and symptoms of onset of labor (regular uterine contractions and expulsion of mucus)	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60211</b>	11. Guidance about what to do and Where to go if have: <b>vaginal bleeding</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60212</b>	12. Guidance about what to do and Where to go if have: <b>severe headache, dizziness or blurred vision</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60213</b>	13. Guidance about what to do and Where to go if have: <b>Seizures</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60214</b>	14. Guidance about what to do and Where to go if have: <b>Shortness of breath and fatigue</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60215</b>	15. Guidance about what to do and Where to go if have: <b>fever</b>	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60216</b>	16. Guidance about what to do and Where to go if have: <b>Loss of fluid or discharge of odor</b>	1 = Yes 2 = No	<input type="checkbox"/>
	3. ¿What are the services or care for a woman in post-partum at CC? <b>REcord: 1 = mentioned 2 = not mentioned</b>		
<b>CCS60301</b>	1. Any post-partum woman should receive a home visit by MA or EA, with emphasis on the first 15 days after birth and a maximum period more than 40 days postpartum.	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60302</b>	2. Registration of mother in clinic record	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60303</b>	3. Follow-up visits by the midwife and / or MA or EA.	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60304</b>	4. Delivery of micronutrients ferrous sulfate and folic acid (supplement)	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60305</b>	5. vitamin A soplement	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60306</b>	6. Follow-up through the IMCI -AINM-C strategy	1 = Yes 2 = No	<input type="checkbox"/>

<b>CCS60307</b>	7. Trigger family and community emergency plan	1 = Yes 2 = No	<input type="checkbox"/>
4. ¿What are the services or care for a new born in this CC? <b>Record: 1 = mentioned 2 = not mentioned</b>			
<b>CCS60401</b>	1. All new born will receive a home visit by the MA or EA, with emphasis on the first 15 days of birth and maximum at 28 days of age.	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60402</b>	2. Registering on the child clinic card	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60403</b>	3. Administration of BCG	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60404</b>	4. Follow up through IMCI -AINM-C- protocols	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60405</b>	5. Detection of danger and prompt referral	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60406</b>	6. Fill and child Card delivery	1 = Yes 2 = No	<input type="checkbox"/>
5. What are the care services for monitoring a child's growth less than $\pm$ 2 years? <b>Record: 1 = mentioned 2 = not mentioned</b>			
<b>CCS60501</b>	1. Children from 0 to under 24 months: monthly <i>weight</i> monitoring using minimal weight <i>expected Table</i> .	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60502</b>	2. Children from 24 months to 60 months: weight monitoring every two months (bimonthly) using <i>trend curve</i> .	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60503</b>	3. Early detection and timely reference of children with severe acute malnutrition	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60504</b>	4. Early detection and timely reference of children classified as "does not grow well" for two consecutive months, according to the tables of IMCI AINM-C procedures"	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60505</b>	5. Follow up of cases of children with growth failure	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60506</b>	6. mothers counseling on health, nutrition and hygiene	1 = Yes 2 = No	<input type="checkbox"/>
6. What are the services or care for a children 2-5 year in this CC? <b>Record: 1 = mentioned 2 = not mentioned</b>			
<b>CCS60601</b>	1. mothers counseling on health, nutrition and hygiene	1 = Yes 2 = No	<input type="checkbox"/>
<b>CCS60602</b>	2. Deworming : Albendazole 400 mg single dose a year or every six months from the two year old	1 = Yes 2 = No	<input type="checkbox"/>

Beneficiary Evaluation of Knowledge, Project EC-1

VARIABLES NAME	QUESTION	RESPONSE CODE	
<b>CODCC</b>	<i>Convergence Center</i> CODE	[ ][ ][ ][ ][ ]	
<b>ECOM05</b>	5. CC municipality location	[ ][ ][ ][ ][ ][ ]	
<b>ECOM06</b>	6. CC community location	[ ][ ][ ][ ][ ][ ][ ][ ][ ]	
<b>Nameofmunicipality</b>	Name of municipality	Pre-coded. No full visual aid to field team	
<b>communityname</b>	Community Name	Pre-coded. No full visual aid to field team	
VARIABLES NAME	QUESTIONS	CODES	ANSWER
<b>Cial Ina Data</b>			
<b>ECDI01</b>	Number of Survey	[ ][ ][ ][ ][ ][ ][ ]	
<b>ECDI02</b>	Annex to Survey:	1 = CC Survey 2 = Community Survey	[ ]
<b>ECDI03</b>	Date of interview	[ ][ ][ ] / [ ][ ][ ] / 2010 <b>Day Month</b>	
<b>ECDI04</b>	Starting time	[ ][ ] Time	[ ][ ] Minutes
<b>ECDI05</b>	To request permission to interview.	He received permission 1 = 2 = No received permission	[ ]
<b>ECDI06</b>	Name of Informant		
<b>06A ECDI</b>	Charge	1 = CF (Community Facilitator) 2 = HG (Health Guardian) 3 = Trained Midwife 4 = IN / ID (Itinerant nurse/Itinerant doctor)	[ ]
<b>ECDI07</b>	THIS name		
<b>ECDI07A</b>	Charge	1 = CF 2 = HG 3 = Midwife 4 = institutional Facilitator 5 = Educator 6 = IN / ID 7 = Other (specify)	[ ]
<b>CARGO</b>		<b>Conditional (jump other)</b>	
<b>ECDI07B</b>	Specify another charge		
<b>ECDI08</b>	THIS name		
<b>ECDI08A</b>	Charge	1 = CF 2 = HG 3 = Midwife 4 = institutional Facilitator 5 = Educator 6 = IN / ID 7 = Other (specify)	[ ]
<b>---</b>		<b>Conditional (jump other)</b>	
<b>ECDI08B</b>	6a. Specify other charges		
<b>ECDI09</b>	1. THIS name		
<b>ECDI9A</b>	Charge	1 = CF 2 = HG 3 = Midwife 4 = institutional Facilitator 5 = Educator 6 = IN / ID	[ ]

7 = Other (specify)			
---		Conditional (jump other)	
<b>ECDI09B</b>	7a .Specify other charges		
<b>sec1-educ</b>	Link next section n		
VARIABLES NAME	QUESTION	CODES	ANSWER
<b>Section 1. Education and basic knowledge Informant</b>			
<b>ECS 101</b>	¿What is its latest level of study?	1 = Primary incomplete 2 = Full primary 3 = Incomplete Basic education 4 = completed Basic Education N 5 = incomplete secondary Education N 6 = completed secondary Education 7 = Some university 8 = Complete University 9 = Higher Education 10 = No Education No formal (literate and self) 88 = Do not know	[ ]   [ ]
<b>ECS 102</b>	How Much time has worked in the CC (or community)?	1 = Less than 6 months 2 = Between 6 and 12 months 3 = More than 12 months 8 = Do not know	[ ]
<b>ECS 103</b>	How Much time has been in this position?	1 = Less than 6 months 2 = Between 6 and 12 months 3 = More than 12 months 8 = Do not know	[ ]
<b>ECS1F1</b>	<b>PDA FILTER: The Informant is a CF, HG, O IN / ID</b>	1 = yes <input type="checkbox"/> <b>P4</b> 2 = No <input type="checkbox"/> <b>ECS1F2</b>	[ ]
<b>ECS 104</b>	Have you received training in child feed best practices ?	1 = Yes 2 = No <input type="checkbox"/> <b>P5</b> 8 = Do not know / does not <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>P5</b>	[ ]
<b>test</b>	<b>JUMP: P4 reply</b>	2 = No <input type="checkbox"/> <b>P5</b> 8 = Do not know / does not <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <b>P5</b>	[ ]

<b>ECS 104A</b>	From who?	1 = BHT (Basic Health Team) 2 = NGO technician 3 = Other NGOs 8 = Do not know / can not remember	<input type="checkbox"/>
<b>ECS 104B</b>	When did you receive this training?	1 = the last few 6 months 2 = 7 to 12 months 3 = It's more than 12 months 8 = Do not know / cannot remember	<input type="checkbox"/>
<b>ECS 104C</b>	¿What were the main themes of this training?	1 = Personal Hygiene 2 = proper preparation of food. 3 = Exclusive Breastfeeding 4=Complementary food for children from 6 to 23 months 5 = Other 8 = Do not know / cannot remember	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 8. <input type="checkbox"/>
<b>ECS 105</b>	Have you received training <b>on care and / or food and nutrition of pregnant women?</b>	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>P6</b> 8 = Do not know / cannot remember <input type="checkbox"/> <input type="checkbox"/> <b>P6</b>	<input type="checkbox"/>
<b>Test1</b>	<b>JUMP: P5 response</b>	2 = No <input type="checkbox"/> <input type="checkbox"/> <b>P6</b> 8 = Do not know / remember <input type="checkbox"/> <input type="checkbox"/> <b>P6</b>	<input type="checkbox"/>
<b>ECS 105A</b>	From who?	1 = BHT 2 = NGO technician 3 = Other NGOs 8 = Do not know / cannot remember	<input type="checkbox"/>
<b>ECS 105B</b>	When did you receive this training?	1 = the last few 6 months 2 = 7 to 12 months 3 = It s more than 12 months 8 = Do not know / can not remember	<input type="checkbox"/>
<b>ECS 105C</b>	What were the main themes of this training?	1 = Personal Hygiene 2 = Nutrition 3 = Immunizations 4 = Vitamins and micronutrients 8 = Do not know / cannot remember	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 8. <input type="checkbox"/>
<b>ECS 106</b>	Have you received	1 = Yes	<input type="checkbox"/>

	training on care and / or food and nutrition of lactating women?	2 = No <input type="checkbox"/> <input type="checkbox"/> P7 8 = Do not know / can not remember <input type="checkbox"/> <input type="checkbox"/> P7	
<b>Test2</b>	<b>JUMP: P6 response</b>	2 = No <input type="checkbox"/> <input type="checkbox"/> P7 8 = Do not know / remember <input type="checkbox"/> <input type="checkbox"/> P7	<input type="checkbox"/>
<b>ECS 106A</b>	From who?	1 = BHT 2 = NGO technician 3 = Other NGOs 8 = Do not know / cannot remember	<input type="checkbox"/>
<b>ECS 106B</b>	When did you receive this training?	1 = the last few 6 months 2 = 7 to 12 months 3 = It s more than 12 months 8 = Do not know / can not remember	<input type="checkbox"/>
<b>ECS 106C</b>	What were the main themes of this training?	1 = Personal Hygiene 2 = Food Hygiene 3 = Nutrition 4 = Vitamins and micronutrients 5 = Childhood danger signs 8 = Do not know / cannot remember	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 8. <input type="checkbox"/>
<b>ECS107</b>	Have you received training on the care and / or food and nutrition of sick children?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> P8 8 = Do not know / can not remember <input type="checkbox"/> <input type="checkbox"/> P8	<input type="checkbox"/>
<b>Test3</b>	<b>JUMP: P7 response</b>	2 = No <input type="checkbox"/> <input type="checkbox"/> P8 8 = Do not know / remember <input type="checkbox"/> <input type="checkbox"/> P8	<input type="checkbox"/>
<b>ECS107A</b>	From who?	1 = BHT 2 = NGO technician 3 = Other NGOs 8 = Do not know / cannot remember	<input type="checkbox"/>
<b>ECS107B</b>	When did you receive this training?	1 = the last few 6 months 2 = 7 to 12 months 3 = It s more than 12 months 8 = Do not know / can not remember	<input type="checkbox"/>
<b>ECS107C</b>	What were the main themes of this training?	1 = Personal Hygiene 2 = Nutrition 3 = Food Care (manipulation ) 4 = Childhood	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/>

		danger signs 5 = Oral Hydration 6 = Vaccination 8 = Do not know / cannot remember	8. <input type="checkbox"/>
<b>ECS108</b>	Have you received training on other health issues in general?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <b>P9</b> 8 = Do not know / can not remember <input type="checkbox"/> <input type="checkbox"/> <b>P9</b>	<input type="checkbox"/>
<b>Prueba4</b>	<b>JUMP: P8 response</b>	2 = No <input type="checkbox"/> <input type="checkbox"/> <b>P9</b> 8 = Do not know / does not <input type="checkbox"/> <input type="checkbox"/> <b>P9</b>	<input type="checkbox"/>
<b>ECS108A</b>	From who?	1 = BHT 2 = NGO technician 3 = Other NGOs 8 = Do not know / cannot remember	<input type="checkbox"/>
<b>ECS108B</b>	When Did You receive this training?	1 = the last few 6 months 2 = 7 to 12 months 3 = It s more than 12 months 8 = Do not know / cannot remember	<input type="checkbox"/>
<b>ECS108C</b>	What were the main themes of this training?	1 = Water and basic sanitation 2 = ARI 's 3 = Diarrhea 4 = Skin Infections 5 = Grow monitoring 6 = Other 8 = Do not know / can not remember	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 5. <input type="checkbox"/> 6. <input type="checkbox"/> 8. <input type="checkbox"/>
<b>ECS109</b>	According to IMCI / AINM-C in what cases children less than 2 year should be taken to Convergence Center?	1 = Grow monitoring 2 = For illness 3 = Other 8 = Do not know / cannot remember	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 8. <input type="checkbox"/>
<b>ECS 110</b>	According to IMCI / AINM-C, What you should look to address in a child less than 2 year during a consultation Convergence Center?	1 = Childhood danger signs 2 = food and nutritional status 3 = Vaccination status 4 = Other 8 = Do not know / cannot remember	1. <input type="checkbox"/> 2. <input type="checkbox"/> 3. <input type="checkbox"/> 4. <input type="checkbox"/> 8. <input type="checkbox"/>
<b>ECS1111</b>	What nutritional supplements should	1 = Vitamin A	1 <input type="checkbox"/>
<b>prueba5</b>		<b>Conditional</b>	<b>ECS1111 = <input type="checkbox"/> ECS1112</b>

ECS1111A	<p>take a child under 2 year?</p> <p><i>Not to mention the options. Note 1 in the mentioning boxes. Inquire when finished answering, scoring 2 in boxes not mentioned. In the boxes of "how often" record the number of months. (Ex: if is every 6 months, scoring 6 )</i></p>	How often?	[ ] (Months)
ECS1112		2 = Iron	2 [ ]
<b>Test 6</b>		<b>Conditional</b>	<b>ECS1112 = <input type="checkbox"/> ECS1113</b>
2A ECS111		How often?	[ ] (Days)
ECS111 3		3 = Folic acid	3 [ ]
<b>Test 7</b>		<b>Conditional</b>	<b>ECS1113 = <input type="checkbox"/> ECS1114</b>
3A ECS111		How often?	[ ] (Days)
ECS111 4		4 = Zinc	4 [ ]
<b>Test 8</b>		<b>Conditional</b>	<b>ECS1114 = <input type="checkbox"/> ECS1115</b>
4A ECS111		How often?	[ ] (Days)
ECS111 5		5 = Sparky	5 [ ]
<b>Test 9</b>		<b>Conditional</b>	<b>ECS1115 = <input type="checkbox"/> ECS11197</b>
5A ECS111		How often?	[ ] (Days)
ECS11 197		97 = Other	97 [ ]
<b>Test 10</b>	<b>Conditional</b>	<b>ECS1115 = <input type="checkbox"/> Test11</b>	
ECS11197ESP	97=Another supplement, specify _____		
ECS11 197A	How often?	[ ] (Days)	
<b>Test 11</b>	<b>Conditional</b>	<b>ECS1111 = 1 and ECS1112 = 1 <input type="checkbox"/> <input type="checkbox"/> test12</b>	
<b>Test 12</b>	<b>Conditional</b>	<b>ECS111 3 = 1 and ECS1114 = 1 <input type="checkbox"/> <input type="checkbox"/> Prueba13</b>	
<b>Test 13</b>	<b>Conditional</b>	<b>ECS111 5 = 1 and ECS11197 = 1 <input type="checkbox"/> <input type="checkbox"/> ECS1121</b>	
ECS11 198	98 = Do not know	98 [ ]	
ECS 1121	<p>What nutritional supplements should take a pregnant women?</p> <p><i>Not to mention the options. Note 1 in the mentioning boxes. Inquire when finished answering, scoring 2 in boxes not mentioned. In the boxes of "hoe often" record the number of months. (Ex: if is every 6 months, note 6)</i></p>	1 = Iron	1 [ ]
<b>Test14</b>		<b>Conditional</b>	<b>ECS 1121 = 2 <input type="checkbox"/> ECS1122</b>
ECS 1121A		How often?	[ ] (Days)
ECS 1122		2 = Folic acid	2 [ ]
<b>Test 15</b>		<b>Conditional</b>	<b>ECS1122 = <input type="checkbox"/> ECS1123</b>
ECS 1122a		How often?	[ ] (Days)
ECS 1123		3 = Calcium	3 [ ]
<b>Test 16</b>		<b>Conditional</b>	<b>ECS1123 = <input type="checkbox"/> ECS1124</b>
ECS 1123A		How often?	[ ] (Days)
ECS 1124		4 = Zinc	4 [ ]
<b>Test 17</b>		<b>Conditional</b>	<b>ECS1124 = <input type="checkbox"/> ECS1125</b>
ECS 1124A		How often?	[ ] (Days)
ECS 11297		97 = Other	97 [ ]
<b>Exhibit 19</b>		<b>Conditional</b>	<b>ECS1125 = <input type="checkbox"/> Prueba20</b>
ECS 11297ESP	97=Another supplement specify _____		

ECS 11297A		How often?	[ ] (Days)
<b>Exhibit 20</b>		<b>Conditional</b>	<b>ECS 1121 = 1 and ECS1122 = 1 ☐☐ Prueba21</b>
<b>Exhibit 21</b>		<b>Conditional</b>	<b>ECS 1123 = 1 and ECS1124 = 1 ☐☐ Prueba22</b>
<b>Exhibit 22</b>		<b>Conditional</b>	<b>ECS 11297 = 1 ☐☐ ECS1131</b>
ECS 11298		98 = Do not know	98 [ ]
ECS 1131	<p>What nutritional supplements should take a lactating women?</p> <p><i>Not to mention the options. Note 1 in the mentioning boxes.</i></p> <p><i>Inquire when finished answering, scoring 2 in boxes not mentioned. In the boxes of "how often" record the number of months. (Ex: if is every 6 months, note 6)</i></p>	1 = Iron	1 [ ]
<b>Test 18</b>		<b>Conditional</b>	<b>ECS 1131 = ☐ ECS1132</b>
ECS 1131A		How often?	[ ] (Days)
ECS 1132		2 = Folic Acid	2 [ ]
<b>Test 23</b>		<b>Conditional</b>	<b>ECS1132 = ☐ ECS1133</b>
ECS 1132A		How often?	[ ] (Days)
ECS 1133		3 = Vitamin A	3 [ ]
<b>Test 24</b>		<b>Conditional</b>	<b>ECS1133 = ☐ ECS1134</b>
ECS 1133A		How often?	[ ] (Months)
ECS 1134		4 = Calcium	4 [ ]
<b>Test 25</b>	<b>Conditional</b>	<b>ECS1134 = ☐ ECS1135</b>	
ECS 1134A	How often?	[ ] (Days)	
ECS 1135	5 = Zinc	5 [ ]	
<b>Test 26</b>	<b>Conditional</b>	<b>ECS1135 = ☐ ECS11397</b>	
ECS 1135A	How often?	[ ] (Days)	
ECS 11397	97 = Other	97 [ ]	
<b>Test 27</b>	<b>Conditional</b>	<b>ECS1135 = ☐ Test11</b>	
ECS 11397ESP	97=Another supplement specify _____		
ECS 11397A	How often?	[ ] (Days)	
<b>Test 28</b>	<b>Conditional</b>	<b>ECS 1131 = 1 and ECS1132 = 1 ☐☐ test12</b>	
<b>Test 29</b>	<b>Conditional</b>	<b>ECS 1133 = 1 and ECS1134 = 1 ☐☐ Prueba13</b>	
<b>Test 30</b>	<b>Conditional</b>	<b>ECS 1135 = 1 and ECS11397 = 1 ☐☐ ECS1141</b>	
ECS 11398	98 = Do not know	98 [ ]	

VARIABLES NAME	QUESTION	ANSWER CODE	
<b>CODCC</b>	<i>Convergence Center</i> Code	[ ] [ ] [ ] [ ]	
<b>ECOM05</b>	CC municipality location	[ ] [ ] [ ] [ ] [ ] [ ]	
<b>ECOM06</b>	CC community location	[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]	
<b>Municipalityname</b>	Municipality name	Pre-coded. No full visual aid to field team	
<b>CommunityName</b>	Community Name	Pre-coded. No full visual aid to field team	
VARIABLES NAME	QUESTION	CODES	ANSWER
<b>06A ECDI</b>	6a. Charge	1 = CF 2 = HG 3 = Trained Midwife 4 = IN / ID	[ ]
<b>Section 2. Pregnancy danger signs</b>			
<b>ECS1F 2</b>	<i>Filter PDA, the informant is a (A) midwife, CF, or IN / ID</i>	1 = <input type="checkbox"/> <input type="checkbox"/> <b>Section 2 - P1</b> 2 = <b>No Section 2 - P4</b>	[ ]
1. Occasionally pregnant women require immediate medical attention (from a doctor or nurse). Do you know what are the warning signs (symptoms) that tell a pregnant woman should receive immediate medical attention?			
<b>DO NOT READ LIST.</b> <b>NO MENTION ANY DANGER SIGN ( symptom)</b> <b>WRITE ONLY THE SIGNS ( symptoms) referred without reading.</b> <b>WHEN RESPONDANT FINISHES MENTIONING SIGNS, PROBE: Any other sign?</b> <b>WHEN THERE ARE NO MORE SIGNS MENTIONED MARK A 2 IN THE SIGNS NOT MENTIONED AND GO TO QUESTION 2</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS201A</b>	Bleeding or vaginal bleeding	1 = E 2 = No	[ ]
<b>ECS201 B</b>	Severe pain in the stomach	1 = E 2 = No	[ ]
<b>ECS 201C</b>	Persistent back pain	1 = E 2 = No	[ ]
<b>ECS 201D</b>	Leakage of clear fluid out through the vagina (leakage of amniotic fluid)	1 = E 2 = No	[ ]
<b>ECS201 E</b>	Puffiness of hands, face, or body	1 = E 2 = No	[ ]
<b>ECS 201F</b>	Severe headache or blurred vision	1 = E 2 = No	[ ]
<b>ECS 201G</b>	continuous contractions before 37 weeks	1 = E 2 = No	[ ]
<b>ECS 201H</b>	No fetal movement after 5 months onwards	1 = E 2 = No	[ ]
<b>ECS 201I</b>	Breathing is difficult	1 = E 2 = No	[ ]
2. Do you know signs of warning (symptoms) during labor?			
<b>DO NOT READ LIST.</b> <b>NO MENTION ANY DANGER SIGN (symptom)</b> <b>WRITE ONLY THE SIGNS (symptoms) referred without reading.</b> <b>WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?</b> <b>WHEN THERE ARE NO MORE SIGNS MENTIONED MARK A 2 IN SIGNS NOT MENTIONED AND NO GO TO QUESTION 3</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS 202A</b>	Breathing is difficult	1 = E 2 = No	[ ]
<b>ECS 202B</b>	Vaginal bleeding	1 = E 2 = No	[ ]
<b>ECS 202C</b>	Fever	1 = E 2 = No	[ ]
<b>ECS 202D</b>	Labor pains that last more than 12 hours	1 = E 2 = No	[ ]
3. Do you know the signs of warning (symptoms) in the post-partum?			

**DO NOT READ LIST.**  
**NO MENTION ANY DANGER SIGN (symptom)**  
**WRITE ONLY THE SIGNS (symptoms) referred without reading.**  
**WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?**  
**WHEN THERE ARE NO MORE SIGNS MENTIOND MARK A 2 IN THE SIGNS NOT MENTIONED AND SKIP TO QUESTION 4**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS 203A</b>	Vaginal bleeding	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 203B</b>	Severe pain that does not go away	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 203C</b>	Chilling, sweating or fever	1 = E 2 = No	<input type="checkbox"/>
<b>ECS2F1</b>	<b>Filter PDA the informant is a HG, CF, IN/ID</b>	<b>1 = YES</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
		<b>P4</b>	
		<b>2 = No ECS2F2</b>	

4. Occasionally the children will suffer from severe illnesses that require immediate medical attention (from a doctor or nurse). Do you know what are the warning signs (symptoms) that indicate that NEW BORN should receive immediate medical attention?

**DO NOT READ LIST.**  
**NO MENTION ANY DANGER SIGN (symptom)**  
**WRITE ONLY THE SIGNS (symptoms) referred without reading.**  
**WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?**  
**WHEN THERE ARE NO MORE SIGNS MENTIOND MARK A 2 IN THE SIGNS NOT MENTIONED AND GO TO QUESTION 5**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS 204A</b>	It is very small	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204B</b>	It is cold	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204C</b>	It is purple	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204D</b>	Breathing is difficult	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204E</b>	It cannot breastfeed	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204F</b>	It is very hot or feverish	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204G</b>	It has red eyes with secretions	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 204H</b>	Red navel, extending to the skin with bad odor and pus	1 = E 2 = No	<input type="checkbox"/>

5. Occasionally the children will suffer from severe illnesses that require immediate medical attention (from a doctor or nurse). Do you know what are the warning signs (symptoms) that indicate that a child should receive immediate medical attention?

**DO NOT READ LIST.**  
**NO MENTION ANY DANGER SIGN (symptom)**  
**WRITE ONLY THE SIGNS (symptoms) referred without reading.**  
**WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?**  
**WHEN THERE ARE NO MORE SIGNS MENTIOND MARK A 2 IN THE SIGNS NOT MENTIONED AND NO GO TO QUESTION 6**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS 205A</b>	It can not breastfeed, take liquids or eat	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205B</b>	No improvement or becomes more ill	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205C</b>	Fever	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205D</b>	Fast breathing	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205E</b>	Shortness of breath, difficult breathing	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205F</b>	Blood in the stool (bowel movement)	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205g</b>	Vomits everything	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205H</b>	Has attacks	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 205i</b>	Faints	1 = E 2 = No	<input type="checkbox"/>

6. Do you know what are the warning signals (symptoms) of severe dehydration?

**DO NOT READ LIST.**  
**NO MENTION ANY DANGER SIGN (symptom)**  
**WRITE ONLY THE SIGNS (symptoms) referred without reading.**  
**WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?**  
**WHEN THERE ARE NO MORE SIGNS MENTIOND MARK A 2 IN THE SIGNS NOT MENTIONED AND SKIP TO QUESTION 7**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS 206A</b>	It is uneasy	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 206B</b>	It is very thirsty	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 206C</b>	Sunken eyes	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 206D</b>	The skin of the belly back very slowly	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 206E</b>	It cannot breastfeed, take liquids or eat	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 206F</b>	It is faint	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 206g</b>	Sunken eyes	1 = E 2 = No	<input type="checkbox"/>

7. Do you know what are danger signals (symptoms) of a serious pneumonia?

**DO NOT READ LIST.**  
**NO MENTION ANY DANGER SIGN (symptom)**  
**WRITE ONLY THE SIGNS (symptoms) referred without reading.**  
**WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?**  
**WHEN THERE ARE NO MORE SIGNS MENTIOND MARK A 2 IN THE SIGNS NOT MENTIONED AND SKIP TO QUESTION 8**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS 207A</b>	<b>the ribs are made</b> prominent when breathing	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 207B</b>	Difficult breathing or fast breathing	1 = E 2 = No	<input type="checkbox"/>

8. Do you know what are the signals of malnutrition in a child?

**DO NOT READ LIST.**  
**NO MENTION ANY DANGER SIGN (symptom)**  
**WRITE ONLY THE SIGNS (symptoms) referred without reading.**  
**WHEN RESPONDANT FINISHES MENTIONING SIGNS PROBE: Any other sign?**  
**WHEN THERE ARE NO MORE SIGNS MENTIOND MARK A 2 IN THE SIGNS NOT MENTIONED AND SKIP TO QUESTION 9**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS 208A</b>	It is swollen	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 208B</b>	It is very thin	1 = E 2 = No	<input type="checkbox"/>
<b>ECS 208C</b>	Paleness in the palm of hand	1 = E 2 = No	<input type="checkbox"/>

<b>QUESTION CODE</b>	<b>QUESTION</b>	<b>CODES</b>	<b>ANSWER</b>
----------------------	-----------------	--------------	---------------

<b>ECS 1F3</b>	<b>PDA FILTER the informant is a HG, CF, IN/ID</b>	<b>1 = YES</b> <input type="checkbox"/> <b>section 4</b> <b>2 = NO</b> <input type="checkbox"/> <input type="checkbox"/> <b>section</b> <b>n 5</b>	<input type="checkbox"/>
----------------	----------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------

#### **Section 4. Child Care**

1. What are the recommendations for a pregnant woman?

**DO NOT READ LIST.**  
**WRITE ALL THAT SAID**  
**Check the boxes of the answers. READ NO OPTIONS**  
**WHEN RESPONDANT FINISHES TO ANSWERS THE QUESTIONS score 2 in boxes ABOVE AND GO TO NEXT QUESTION**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS40101</b>	Eat a meal every day more than when she was not pregnant	1 = E 2 = No	<input type="checkbox"/>
<b>ECS401 02</b>	How to solve breastfeeding problems	1 = E 2 = No	<input type="checkbox"/>

ECS401 03	How to identify the danger signals	1 = E 2 = No	<input type="checkbox"/>
ECS401 97	Other	1 = E 2 = No	<input type="checkbox"/>
ECS401 98	Do not know	1 = E 2 = No	<input type="checkbox"/>
ECS401 A	1A. Other ,Specify		
	2. What are the services must have a pregnant woman?		
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			
<b>Check the boxes of the answers. READ NO OPTIONS</b>			
<b>WHEN RESPONDANT FINISHES TO ANSWERS THE QUESTIONS score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
201 ECS40	Pregnancy Control	1 = E 2 = No	<input type="checkbox"/>
ECS40 202	TDA (Tetanus, Diphtheria) vaccination	1 = E 2 = No	<input type="checkbox"/>
ECS40 203	Weight Control	1 = E 2 = No	<input type="checkbox"/>
ECS40 204	Food and nutritional counseling	1 = E 2 = No	<input type="checkbox"/>
ECS40 205	Iron and folic acid supplementation	1 = E 2 = No	<input type="checkbox"/>
ECS40 297	Other	1 = E 2 = No	<input type="checkbox"/>
ECS40 298	Do not know	1 = E 2 = No	<input type="checkbox"/>
2A ECS40	2A. Other Specify		
	3. On what age should be given to the following immunizations to the children?		
<b>Reed the list of vaccines.</b>			
<b>NO MENTION ANY AGE RELATED TO EACH VACCINE</b>			
<b>WRITE ONLY AGES ABOVE RIGHT without reading for each vaccine.</b>			
<b>WHEN <u>NOT MENTION THE RIGHT AGE</u> REDCORD 2 IN THE BOXES WRITE FOR ANSWER AND GO TO NEXT</b>			
<b>Codes of answers: 1 = Yes, 2 = right age mentions not mentions right age</b>			
ECS40 301	BCG [0] [1] month	1 = E 2 = No	<input type="checkbox"/>
ECS40 302	Polio in [2] to [6] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 303	Pentavalent of [2] to [6] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 304	MMR vaccines [12] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 305	Polio reinforcement 1 of [18] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 306	Reinforcement 1 of DPT [18] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 307	Polio reinforcement 2 of [48] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 308	Reinforcement 2 of DPT [48] months	1 = E 2 = No	<input type="checkbox"/>
ECS40 398	Do not know	1 = E 2 = No	<input type="checkbox"/>
	4. What services must have a child less than 2 years?		
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			
<b>Check the boxes of the answers. READ NO OPTIONS</b>			
<b>WHEN RESPONDANT FINISHES TO ANSWERS THE QUESTIONS score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
ECS40 401	Vaccination	1 = E 2 = No	<input type="checkbox"/>
ECS40 402	Grow monitoring	1 = E 2 = No	<input type="checkbox"/>
ECS40 403	Deworming	1 = E 2 = No	<input type="checkbox"/>
ECS40 404	Nutritional and / or micronutrient Supplementation	1 = E 2 = No	<input type="checkbox"/>
ECS40 405	Chilhood Illness assitance	1 = E 2 = No	<input type="checkbox"/>
ECS40 497	Other	1 = E 2 = No	<input type="checkbox"/>
ECS40 498	Do not know	1 = E 2 = No	<input type="checkbox"/>
	5. What should a mother do when a child have diarrhea?		
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			

**Check the boxes of the answers. READ NO OPTIONS  
WHEN RESPONDANT FINISHES TO ANSWER THE QUESTIONS score 2 in boxes ABOVE AND GO  
TO NEXT QUESTION**

<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
ECS40 501	Oral RehydrationSalt (ORS)	1 = E 2 = No	<input type="checkbox"/>
ECS40 502	Homemade rehydration serum	1 = E 2 = No	<input type="checkbox"/>
ECS40 503	Continue to breastfeed	1 = E 2 = No	<input type="checkbox"/>
ECS40 504	Breastfeed more than normal	1 = E 2 = No	<input type="checkbox"/>
ECS40 505	Guive syrups	1 = E 2 = No	<input type="checkbox"/>
ECS40 506	Guive traditional medicine	1 = E 2 = No	<input type="checkbox"/>
ECS40 507	Guive boiled, chlorinated, bottled water	1 = E 2 = No	<input type="checkbox"/>
ECS40 508	Guive carrot juice or rice water	1 = E 2 = No	<input type="checkbox"/>
ECS40 509	Nothing	1 = E 2 = No	<input type="checkbox"/>
ECS40 510	Take him to a hospital	1 = E 2 = No	<input type="checkbox"/>
ECS40 511	Breastfeed less than normal	1 = E 2 = No	<input type="checkbox"/>
ECS40 597	Other	1 = E 2 = No	<input type="checkbox"/>
<b>Otro11</b>		<b>Conditional (jump other)</b>	
<b>5A ECS40</b>	5A. Other Specify		
<b>EC2F23</b>		<b>Conditional (Do not know)</b>	
ECS40 598	Do not know	1 = E 2 = No	<input type="checkbox"/>
	6. What can a mother do to prevent diarrhea in children?		
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN RESPONDANT FINISHES TO ANSWER THE QUESTIONS score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
ECS40 601	Wash hands	1 = E 2 = No	<input type="checkbox"/>
ECS40 602	Clip her fingernails	1 = E 2 = No	<input type="checkbox"/>
ECS40 603	The children must wear pants	1 = E 2 = No	<input type="checkbox"/>
ECS40 604	Wash fruits and vegetables	1 = E 2 = No	<input type="checkbox"/>
ECS40 605	Children should wear sandals or shoes	1 = E 2 = No	<input type="checkbox"/>
ECS40 606	Give pure, boiled, SODIS, bottled or chlorinated water	1 = E 2 = No	<input type="checkbox"/>
ECS40 607	Keep children's clothes clean	1 = E 2 = No	<input type="checkbox"/>
ECS40 608	Do not sit on the floor	1 = E 2 = No	<input type="checkbox"/>
ECS40 609	Not play Water	1 = E 2 = No	<input type="checkbox"/>
ECS40 697	Other	1 = yes <input type="checkbox"/> <b>P6a</b> 2 = No	<input type="checkbox"/>
<b>Otro17</b>		<b>Conditional (jump other)</b>	
<b>EC2F24</b>		<b>Conditional (Do not know)</b>	
ECS40 698	97. Do not know	1 = yes 2 = No	<input type="checkbox"/>
<b>6A ECS40</b>	6 A. Other Specify		

VARIABLES NAME	QUESTION	ANSWER CODES
<b>CODCC</b>	<i>Convergence Center code</i>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>ECOM05</b>	5. CC municipality location	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>ECOM06</b>	6. CC community location	<input type="checkbox"/>
<b>Municipalityname</b>	Municipality name	Pre-coded. No full visual aid to field team

Communityname	Community Name	Pre-coded.	
QUESTION CODE	QUESTIONS	CODES	ANSWER
<b>Section 5. Food and nutrition knowledge</b>			
<b>06A ECDI</b>	6a. Charge	1 = CF 2 = HG 3 = Trained Midwife 4 = IN/ID	<input type="checkbox"/>
<b>ECS501</b>	After the baby is born within what timeframe should it breastfeed the first time? Do not read the options	1 = Immediately 2 = Less than one hour 3 = More than 1 hour but less than 8 hours 4 = 8 hours but less than 24 hours 5 = One day after 6 = More than a one day after 7 = Other, ----P1a 8 = Do not know	<input type="checkbox"/>
<b>ECS2F2</b>		<b>Conditional (jump other)</b>	
<b>01A ECS5</b>	1A. Other Specify		
	1. What should a mother do with first milk or colostrum?		
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN RESPONDANT FINISHES TO ANSWER THE QUESTIONS score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS50201</b>	Throw it away and start to breastfeed later	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50202</b>	Breastfeed	1 = E 2 = No	<input type="checkbox"/>
<b>ECS2F4</b>		<b>Conditional (jump other)</b>	
<b>Conditional ECS2F5 (jump not know)</b>		<b>ECS50201 = 1 and ECS50202 = 1 <input type="checkbox"/> <input type="checkbox"/> ECS2F3</b>	
<b>Conditional ECS2F3 (jump not know)</b>		<b>ECS50202 = 1 and ECS50297 <input type="checkbox"/> ECS50301</b>	
<b>ECS502 97</b>	97. Other, specify	1 = SÃ P2a <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>ECS502 98</b>	98. Do not know	1 = E 2 = No	<input type="checkbox"/>
<b>02A ECS5</b>	2 A. Specify other		
	2. What happens to a (a) baby if a mother gives colostrum (or first milk)?		
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN RESPONDANT FINISHES TO ANSWER THE QUESTIONS score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS50 301</b>	Baby gets nutrients	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 302</b>	Baby get sick	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 303</b>	It helps the baby be more healthy	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 304</b>	Will increase baby's defenses	1 = E 2 = No	<input type="checkbox"/>

ECS50 305	It will make de the baby fat	1 = E 2 = No	<input type="checkbox"/>
ECS50 306	Nothing	1 = E 2 = No	<input type="checkbox"/>
ECS50 397	Other, specify	1 = yes P3a No	<input type="checkbox"/> 2 = <input type="checkbox"/>
03A ECS5	3A. Other Specify		
<b>Other1</b>		<b>Conditional (jump other)</b>	
<b>ECS2F6</b>		<b>Conditional (jump not know)</b>	
ECS50 398	97. Do not know	1 = yes 2 = No	<input type="checkbox"/>
	3. Do you know when a mother should breastfeed a baby?		
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			
<b>Check the boxes of the answers. READ NO OPTIONS</b>			
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
ECS50 401	When the baby wants	1 = E 2 = No	<input type="checkbox"/>
ECS50 402	When she sees that the baby is hungry	1 = E 2 = No	<input type="checkbox"/>
ECS50 403	When the baby cries	1 = E 2 = No	<input type="checkbox"/>
ECS50 404	When the baby searches the breast	1 = E 2 = No	<input type="checkbox"/>
ECS50 497	Other, specify	1 = yes No	<input type="checkbox"/> P4a 2 = <input type="checkbox"/>
04A ECS5	4A. Other Specify		
<b>Otro2</b>		<b>Conditional (jump other)</b>	
<b>ECS2F7</b>		<b>Conditional (jump not know)</b>	
ECS50 498	97. Do not know	1 = E 2 = No	<input type="checkbox"/>
	4. If a mother of a baby under 6 months does not have or think does not have enough milk, what should she do?		
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			
<b>Check the boxes of the answers. READ NO OPTIONS</b>			
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
ECS50 501	Breastfeed more frequently	1 = E 2 = No	<input type="checkbox"/>
ECS50 502	Give others the liquid or food	1 = E 2 = No	<input type="checkbox"/>
ECS50 503	The mother needs to take more water	1 = E 2 = No	<input type="checkbox"/>
ECS50 504	The mother should eat more	1 = E 2 = No	<input type="checkbox"/>
ECS50 505	The mother should eat better	1 = E 2 = No	<input type="checkbox"/>
ECS50 506	The mother should drink liquids	1 = E 2 = No	<input type="checkbox"/>
ECS50 597	Other, specify	1 = yes No	<input type="checkbox"/> P5a 2 = <input type="checkbox"/>
05A ECS5	5A. Other Specify		
<b>Otro3</b>		<b>Conditional (jump other)</b>	
<b>ECS2F8</b>		<b>Conditional (jump not know)</b>	
ECS50 598	97. Do not know	1 = E 2 = No	<input type="checkbox"/>
ECS5 06	Can Mother give water to a child under 6 months of age?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
ECS5 07	Can mother give others liquids to a child under 6 months of age in addition breast milk?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
ECS5 08	Do you think that a mother who is breast-feeding a	1 = yes	<input type="checkbox"/>

	child under 6 months should stop breastfeeding if she becomes pregnant again?	2 = No 8 = Do not know	
	5. If a mother has a baby younger than 6 months and cannot be with the baby always, what can be given to the baby when it gets hungry?		
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS50 901</b>	Extracted Breast milk	1 = E 2 = No	<input type="checkbox"/>
<b>902 ECS50</b>	Milk pot	1 = E 2 = No	<input type="checkbox"/>
<b>903 ECS50</b>	Cow's milk	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 904</b>	Special formula milk for babies	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 905</b>	Atol (porridge)	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 906</b>	Bread	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 907</b>	Fruits	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 908</b>	Tortilla	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 909</b>	Mass Water	1 = E 2 = No	<input type="checkbox"/>
<b>ECS50 997</b>	Other, specify	1 = yes <input type="checkbox"/> P9A 2 = No	<input type="checkbox"/>
<b>09A ECS5</b>	9A. Other Specify other		
<b>Another.4</b>	<b>Conditional (jump other)</b>		
<b>ECS2F9</b>	<b>Conditional (jump not know)</b>		
<b>ECS50 998</b>	97. Do not know	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 10</b>	Besides breast milk, At what age should you start feeding and food (on) baby?	WRITE THE ANSWER IN MONTHS. 98 = DO NOT KNOW	<input type="checkbox"/> <input type="checkbox"/>
	6. Besides breast milk what should be the first foods you should give a (a) baby?		
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 1101</b>	Porridge (mass, incaparina and Vitacereal)	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1102</b>	Fruit	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1103</b>	Vegetables	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1104</b>	beans	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1105</b>	Rice	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1106</b>	Tortilla	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1107</b>	Cereals	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1108</b>	Eggs	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1109</b>	Soup / Broth	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1197</b>	Other, specify	1 = yes P11a <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>11A ECS5</b>	11A. Other Specify		
<b>Another5</b>	<b>Conditional (jump other)</b>		
<b>ECS2F10</b>	<b>Conditional (jump not know)</b>		
<b>ECS5 1198</b>	97. Do not know	1 = E 2 = No	<input type="checkbox"/>

7. Do you know for what reasons a mother may stop breastfeeding a baby?

**DO NOT READ LIST.**

**WRITE ALL THAT SAID**

**Check the boxes of the answers. READ NO OPTIONS**

**WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS5 1201</b>	Cracked nipples	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1202</b>	Pregnancy	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1203</b>	Birth of another baby	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1204</b>	Baby's interest in another foods	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1205</b>	Illness of Mother	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1206</b>	Strong feelings of the mother (which can be passed to your baby )	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1207</b>	Mastitis	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1208</b>	The baby is big	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1209</b>	The baby does not want to	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1297</b>	Other, specify	1 = yes P12a <input type="checkbox"/> 2 = No	<input type="checkbox"/>

**12A ECS5** 12A. Specify other

**Otro6**

**Conditional (jump other)**

**ECS2F11**

**Conditional (jump not know)**

<b>ECS5 1298</b>	97. Do not know	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 13</b>	Do you know till what age a mother should continue to breastfeed a baby? READ NO OPTIONS RECORD ANSWER IN MONTHS	<b>RECORD # OF MONTHS (0 to 95)</b> 96 = Until the baby stops asking 97 = Other----- <b>P13a</b> 98 = Do not know	<input type="checkbox"/> <input type="checkbox"/>

**Other**

**Conditional (jump other)**

**13A ECS5** 13A. Specify other

<b>ECS5 14</b>	Do you know if there is any reason why an infant under six months receives only breast milk?	1 = yes 2 = No----- <b>P16</b> 8 = Do not know ---- <b>P16</b>	<input type="checkbox"/>
----------------	----------------------------------------------------------------------------------------------	-------------------------------------------------------------------------	--------------------------

**ECS2F21**

**Conditional (ECS514 = 2a † 'P16 and ECS514 = 8a †' P16)**

8. What are the reasons?

**DO NOT READ LIST.**

**WRITE ALL THAT SAID**

**Check the boxes of the answers. READ NO OPTIONS**

**WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION**

**Codes of answers: 1 = Yes, 2 = not mentioned above**

<b>ECS5 1501</b>	Protect the baby from illness	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1502</b>	To help baby to grow better	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1503</b>	Breast milk contains everything the baby needs in the first 6 months	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1504</b>	Mothers Are less likely to become pregnant	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1505</b>	Withholds the mothers period	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1506</b>	Breast milk is clean, safe, and convenient	1 = E 2 = No	<input type="checkbox"/>

<b>ECS5 1507</b>	Breastmilk is economic	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1508</b>	Reduce medical bills	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1597</b>	Other, specify	1 = yes P15a <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>15A ECS5</b>	15A. Specify other		
<b>Otro7</b>		<b>Conditional (jump other)</b>	
<b>ECS2F12</b>		<b>Conditional (jump not know)</b>	
<b>ECS5 1598</b>	97. Do not know	1 = E 2 = No	<input type="checkbox"/>
9. Who decides when your child starts eating solid food, either whole or in pieces?			
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 1601</b>	The child	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1602</b>	The mother	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1603</b>	Midwife / community facilitator / BHT	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1604</b>	Mother in law	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1605</b>	Husband	1 = E 2 = No	<input type="checkbox"/>
<b>ECS5 1697</b>	Other, specify	1 = YES P16a <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>Otro8</b>		<b>Conditional (jump other)</b>	
<b>ECS2F13</b>		<b>Conditional (jump not know)</b>	
<b>ECS5 1698</b>	Do not know	1 = E 2 = No	<input type="checkbox"/>
<b>16A ECS5</b>	16A. Specify other		
<b>ECS5 17</b>	How many times a day should eat a child of 6-8 months?	1 = # of times --- P17a 2 = meals and snacks --- P17b 8 = Do not know ---- P18	<input type="checkbox"/>
<b>descr2</b>		<b>Conditional (ECS517 = 1 â† 'P17a and hides and ECS517c ECS517B)</b>	
<b>Descr1</b>		<b>Conditional (ECS517 = 8 â† 'P18)</b>	
<b>descr</b>		<b>Conditional (ECS517 = 2 â† 'P17b)</b>	
<b>WRITE 1ON QUESTION 17 IF ANSWER BY # OF TIMES. SKIP TO 17th AND RECORD TOTAL MEALS. WRITE 2 IF ANSWER TO QUESTION 17 FOR meals and snacks. SKIP TO QUESTION 17b and 17c and enter the total FOOD AND TOTAL snacks</b>			
<b>17A ECS5</b>	TOTAL: # TIMES A DAY AFTER scoring RESPONSE SKIP TO Q 18		<input type="checkbox"/>
<b>17B ECS5</b>	MEALS # TIMES A DAY		<input type="checkbox"/>
<b>17C ECS5</b>	SNACKS: # TIMES A DAY		<input type="checkbox"/>
<b>ECS5 18</b>	During each meal, how much food you give to a child of 6-8 months? <b>WHAT TO ANSWER WITH MEASURING CUP READ NO OPTIONS</b>	1 = 1/4 cup 2 = 1/2 cup 3 = 3/4 cup 4 = 1 cup 7 = Other, specify.	<input type="checkbox"/>

		P18a 8 = Do not know	
<b>Descr3</b>		<b>Conditional (jump other)</b>	
<b>18A ECS5</b>	18 A. Specify other		
<b>ECS5 19</b>	Is there a food that is damage or bad for child of 6-8 months?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>ECS5 20</b>	How many times a day should eat a child of 9 to 11 months?	1 = # of times --- P20a 2 = Meal and snacks---- P20B 8 = Do not know ---- P21	<input type="checkbox"/>
<b>Descr5</b>		<b>Conditional (ECS520 = 1 â†</b> <b>'P20a</b> <b>and hides and ECS520c</b> <b>ECS520B)</b>	
<b>Descr6</b>		<b>Conditional (ECS520 = 8 â†</b> <b>'P21)</b>	
<b>Descr4</b>		<b>Conditional (ECS520 = 2 â†</b> <b>'P20B)</b>	
<b>WRITE 1 IF ANSWER QUESTION 20 # OF TIMES.</b>			
<b>SKIP to 20a TOTAL MEALS AND WRITE.</b>			
<b>WRITE 2 IF ANSWER TO QUESTION 20 meals and snacks.</b>			
<b>SKIP TO QUESTION 20b and 20c and enter the total MEALS AND TOTAL SNACKS</b>			
<b>20A ECS5</b>	TOTAL: # TIMES A DAY AFTER scoring	RESPONSE SKIP A P21	<input type="checkbox"/>
<b>20B ECS5</b>	MEALS: # TOTAL A DAY		<input type="checkbox"/>
<b>20C ECS5</b>	SNACKS: # TOTAL A DAY		<input type="checkbox"/>
<b>ECS5 21</b>	During each meal, how much food you give to a child <u>9</u> to <u>11</u> months? WHAT TO ANSWER WITH MEASURING CUP READ NO OPTIONS	1 = 1/4 cup 2 = 1/2 cup 3 = 3/4 cup 4 = 1 cup 7 = Other, --P21a 8 = Do not know	<input type="checkbox"/>
<b>Descr7</b>		<b>Conditional (jump other)</b>	
<b>21A ECS5</b>	21A. Specify other		
<b>ECS5 22</b>	Is there food that is damage or bad for child from 9 to 11 months?	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>ECS5 23</b>	How many times a day should eat a child of 12 to 24 months?	1 = # of times -- P23a 2 = Meals and snacks---- P23b 8 = Do not know --- P24	<input type="checkbox"/>
<b>Descr9</b>		<b>Conditional (ECS523 = 1 â†</b> <b>'P23a</b> <b>and hides and ECS523c</b> <b>ECS523B)</b>	
<b>Descr10</b>		<b>Conditional (ECS523 = 8 â†</b> <b>'P24)</b>	
<b>Descr8</b>		<b>Conditional (ECS523 = 2 â†</b> <b>'P23b)</b>	
<b>WRITE 1 IF THE ANSWER FOR QUESTION 23 TOTAL # OF TIMES.</b>			

<b>SKIP to question 23a TOTAL MEALS AND WRITE.</b>			
<b>WRITE 2 IF ANSWER TO QUESTION 23 meals and snacks.</b>			
<b>SKIP TO QUESTION 23b and 23c and enter the total MEALS AND SNACKS.</b>			
<b>23A ECS5</b>	TOTAL: # TIMES A DAY	AFTER scoring RESPONSE SKIP TO P24	<input type="checkbox"/>
<b>23B ECS5</b>	MEALS: # TIMES A DAY		
<b>23C ECS5</b>	PARTS: # TIMES A DAY		<input type="checkbox"/>
<b>ECS5 24</b>	During each meal, how much food you give to a child 12 to 24 months? MEASURING CUP WITH ANSWERING. READ NO OPTIONS	1 = 1/4 cup 2 = 1/2 cup 3 = 3/4 cup 4 = 1 cup 5 = Other, specify -- -P24a 8 = Do not know	<input type="checkbox"/>
<b>Descr11</b>		<b>Conditional (jump other)</b>	
<b>24A ECS5</b>	24 A. Specify other		
<b>ECS52 6</b>	There is a food that damage or bad for of 12 to 24 months	1 = yes 2 = No 8 = Do not know	<input type="checkbox"/>
26. What could happen to a child do not have enough <u>iron</u> (in your diet or through iron supplements)?			
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			
<b>Check the boxes of the answers. READ NO OPTIONS</b>			
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 2701</b>	disorder or learning disabilities	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2702</b>	Inadequate mental development	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2703</b>	Inadequate physical development	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2704</b>	Short stature	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2705</b>	Low defenses against deseases	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2706</b>	Feeling tired	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2707</b>	Can be anemic	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2797</b>	Other, specify	1 = yes -- P27a 2=No	<input type="checkbox"/>
<b>ECS5 27A</b>	27A. Specify other		
<b>Otro9</b>		<b>Conditional (jump other)</b>	
<b>ECS2F14</b>		<b>Condicional (salto no sabe)</b>	
<b>ECS5 2798</b>	97. Do not know	1=yes 2=No	<input type="checkbox"/>
27. Do you know some foods that contain <u>vitamin A</u> ? (Nutrient that protects the body against disease.)			
<b>DO NOT READ LIST.</b>			
<b>WRITE ALL THAT SAID</b>			
<b>Check the boxes of the answers. READ NO OPTIONS</b>			
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 2801</b>	orange or yellow fruits and vegetables	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2802</b>	Green leaves	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2803</b>	Eggs	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2804</b>	Liber	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2805</b>	Breast milk	1=yes 2=No	<input type="checkbox"/>

<b>ECS5 2806</b>	Cow milk	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2807</b>	Meat	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2808</b>	Noodles	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2809</b>	Vegetables (non organge colered)	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 2897</b>	Other, specify	1 = yes -- P28a 2=No	<input type="checkbox"/>
<b>ECS5 28A</b>	28A. Specify other		
<b>Otro10</b>		<b>Conditional (jump other)</b>	
<b>ECS2F15</b>		<b>Conditional (do not know jump)</b>	
<b>ECS5 2898</b>	97. Do not know	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 29</b>	Do you know if the <u>salt</u> is fortified with some vitamins or minerals?	1 = yes 2=No ---P30 8=Do not know-- P30	<input type="checkbox"/>
<b>ECS2F22</b>		<b>Condicional ( ECS529= 2a+P30 y ECS529= 8a+P30 )</b>	
---	29a .Wich?		
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 29A 01</b>	Iodine	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 29A 02</b>	Vitamin A	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 29A 03</b>	Iron	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 29A04</b>	Fluor	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 29A97</b>	Other, specify	1 = yes ---P29b 2=No	<input type="checkbox"/>
<b>ECS5 29B</b>	Specify other		
<b>Otro12</b>		<b>Conditional (jump other)</b>	
<b>ECS2F16</b>		<b>Conditional (do not know jump)</b>	
<b>ECS5 29A98</b>	29 A 1 Do not know	1=yes 2=No	<input type="checkbox"/>
28 How can a mother encourage her children to eat?			
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 3001</b>	speaks to them constantly	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3002</b>	Look at them while eating	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3003</b>	singing and caressing	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3004</b>	Offering different food combinations	1=yes 2=No	<input type="checkbox"/>

<b>ECS5 3005</b>	Offering several flavors food	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3006</b>	Offering foods of different texture	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3007</b>	Feed them slowly and patiently	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3008</b>	Force the child to eat	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3009</b>	Avoid distractions	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3097</b>	Other, specify	1 = yes ---P30a 2=No	<input type="checkbox"/>
<b>ECS5 30A</b>	30A. Specify other		
<b>Otro13</b>		<b>Conditional (jump other)</b>	
<b>ECS2F17</b>		<b>Conditional (do not know jump)</b>	
<b>ECS5 3098</b>	97. Do not know	1=yes 2=No	<input type="checkbox"/>
29 What are the main causes of malnutrition in children?			
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 3101</b>	Do not eat enough / poor appetite	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3102</b>	Do not eat frequently	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3103</b>	The child is sick (diarrhea, sickness, etc..)	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3104</b>	abrupt weaning	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3105</b>	The child is not being given food with love / affection	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3106</b>	Do not eat balanced / Not feeding well	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3107</b>	The food is insufficient	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3108</b>	Lack of hygiene	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3197</b>	Other, specify	1 = yes----P31a 2=No	<input type="checkbox"/>
<b>ECS5 31A</b>	31A. Specify other		
<b>Otro14</b>		<b>Conditional (jump other)</b>	
<b>ECS2F18</b>		<b>Conditional (do not know jump)</b>	
<b>ECS5 3198</b>	97. Do not know	1=SÃ 2=No	<input type="checkbox"/>
30. When should a person wash their hands?			
<b>DO NOT READ LIST. WRITE ALL THAT SAID Check the boxes of the answers. READ NO OPTIONS WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>			
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>			
<b>ECS5 3201</b>	Before eating	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3202</b>	After using the toilet or latrine	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3203</b>	Before giving food to the child	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3204</b>	After changing diapers or clean his poop	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3205</b>	Before preparing and handling food	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3206</b>	After a child has crawled	1=yes 2=No	<input type="checkbox"/>
<b>ECS5 3297</b>	Other specify	1 = yes -- P32a 2=No	<input type="checkbox"/>
<b>ECS5 32A</b>	32A. Specify other		
<b>Otro15</b>		<b>Conditional (jump other)</b>	

<b>ECS2F19</b>		<b>Conditional (do not know jump)</b>
<b>ECS5 3298</b>	97. Do not know	1=yes 2=No <input type="checkbox"/>
31. What forms do you know to purify water?		
<b>DO NOT READ LIST.</b> <b>WRITE ALL THAT SAID</b> <b>Check the boxes of the answers. READ NO OPTIONS</b> <b>WHEN THERE ARE NO MORE ANSWERS MENTIONED score 2 in boxes ABOVE AND GO TO NEXT QUESTION</b>		
<b>Codes of answers: 1 = Yes, 2 = not mentioned above</b>		
<b>ECS5 3301</b>	Strain or filter water	1=yes 2=No <input type="checkbox"/>
<b>ECS5 3302</b>	Boil	1=yes 2=No <input type="checkbox"/>
<b>ECS5 3303</b>	Treat with chlorine	1=yes 2=No <input type="checkbox"/>
<b>ECS5 3304</b>	SODIS method (solar)	1=yes 2=No <input type="checkbox"/>
<b>ECS5 3305</b>	Iodine	1=yes 2=No <input type="checkbox"/>
<b>ECS5 3306</b>	Nothing	1=yes 2=No <input type="checkbox"/>
<b>ECS5 3397</b>	Other, specify	1 = yes -- P33a 2=No <input type="checkbox"/>
<b>ECS5 33A</b>	33A. Specify other	
<b>Otro16</b>		<b>Conditional (jump other)</b>
<b>ECS2F20</b>		<b>Conditional (do not know jump)</b>
<b>ECS5 3398</b>	97. Do not know	1=yes 2=No <input type="checkbox"/>

Household Surveys – Section 1 Metadata

SECTION: BASELINE QUESTIONNAIRE					
Metadata start survey		2010			
SECTION 1: Members of the family		BASELINE QUESTIONNAIRE - 2010			
QUESTION	QUESTION	RESPONSE CODE			
CÓDE					
<b>HOMECODE</b>	<i>Say Có home</i>	[ ] [ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ] [ ]	[ ] [ ]
		MUNICIPALITY CODE	COMMUNITY CODE	SECTOR CODE	HOUSEHOLD number.
<b>CODENC</b>	<i>SURVEY Code</i>	[ ] [ ] [ ] [ ] [ ]			
<b>MI01</b>	<i>1. HOUSEHOLD number.</i>	[ ] [ ]			
<b>MI02</b>	<i>2. Monitor code</i>	[ ]			
<b>MI03</b>	<i>3. EDITOR CODE</i>	[ ]			
<b>MI04</b>	<i>4. INTERVIEWER CODE</i>	[ ] [ ]			
<b>MI05</b>	<i>5. CONVERGENCE CENTER CODE</i>	[ ] [ ] [ ] [ ] [ ]			
<b>MI06</b>	<i>6. HOME MUNICIPALITY LOCATION?</i>	[ ] [ ] [ ] [ ] [ ]			
<b>MI0 7</b>	<i>7. HOME COMMUNITY LOCATION?</i>	[ ] [ ] [ ] [ ] [ ]			
<b>MI08</b>	<i>8. HOME SECTOR LOCATION?</i>	[ ] [ ] [ ] [ ] [ ]			
<b>Interview information</b>					
	<b>Visit number</b>	A. 1 st	B. 2 nd	C. 3 rd	
<b>MI0 9</b>	<b>9. DATE OF INTERVIEW</b>	[ ] [ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ] [ ]	
		gave to month	gave to month	gave to month	
<b>MI10</b>	<b>10. START TIME OF THE VISIT (24 hour format)</b>	[ : ] [ ]	[ : ] [ ]	[ : ] [ ]	
		Min Time	Min Time	Min Time	
<b>MI11</b>	<b>11. INTERVIEWER MUST OCCUR AND ORDER ACCEPTANCE OF MOTHER OR RESPONDENT</b>	1 = Accepts answer questions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Section 2 = accept answer questions <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> interviewee <b>not</b> want to answer the questions. You can <b>not</b> continue the interview in this house, talk to your supervisor.			
<b>MI12</b>	<b>12. TYPE THE NAME OF THE MOTHER OF THE SAMPLE</b>	_____			

A. COLLECT INFORMATION IN THIS SECTION ON NUCLEAR FAMILY MEMBERS					
B. COMPLETE THIS SECTION IN EVERY FAMILY SAMPLE					
C. QUESTIONS TO THE MOTHER OF THE SAMPLE					
I need to list the names of all the people in their family Ms [NAME OF MOTHER SHOWS], including their children / as, stepchildren / as, stepchildren / as, or adopted / as, and the father of them / as (if dad), who live in this house.					
1	Please, list name gave the names of all members of the nuclear family? Complete the list before moving on to the next question				
LIST OF MEMBERS OF THE NUCLEAR FAMILY					
#	FIRST NAME	SECOND NAME	LAST NAME	LAST NAME	PERSONAL IDENTIFICATION CODE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

No 01 MEMBER IN THE FAMILY MEMBERSHIP LIST			PERSONAL IDENTIFICATION CODE	
QUESTION CODE	QUESTIONS	CODE	ANSWER	
S102M01	2 ¿[NAME # 1] is male or female?	1 = M 2 = F	<input type="checkbox"/>	
S103M01	3 What is the relationship of [NAME # 1] with the head / a family?	1 = Head / a family 2 = couple of head 3 = Son or daughter 4 = Parent 5 = Brother / sister 6 = Uncle / 7 = Cousin / 8 = Nephew / 9 = Grandfather / Grand mother 10 = Grandson / Grand sister 11 = Brother in law / sister in law 12 = Father in law / mother 13 = Son / Daughter 14 = Stepson / a 15 = Other relative 16 = Other relative 98 = Do not know	<input type="checkbox"/>	
S104M01	4 how old is [NAME # 1]?	00 = less than 1 year or 95 = 95 or more	<input type="checkbox"/> <input type="checkbox"/>	
S105 M01	5 The age of [NAME # 1],	1 = 0 to 6 an OS	<input type="checkbox"/>	

		is:	2 = more than 6 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> P14a	
<b>S106 M01</b>	6	Who? N is the caretaker of [NAME # 1]? DO NOT READ OUT, ONLY READ ALOUD When in doubt	88 = Passed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 66 = Not living at home <input type="checkbox"/> <input type="checkbox"/> WRITE PERSONAL IDENTIFICATION NUMBER	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>S107 M01</b>	7	Who? N is the biological mother of [name # 1]? DO NOT READ OUT, ONLY READ ALOUD When in doubt	88 = Passed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 66 = Not living at home <input type="checkbox"/> <input type="checkbox"/> WRITE PERSONAL IDENTIFICATION NUMBER	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>S108 M01</b>	8	Who? N is the biological father of [name # 1]? DO NOT READ OUT, ONLY READ ALOUD When in doubt	88 = Passed <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 66 = Not living at home <input type="checkbox"/> <input type="checkbox"/> WRITE PERSONAL IDENTIFICATION NUMBER	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>S109M01</b>	9	date of birth of [NAME # 1]? WRITE WHAT IT SAYS ON THE DATE THE REAL MOTHER	WRITE Tell, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	<input type="checkbox"/> <input type="checkbox"/> Gave a <input type="checkbox"/> <input type="checkbox"/> Months <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Year
<b>S110M01</b>	10	Do you have a vaccination card to confirm the date of birth of [NAME # 1]?	1 = Yes 2 = No <input type="checkbox"/> P11b	<input type="checkbox"/>
<b>S111AM01</b>	11th	Do I see the vaccination card?	1 = Yes, and the date is the same date <input type="checkbox"/> <input type="checkbox"/> P12 2 = Yes, but it is <input type="checkbox"/> <input type="checkbox"/> date P11b 3 = No <input type="checkbox"/> P11b	
<b>S111 BM01</b>	11b	Do you have another document to confirm the date of birth [NAME # 1]?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> P12	<input type="checkbox"/>
<b>S111C M01</b>	11c	What is the other document to confirm the date of birth [NAME # 1]?	1 = <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> P12 2 = P12 <input type="checkbox"/> Carné 3 = P12 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Ballot 4 = P12 Certification <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 7 = other document <input type="checkbox"/> <input type="checkbox"/> P11D	<input type="checkbox"/>
<b>S111D M01</b>	11d	Other, Specify _____		<input type="checkbox"/>
<b>S112M01</b>	12	How many months has [NAME # 1]?	Number. months	<input type="checkbox"/>
<b>S113M01</b>	13	¿[NAME # 1] is less than 60 months?	1 = Yes p14 and note <input type="checkbox"/> for anthropometry 2 = No <input type="checkbox"/> <input type="checkbox"/> P23	<input type="checkbox"/> <input type="checkbox"/>
<b>S114M01</b>	14	¿[NAME # 1] is less than 24 months?	1 = Yes <input type="checkbox"/> <input type="checkbox"/> P23 and note to sections aimed at <24m 2 = No <input type="checkbox"/> <input type="checkbox"/> P23	<input type="checkbox"/>
<b>AM01 S114</b>	14th	¿[NAME # 1] is the mother's home or is a carer?	1 = Yes P15 2 = No <input type="checkbox"/> <input type="checkbox"/> P23	
<b>S11 5M01</b>	15	What is the status of [NAME # 1]?	1 = Kingdom / a 2 = Married / a 3 = Separated / divorced ao / a 4 = Widowed / a	<input type="checkbox"/>

			5 = Single / a 7 = Other 8 = Do not know	
<b>S11 6M01</b>	16	What Indian group belongs [NAME # 1]?	1 = Maya 2 = Ladinos 7 = <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> A P16a 8 = Do not know	<input type="checkbox"/>
<b>S11 6AM01</b>	16th	other Specify		<input type="checkbox"/>
<b>S11 7M01</b>	17	What language does speak [NAME # 1] at home?	1 = not yet spoken <input type="checkbox"/> <input type="checkbox"/> P23 2 = Spanish <input type="checkbox"/> <input type="checkbox"/> P20 3 = Speak another language 4 = Q'eqchi ' 5 = Poqomchi 8 = Do not know	<input type="checkbox"/>
<b>S11 8M01</b>	18	¿[NAME # 1] understand Spanish?	1 = Yes 2 = No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
<b>S11 9M01</b>	19	¿[NAME # 1] speaks Spanish?	1 = Yes <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2 = No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
<b>S1 20M01</b>	20	besides Spanish, does [NAME # 1] know another language?	1 = Yes <input type="checkbox"/> P20a 2 = No <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
<b>S1 20AM01</b>	20th	Wich?	1 = not talking yet 2 = Spanish 3 = Speak another language 4 = Q'eqchi ' 5 = Poqomchi 8 = Do not know	<input type="checkbox"/>
<b>S1 21M01</b>	21	¿[NAME # 1] can read in Spanish?	1 = Yes 2 = No	<input type="checkbox"/>
<b>S1 22M01</b>	22	¿[NAME # 1] can read in Q'eqchi '?	1 = Yes 2 = No	<input type="checkbox"/>
<b>S1 23M01</b>	23	<b>INFORMATION</b> Shortness of another family?	1 = Yes <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> member 2 = No <input type="checkbox"/> <input type="checkbox"/> P24	<input type="checkbox"/>
<b>So that we are sure that the list is complete</b>				
<b>S1 24M01</b>	24	Are there other people (whether children or adults) who have not been listed, which are part of the family and live at home?	1 = Yes <input type="checkbox"/> <input type="checkbox"/> return to the last row that filled in the initial list and then fill from question 2 for people who needed 2 = No	<input type="checkbox"/>
<b>S125 M01</b>	25	How many mothers (guardians and mothers) there with children / as under 60 months?	<input type="text"/>   <input type="text"/> MOTHERS # OF TIMES APPLICABLE SECTION 4 AND # OF PEOPLE IN SECTION 11 (ANTHROPOMETRY MOTHER)	
<b>S125A M01</b>	25a	How Many mothers (guardians and mothers) there with children / as less than 24 months?	<input type="text"/>   <input type="text"/> MOTHERS # OF TIMES APPLICABLE SECTION 4	
<b>S126 M01</b>	26	How many boys / girls under 60 months there?	<input type="text"/>   <input type="text"/> CHILDREN # OF PEOPLE IN SECTION 10 (ANTHROPOMETRY CHILDREN)	
<b>S127</b>	27	How Many boys / girls	<input type="text"/>   <input type="text"/> CHILDREN	

<b>M01</b>	under 24 months there?	# OF TIMES MUST apply Sections 5, 6, 7, and 8	
<b>ACTIVE FILTER FOR DISTINGUISHING HOMES</b>			
<b>S128</b>	28	Does anyone in the family who is currently receiving PROCOMIDA program?	1 = Yes <input type="checkbox"/> <input type="checkbox"/> pass the section 12 PROCOMIDA food consumption. 2 = No <input type="checkbox"/>
<b>FILTER FOR DISTINGUISHING households participating in another program</b>			
<b>S129</b>	29	Is anyone in the family participating in some other project INSTITUTION?	1 = Yes <input type="checkbox"/> <input type="checkbox"/> pass Section 13 of the presence of other projects. 2 = No <input type="checkbox"/>

Household Surveys – Sections 2 and 3 Dietary Diversity and Food Security

SECTION 2: Dietary Diversity Household		BASELINE QUESTIONNAIRE - 2010	
SECTION 3: Food Security		BASELINE QUESTIONNAIRE - 2010	
S2	SURVEY CODE	[ ][ ][ ][ ]	
CODENC		[ ]	
S2CODPER	PERSONAL IDENTIFICATION CODE the cook more often in the nuclear family	[ ][ ][ ][ ][ ] [ ][ ][ ][ ]	
<b>A. THESE QUESTIONS GATHER INFORMATION ON THE family dietary diversity <u>during the day</u> and last night.</b>			
<b>B. COMPLETE THIS SECTION IN EVERY FAMILY SAMPLE</b>			
<b>C. QUESTIONS TO THE PERSON MOST OFTEN IN KITCHEN HOUSE (MUST BE PART OF THE NUCLEAR FAMILY): [NAME OF PERSON IN KITCHEN HOUSE FREQUENTLY].</b>			
S201	1 Who? Nuclear family n kitchen more often? PERSON TO BE PART OF THE NUCLEAR FAMILY	WRITE NAME	_____
S202	2 Is this [NAME OF PERSON KITCHEN]?	1 = Yes → Continue with the interview 2 = No → ask when will you return? and appointment	[ ]
Now I would like to ask some questions [NAME OF PERSON KITCHEN] on the types of food that you or any member of his family ate during the day and last night.			
<b>READ THE LIST OF FOODS. MUST COMPLETE LIST AND ASK FOR ALL FOOD. DO NOT MODIFY THE QUESTIONS. The answer is "yes" if a household member APPOINTED EAT FOOD. THE ANSWER IS "NO" IF no household member APPOINTED ATE THE FOOD.</b>			
QUESTION CODE	READ LIST OF FOOD	CODE	ANSWER
	You ate [FOOD], during the day and last night		
S2A	A Some Bread, tortillas, pasta, rice, crackers or other food made from sorghum, maize, rice, or wheat?	1 = Yes 2 = No	[ ]
S2B	B Zucchini, carrots, squash, sweet potatoes or other vegetables that are yellow or orange inside?	1 = Yes 2 = No	[ ]
S2C	C Potatoes, Taro, cassava, or any other food ichintal from roots or tubers?	1 = Yes 2 = No	[ ]
S2D	D ? Dark green leafy vegetables such as cassava leaves, bean leaves, kale, spinach, pepper?	1 = Yes 2 = No	[ ]
S2E	E Do other vegetables?	1 = Yes 2 = No	[ ]
S2F	F Yellow or orange fruits? Inside and ripe mangoes, ripe papayas, sapota Melo?	1 = Yes 2 = No	[ ]
S2G	G Any other fruit?	1 = Yes 2 = No	[ ]
S2H	H ? Beef, pork, lamb, goat, rabbit, wild game, chicken, duck or other poultry, liver, kidney, heart or other giblets?	1 = Yes 2 = No	[ ]
S2I	I Eggs?	1 = Yes 2 = No	[ ]
S2J	J Fish or shellfish? Fresh, fried, or dried?	1 = Yes 2 = No	[ ]
S2K	K Food? Like beans, peas, lentils, beans or nuts?	1 = Yes 2 = No	[ ]
S2L	L Cheese, cottage cheese, cream, yogurt	1 = Yes 2 = No	[ ]

		or other foods made from milk?		
<b>S2M</b>	M	Did you use and / or given oil, margarine, shortening, butter or foods with these things?	1 = Yes 2 = No	<input type="checkbox"/>
<b>S2N</b>	N	Sugar or honey?	1 = Yes 2 = No	<input type="checkbox"/>
<b>S2O</b>	O	Do other foods, such as condiments, coffee, tea?	1 = Yes 2 = No	<input type="checkbox"/>

**A. GATHER THESE QUESTIONS ON FOOD SAFETY INFORMATION FAMILY IN THE LAST 4 WEEKS**

**B. COMPLETE THIS SECTION IN EVERY FAMILY N SAMPLE**

**C. QUESTIONS TO THE PERSON MOST OFTEN IN KITCHEN HOUSE: [NAME OF PERSON IN KITCHEN HOUSE FREQUENTLY].**

Now I would like to ask some questions [NAME OF PERSON KITCHEN] about what happened in the past 4 weeks.

QUESTION CODE		QUESTION	CODE	ANSWER
<b>S301</b>	1	In last four weeks, there was ever anything or absolutely any food, whether for lunch, breakfast or dinner in your home due to lack of money to buy them?	1 = Yes 2 = No → P2	<input type="checkbox"/>
<b>S301A</b>	1A	How many times someone has this happened? READ NO OPTIONS	1 = Rarely (1 or 2 times in the last 4 weeks) 2 = Sometimes (3 to 10 times in the last 4 weeks) 3 = Often (more than 10 times in the last 4 weeks)	<input type="checkbox"/>
<b>S302</b>	2	In last four weeks, did you or any member of the family went to sleep at night hungry because there was not enough food?	1 = Yes 2 = No → P3	<input type="checkbox"/>
<b>S302A</b>	2A	How many times someone has this happened? READ NO OPTIONS	1 = Rarely (1 or 2 times in the last 4 weeks) 2 = Sometimes (3 to 10 times in the last 4 weeks) 3 = Often (more than 10 times in the last 4 weeks)	<input type="checkbox"/>
<b>S303</b>	3	In last four weeks, did you or any household member go a whole day without eating anything because there was not enough food?	1 = Yes 2 = No → Next section	<input type="checkbox"/>
<b>S303A</b>	3A	How many times someone has this happened? READ NO OPTIONS	1 = Rarely (1 or 2 times in the last 4 weeks) 2 = Sometimes (3 to 10 times in the last 4 weeks) 3 = Often (more than 10 times in the last 4 weeks)	<input type="checkbox"/>



Household Surveys – Section 4 Knowledge of Mother

S4CODENC				[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
<b>A. These questions are about KNOWLEDGE OF THE MOTHER OF CHILDREN UNDER 24 MONTHS.</b>				
<b>B. PDA FILTER: Is there a child under 24 months old? 1. → CONTINUE IF, 2. NO → NEXT SECTION</b>				
<b>C. QUESTIONS TO THE MOTHER OF A CHILD UNDER 24 MONTHS: [NAME OF THE MOTHER OF THE CHILD / A]</b>				
<b>Now I would like to ask some questions [NAME OF MOTHER CHILD] on how to care for the health of mothers and their children</b>				
QUESTION CODE	QUESTION	ANSWER	Code	ANSWER
1	Occasionally pregnant women require immediate medical attention (a doctor or nurse). Do you know what are the warning signs (symptoms) that tell a pregnant woman should receive immediate medical attention?			
<b>DO NOT READ LIST. DO NOT MENTION ANY DANGER SIGNS (SYMPTOM) WRITE ONLY SIGNS (SYMPTOMS) MENTIONED WITHOUT READING. WHEN THE MOTHER FINISHES MENTIONING SIGNS, -&gt; PROBE: ANY OTHER SIGN? WHEN THERE ARE NO MORE SIGNS MENTIONED, MARK A 2 IN THE SIGNS NOT MENTIONED AND GO TO QUESTION 2</b>				
<b>Response code: 1 = Yes, 2 = not mentioned</b>				
<b>S401A</b>	1a Hemorrhage or vaginal bleeding	1 = Yes 2 = No		[ ]
<b>S401B</b>	1b Severe pain in the stomach	1 = Yes 2 = No		[ ]
<b>S401C</b>	1c Persistent back pain	1 = Yes 2 = No		[ ]
<b>S401D</b>	1d Leakage of clear fluid out through the vagina (leakage of amniotic fluid)	1 = Yes 2 = No		[ ]
<b>S401E</b>	1e Puffiness of hands, face, or body	1 = Yes 2 = No		[ ]
<b>S401F</b>	1f Severe headache or blurred vision	1 = Yes 2 = No		[ ]
<b>S401G</b>	1g Continuous contractions before 37 weeks	1 = Yes 2 = No		[ ]
<b>S401H</b>	1h No fetal movement in pregnancies of 5 months and older	1 = Yes 2 = No		[ ]
<b>S401i</b>	1i Breathing is difficult	1 = Yes 2 = No		[ ]
2	Occasionally the children will suffer from severe illnesses that require immediate medical attention (from a doctor or nurse). Do you know what the warning signs			

(symptoms) are that indicate that a newborn child should receive medical attention?

**DO NOT READ LIST.**

**DO NOT MENTION ANY DANGER SIGNS (SYMPTOM)**

**WRITE ONLY SIGNS (SYMPTOMS) MENTIONED WITHOUT READING.**

**WHEN THE MOTHER FINISHES MENTIONING SIGNS, -> PROBE: ANY OTHER SIGN?**

**WHEN THERE ARE NO MORE SIGNS MENTIONED, MARK A 2 IN THE SIGNS NOT MENTIONED AND GO TO QUESTION 3**

**Response codes: 1 = Yes, 2 = not mentioned**

<b>S402A</b>	2a	It is very small	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402B</b>	2b	It is very cold	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402C</b>	2c	It is purple	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402D</b>	2d	Breathing is difficult	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402E</b>	2e	It cannot breastfeed	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402F</b>	2f	It is very hot or feverish	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402G</b>	2g	It has red eyes with secretions	1 = Yes 2 = No	<input type="checkbox"/>
<b>S402H</b>	2h	Red navel, extending to the skin, with bad odor and pus	1 = Yes 2 = No	<input type="checkbox"/>

3 Occasionally the children will suffer from severe illnesses that require immediate medical attention (from a doctor or nurse). Do you know what are the warning signs (symptoms) that indicate that a child should receive immediate medical attention?

**DO NOT READ LIST.**

**DO NOT MENTION ANY DANGER SIGNS (SYMPTOM)**

**WRITE ONLY SIGNS (SYMPTOMS) MENTIONED WITHOUT READING.**

**WHEN THE MOTHER FINISHES MENTIONING SIGNS, -> PROBE: ANY OTHER SIGN?**

**WHEN THERE ARE NO MORE SIGNS MENTIONED, MARK A 2 IN THE SIGNS NOT MENTIONED AND GO TO QUESTION 4**

**Response codes: 1 = Yes, 2 = not mentioned**

<b>S403A</b>	3a	It cannot breastfeed, take in liquids or eat	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403B</b>	3b	No improvement or becomes more ill	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403C</b>	3c	Fever	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403D</b>	3d	Fast breathing	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403E</b>	3e	Shortness of breath, difficult breathing	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403F</b>	3f	Blood in the stool (bowel movement)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403G</b>	3g	Vomits everything	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403H</b>	3h	Has attacks	1 = Yes 2 = No	<input type="checkbox"/>
<b>S403I</b>	3i	Faints	1 = Yes 2 = No	<input type="checkbox"/>

<b>S404</b>	4	Do you think that when a child is sick, should it be given less <u>food</u> , same amount, or more than usual? <b>DO NOT READ OPTIONS</b>	1 = Less than usual 2 = the same amount 3 = More than usual 8 = Do not know	<input type="checkbox"/>
<b>S405</b>	5	Do you think that when a Nin or / is sick / a, should be given less <u>fluids</u> , the same amount or more than usual? <b>DO NOT READ OPTIONS</b>	1 = Less than usual 2 = the same amount 3 = More than usual 8 = Do not know	<input type="checkbox"/>
<b>S406</b>	6	Do you think that when a Nin or / a is <u>recovering</u> from an illness, should be given less food, same amount, or more than usual? <b>DO NOT READ OPTIONS</b>	1 = Less than usual 2 = the same amount 3 = More than usual 8 = Do not know	<input type="checkbox"/>
	7	In addition to what I mentioned about food and fluids <b>[MENTION Answers Questions 4 and 5]</b> , when the child is sick, what else should a mother do when a (a) child / has diarrhea <b>WRITE ALL ANSWERS THAT THE MOTHER MENTIONS CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS</b>		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOTMENTIONED AND GO TO QUESTION 8</b>				
<b>Response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S40701</b>		1) Oral Rehydration Salts (ORS)	1 = Yes <input type="checkbox"/> P11 2 = No	<input type="checkbox"/>
<b>S40702</b>		2) Home made rehydration serum	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40703</b>		3) Continue to breastfeed	1 = Yes 2 = No	<input type="checkbox"/>

<b>S40704</b>		4) Breastfeed more than normal	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40705</b>		5) Give syrups	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40706</b>		6) Give traditional medicine	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40707</b>		7) Give boiled, chlorinated or bottled water	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40708</b>		8) Give carrot juice or rice water	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40709</b>		9) Nothing	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40710</b>		10) Take you to a health center	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40711</b>		11) Breastfeed less than usual	1 = Yes 2 = No	<input type="checkbox"/>
<b>S40797</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P7a 2 = No	<input type="checkbox"/>
<b>S40798</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S407A</b>	7a	Specify other _____		<input type="checkbox"/>
<b>S408</b>	8	Have you heard talk about a product called serum (Oral Rehydration Salts ORS-) which is available for the treatment of diarrhea?	1 = Yes <input type="checkbox"/> P11 2 = No	<input type="checkbox"/>
<b>S408A</b>	8a	Have you ever seen an envelope like this one? SHOW THE ORS ENVELOPE	1 = Yes 2 = No	<input type="checkbox"/>
	11	What can a mother do to prevent diarrhea in children? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOTMENTIONED AND GO TO QUESTION 12</b>				
<b>Response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S41101</b>		1) Wash hands	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41102</b>		2) Keep their nails short	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41103</b>		3) The child must wear	1 = Yes 2 = No	<input type="checkbox"/>

		pants		
<b>S41104</b>		4) Wash fruits and vegetables	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41105</b>		5) Child should wear sandals or shoes	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41106</b>		6) Giving the children boiled, SODIS, bottled or chlorinated water	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41107</b>		7) Keep the child's clothes clean	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41108</b>		8) Don't have children sit on the floor	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41109</b>		9) Don't have children play with water	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41197</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P11a 2 = No	<input type="checkbox"/>
<b>S41198</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S411A</b>	11th	Specify other _____		<input type="checkbox"/>
<b>S412</b>	12	After the baby is born, within what timeframe should it breastfeed the first time? READ NO OPTIONS	1 = Immediately 2 = Less than one hour 3 = More than one hour but less than 8 hours 4 = More than 8 hours but less than 24 hours 5 = One day 6 = More than a day 7 = Other, <input type="checkbox"/> P12a 8 = Do not know	<input type="checkbox"/>
<b>S412A</b>	12a	Specify other _____		<input type="checkbox"/>
	13	What should a mother do with the first milk or colostrum? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 14</b>				
<b>Response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S41301</b>		1) Throw it away and start breastfeeding later	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41302</b>		2) Breastfeed	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41307</b>		7) Other, specify	1 = Yes <input type="checkbox"/> P13a 2 = No	<input type="checkbox"/>
<b>S41308</b>		8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S413A</b>	13a	Specify other _____		<input type="checkbox"/>
	14	What happens to a (a) baby if a mother gives colostrum (or first milk)? WRITE ALL THE ANSWERS.		

CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS

**DO NOT READ LIST.  
WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 15**

**Response codes: 1 = Yes, 2 = not mentioned**

<b>S41401</b>	1) Baby gets nutrients	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41402</b>	2) Baby gets sick	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41403</b>	3) It helps baby to be more healthy	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41404</b>	4) will increase baby's defenses	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41405</b>	5) It will make the baby fat	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41406</b>	6) Nothing	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41407</b>	7) Other, specify	1 = Yes <input type="checkbox"/> P14a 2 = No	<input type="checkbox"/>
<b>S41408</b>	8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S414A</b>	14a Specify other _____		<input type="checkbox"/>

15 Do you know when a mother should breastfeed a baby?

WRITE ALL THE ANSWERS.

CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS

**DO NOT READ LIST.  
WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 17**

**Response codes: 1 = Yes, 2 = not mentioned**

<b>S41501</b>	1) When the baby wants	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41502</b>	2) When she sees that the baby is hungry	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41503</b>	3) When the baby cries	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41504</b>	4) When the baby searches the breast	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41507</b>	7) Other, specify	1 = Yes <input type="checkbox"/> P15a 2 = No	<input type="checkbox"/>
<b>S41508</b>	8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S415A</b>	15a Specify other _____		<input type="checkbox"/>

17 If a mother of a baby under 6 months does not have or think does not have enough milk, what should she do?

WRITE ALL THE ANSWERS.

CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS

**DO NOT READ LIST.  
WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 18**

**Response codes: 1 = Yes, 2 = not mentioned**

<b>S41701</b>	1) Breastfeed more frequently	1 = Yes 2 = No	<input type="checkbox"/>
---------------	-------------------------------	----------------	--------------------------

<b>S41702</b>		2) Give other liquids or foods	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41703</b>		3) The mother needs to take more water	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41704</b>		4) The mother should eat more	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41705</b>		5) The mother should eat better	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41706</b>		6) The mother should drink liquids	1 = Yes 2 = No	<input type="checkbox"/>
<b>S41707</b>		7) Other, specify	1 = Yes <input type="checkbox"/> P17a 2 = No	<input type="checkbox"/>
<b>S41708</b>		8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S417A</b>	17a	Specify other _____		<input type="checkbox"/>
<b>S418</b>	18	Can you give water to children under 6 months of age?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S419</b>	19	Can you give other liquids to children under 6 months of age in addition to breast milk?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S420</b>	20	Do you think a mother who is breastfeeding a child under 6 months should stop breastfeeding if she becomes pregnant again?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
	21	If a mother has a child younger than 6 months and cannot always be with the baby, what can be given to the baby when it gets hungry? <b>WRITE ALL THE ANSWERS.</b> <b>CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS</b>		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 22</b>				
<b>Response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S42101</b>		1) Extracted breast milk	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42102</b>		2) Milk pot	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42103</b>		3) Cow milk	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42104</b>		4) special formula milk for baby s	1 = Yes 2 = No	<input type="checkbox"/>

S42105		5) Atol (porridge)	1 = Yes 2 = No	<input type="checkbox"/>
S42106		6) Pan	1 = Yes 2 = No	<input type="checkbox"/>
S42107		7) Fruit	1 = Yes 2 = No	<input type="checkbox"/>
S42108		8) Tortilla	1 = Yes 2 = No	<input type="checkbox"/>
S42109		9) Water mass	1 = Yes 2 = No	<input type="checkbox"/>
S42197		97) Other, specify	1 = Yes <input type="checkbox"/> P21a 2 = No	<input type="checkbox"/>
S42198		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
S421A	21a	Specify other _____		<input type="checkbox"/>
S422	22	Besides breast milk, At what age should you start feeding and food (on) baby?	WRITE THE ANSWER IN MONTHS. 98 = DO NOT KNOW	<input type="text" value="0"/>   <input type="text" value="6"/>
	23	Besides breast milk what should be the first foods you should give a (a) baby? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 25</b>				
<b>response codes: 1 = Yes, 2 = not mentioned</b>				
S42301		1) Porridge (including Incaparina and Vitacereal)	1 = Yes 2 = No	<input type="checkbox"/>
S42302		2) Fruit	1 = Yes 2 = No	<input type="checkbox"/>
S42303		3) Vegetables	1 = Yes 2 = No	<input type="checkbox"/>
S42304		4) Beans	1 = Yes 2 = No	<input type="checkbox"/>
S42305		5) Rice	1 = Yes 2 = No	<input type="checkbox"/>
S42306		6) Tortilla	1 = Yes 2 = No	<input type="checkbox"/>
S42307		7) Cereals	1 = Yes 2 = No	<input type="checkbox"/>
S42308		8) Eggs	1 = Yes 2 = No	<input type="checkbox"/>
S42309		9) Soup / Broth	1 = Yes 2 = No	<input type="checkbox"/>
S42397		97) Other, specify	1 = Yes <input type="checkbox"/> P23a 2 = No	<input type="checkbox"/>
S42398		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
S423A	23a	Specify other _____		<input type="checkbox"/>
	25	Do you know for what reasons a mother may stop breastfeeding a baby? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 27</b>				
<b>response codes: 1 = Yes, 2 = not mentioned</b>				
S42501		1) cracked nipples	1 = Yes 2 = No	<input type="checkbox"/>
S42502		2) Pregnancy	1 = Yes 2 = No	<input type="checkbox"/>
S42503		3) The birth of	1 = Yes 2 = No	<input type="checkbox"/>

		another baby		
<b>S42504</b>		4) Baby's interests in other foods	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42505</b>		5) Illness of mother	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42506</b>		6) Strong feelings of the mother (which can be passed to her baby)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42507</b>		7) Mastitis	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42508</b>		8) The baby is big	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42509</b>		9) The baby does not want to	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42597</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P25a 2 = No	<input type="checkbox"/>
<b>S42598</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S425A</b>	25a	Specify other _____		<input type="checkbox"/>
<b>S427</b>	27	Do you know till what age a mother should continue to breastfeed a baby? READ NO OPTIONS WRITE ANSWER IN MONTHS	WRITE # OF MONTHS (0 to 95) 96 = Until the baby stops asking 97 = Other → P27a 98 = Do not know	<input type="checkbox"/> <input type="checkbox"/>
<b>S427A</b>	27a	Specify other _____		<input type="checkbox"/>
<b>S428</b>	28	Do you know if there is any reason why an infant under six months receives only breast milk?	1 = Yes 2 = No → P30 8 = Do not know → P30	<input type="checkbox"/>
	29	What are the reasons? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST. WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 30</b>				
<b>response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S42901</b>		1) Protect the baby from illness	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42902</b>		2) To help the baby grow better	1 = Yes 2 = No	<input type="checkbox"/>

<b>S42903</b>		3) Breast milk contains everything a baby needs in the first 6 months	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42904</b>		4) Mothers are less likely to become pregnant	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42905</b>		5) Withholds the mothers period	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42906</b>		6) breast milk is clean, safe, and convenient	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42907</b>		7) breast milk is economical	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42908</b>		8) Reduce the medical bills	1 = Yes 2 = No	<input type="checkbox"/>
<b>S42997</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P29a 2 = No	<input type="checkbox"/>
<b>S42998</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S429A</b>	29a	Specify other _____		<input type="checkbox"/>
	30	Who decides when your child starts eating solid food, either whole or in pieces? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 31</b>				
<b>response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S43001</b>		1) The child	1 = Yes 2 = No	<input type="checkbox"/>
<b>S43002</b>		2) The mother	1 = Yes 2 = No	<input type="checkbox"/>
<b>S43003</b>		3) Midwife	1 = Yes 2 = No	<input type="checkbox"/>
<b>S43004</b>		4) Mother in law	1 = Yes 2 = No	<input type="checkbox"/>
<b>S43005</b>		5) Spouse	1 = Yes 2 = No	<input type="checkbox"/>
<b>S43007</b>		7) Other, specify	1 = Yes P30A <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>S43008</b>		8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S430A</b>	30a	Specify other _____		<input type="checkbox"/>
<b>S431</b>	31	If a mother is ill (eg influenza, diarrhea, or cough) and has a baby less than two years, can she continue to breastfeed?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S432</b>	32	Do you know if a child under	1 = Yes 2 = No	<input type="checkbox"/>

		12 months can eat without help?	8 = Do not know	
<b>S433A</b>	33a	Besides breast milk, At what age should you start giving a baby liquids? IF ANSWER IS IN YEARS, CONVERT TO MONTHS	WRITE THE ANSWER IN MONTHS 96 = When it wants 98 = Do not know	<input type="text"/>   <input type="text"/>
<b>S433B</b>	33b	Besides breast milk, At what age can a baby eat soft foods? IF ANSWER IS IN YEARS, CONVERT TO MONTHS	WRITE ANSWER IN MONTHS 96 = When it wants 98 = Do not know	<input type="text"/>   <input type="text"/>
<b>S433C</b>	33c	Besides breast milk, At what age can a baby eat the same foods as the family eats? IF ANSWER IS IN YEARS, CONVERT TO MONTHS	WRITE ANSWER IN MONTHS 96 = When it wants 98 = Do not know	<input type="text"/>   <input type="text"/>
<b>S434</b>	34	How many times should a child of 6-8 months eat per day?	1 = # of times → P34a 2 = Meals and snacks → P34b 8 = Do not know → P35	<input type="text"/>
<b>Enter "1" in question 34 IF# OF TIMES IS ANSWERED. SKIP TO 34a AND RECORD TOTAL MEALS.</b>				
<b>Enter "2" IF ANSWER TO QUESTION 34 was given in meals and snacks. SKIP TO QUESTION 34b and enter total MEALS and 34c the TOTAL SNACKS.</b>				
<b>S434A</b>	34a		TOTAL: # TIMES per day AFTER RESPONSE → P35	<input type="text"/>
<b>S434B</b>	34b		MEALS: TOTAL # PER DAY	<input type="text"/>
<b>S434C</b>	34c		SNACKS: TOTAL # PER DAY	<input type="text"/>
<b>S435</b>	35	During each meal, how much food you give to a child of 6-8 months? SHOW MEASURING CUP FOR ANSWER READ NO	1 = 1/4 cup 2 = 1/2 cup 3 = 3/4 cup 4 = 1 cup 7 = Other, specify. P35A <input type="checkbox"/> 8 = Do not know	<input type="text"/>

OPTIONS			
S435A	35a	Specify other	[ ]
S440	40	How many times you should a child <u>9 to 11 months</u> eat per day? 1 = # of times → P40A 2 = Meals and snacks → P40B 8 = Do not know → Q41	[ ]
<p><b>Enter "1" in question 40 IF# OF TIMES IS ANSWERED. SKIP TO 40a AND RECORD TOTAL MEALS.</b></p> <p><b>Enter "2" IF ANSWER TO QUESTION 40 was given in meals and snacks. SKIP TO QUESTION 40b and enter total MEALS and 40c the TOTAL SNACKS.</b></p>			
S440A	40a	TOTAL: # TIMES per day AFTER RESPONSE → P41	[ ]
S440B	40b	MEALS: TOTAL # PER DAY	[ ]
S440C	40c	SNACKS: TOTAL # PER DAY	[ ]
S441	41	During each meal, how much food you give to a child <u>9 to 11 months</u> ? 1 = 1/4 cup 2 = 1/2 cup 3 = 3/4 cup 4 = 1 cup 7 = Other, → P41a 8 = Do not know SHOW MEASURING CUP FOR ANSWER READ NO OPTIONS	[ ]
S441A	41a	Specify other	[ ]
S446	46	How many times should a child / a <u>12 to 24 months</u> eat per day? 1 = # of times 2 = Parts → P46a and P46b luncheons → 8 = Do not know → P47	[ ]
<p><b>Enter "1" in question 46 IF# OF TIMES IS ANSWERED. SKIP TO 46a AND RECORD TOTAL MEALS.</b></p> <p><b>Enter "2" IF ANSWER TO QUESTION 46 was given in meals and snacks. SKIP TO QUESTION 46b and enter total MEALS and 46c the TOTAL SNACKS.</b></p>			
S446A	46a	TOTAL: # TIMES Tell RESPONSE AFTER WRITE, SKIP TO P47	[ ]
S446B	46b	TIMES FOOD # Tell	[ ]
S446C	46c	PARTS: # of times gave	[ ]
S447	47	During each meal, how much food you give to a child <u>12 to 24 months</u> ? 1 = 1/4 cup 2 = 1/2 cup 3 = 3/4 cup 4 = 1 cup 7 = Other, specify → P47a 8 = Do not know SHOW MEASURING CUP FOR ANSWER READ NO OPTIONS	[ ]

<b>S4 47TH</b>	47a	Specify other _____	<input type="checkbox"/>
	50	What could happen to a (a) child (a) do not have enough <u>iron</u> (in your diet or through iron supplements)? <b>WRITE ALL THE ANSWERS.</b> <b>CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS</b>	
<b>DO NOT READ LIST.</b>			
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 51</b>			
<b>response codes: 1 = Yes, 2 = not mentioned</b>			
<b>S45001</b>		1) disorder or learning disabilities	1 = Yes 2 = No <input type="checkbox"/>
<b>S45002</b>		2) Inadequate mental development	1 = Yes 2 = No <input type="checkbox"/>
<b>S45003</b>		3) Inadequate physical development	1 = Yes 2 = No <input type="checkbox"/>
<b>S45004</b>		4) Short stature	1 = Yes 2 = No <input type="checkbox"/>
<b>S45005</b>		5) low defenses against diseases	1 = Yes 2 = No <input type="checkbox"/>
<b>S45006</b>		6) Feeling tired	1 = Yes 2 = No <input type="checkbox"/>
<b>S45007</b>		7) Can be anemic	1 = Yes 2 = No <input type="checkbox"/>
<b>S45097</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P50a 2 = No <input type="checkbox"/>
<b>S45098</b>		98) Do not know	1 = Yes 2 = No <input type="checkbox"/>
<b>S450A</b>	50a	Specify other _____	<input type="checkbox"/>
	51	Do you know some foods that contain <u>vitamin A</u> ? (Nutrient that protects the body against disease.) <b>WRITE ALL THE ANSWERS.</b> <b>CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS</b>	
<b>DO NOT READ LIST.</b>			
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 52</b>			
<b>response codes: 1 = Yes, 2 = not mentioned</b>			
<b>S45101</b>		1) orange or yellow fruits and vegetables	1 = Yes 2 = No <input type="checkbox"/>
<b>S45102</b>		2) Green leaves	1 = Yes 2 = No <input type="checkbox"/>
<b>S45103</b>		3) Eggs	1 = Yes 2 = No <input type="checkbox"/>
<b>S45104</b>		4) Liver	1 = Yes 2 = No <input type="checkbox"/>
<b>S45105</b>		5) Breast milk	1 = Yes 2 = No <input type="checkbox"/>
<b>S45106</b>		6) Cow milk	1 = Yes 2 = No <input type="checkbox"/>
<b>S45107</b>		7) Meat	1 = Yes 2 = No <input type="checkbox"/>
<b>S45108</b>		8) Noodles	1 = Yes 2 = No <input type="checkbox"/>
<b>S45109</b>		9) Vegetables (non orange)	1 = Yes 2 = No <input type="checkbox"/>

		colored)		
<b>S45197</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P51a 2 = No	<input type="checkbox"/>
<b>S45198</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S451A</b>	51a	Specify other _____		<input type="checkbox"/>
<b>S452</b>	52	Do you know if the salt is fortified with some vitamins or minerals?	1 = Yes 2 = No → P53 8 = Do not know → P53	<input type="checkbox"/>
	52a	Which? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 53</b>				
<b>response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S452A01</b>		1) Iodine	1 = Yes 2 = No	<input type="checkbox"/>
<b>S452A02</b>		2) Vitamin A	1 = Yes 2 = No	<input type="checkbox"/>
<b>S452A03</b>		3) Iron	1 = Yes 2 = No	<input type="checkbox"/>
<b>S452A04</b>		4) Fluor	1 = Yes 2 = No	<input type="checkbox"/>
<b>S452A07</b>		7) Other, specify	1 = Yes <input type="checkbox"/> P52B 2 = No	<input type="checkbox"/>
<b>S452A08</b>		8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S452B</b>	52b	Specify other _____		<input type="checkbox"/>
	53	How can a mother encourage her children to eat? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST.</b>				
<b>WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 55</b>				
<b>response codes: 1 = Yes, 2 = not mentioned</b>				
<b>S45301</b>		1) speaks to them constantly	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45302</b>		2) Look at them while eating	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45303</b>		3) singing and caressing	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45304</b>		4) Offering different food combinations	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45305</b>		5) Offering several flavors food	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45306</b>		6) Offering foods of different texture	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45307</b>		7) Feed them slowly and patiently	1 = Yes 2 = No	<input type="checkbox"/>

<b>S45308</b>	8) Force the child to eat	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45309</b>	9) Avoid distractions	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45397</b>	97) Other, specify	1 = Yes <input type="checkbox"/> P53a 2 = No	<input type="checkbox"/>
<b>S45398</b>	98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S453A</b>	53a Specify other _____		<input type="checkbox"/>
	55 What are the main causes of malnutrition in children? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST. WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 56</b>			
<b>response codes: 1 = Yes, 2 = not mentioned</b>			
<b>S45501</b>	1) Do not eat enough / poor appetite	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45502</b>	2) Do not eat frequently	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45503</b>	3) The child is sick (diarrhea, sickness, etc..)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45504</b>	4) abrupt weaning	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45505</b>	5) The child is not being given food with love / affection	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45506</b>	6) Do not eat balanced / Not feeding well	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45507</b>	7) The food is insufficient	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45508</b>	8) Lack of hygiene	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45597</b>	97) Other, specify	1 = Yes <input type="checkbox"/> P55A 2 = No	<input type="checkbox"/>
<b>S45598</b>	98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S455A</b>	55a Specify other _____		<input type="checkbox"/>
	56 When should a person wash their hands? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST. WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO QUESTION 57</b>			
<b>response codes: 1 = Yes, 2 = not mentioned</b>			
<b>S45601</b>	1) Before eating	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45602</b>	2) After using the toilet or latrine	1 = Yes 2 = No	<input type="checkbox"/>

<b>S45603</b>		3) Before giving food to the child	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45604</b>		4) After changing diapers or clean his poop	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45605</b>		5) Before preparing and handling food	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45606</b>		6) After a child has crawled	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45607</b>		7) Other, specify	1 = Yes <input type="checkbox"/> P56a 2 = No	<input type="checkbox"/>
<b>S45608</b>		8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S456A</b>	56a	Specify other _____		<input type="checkbox"/>
	57	What forms do you know to purify water? WRITE ALL THE ANSWERS. CHECK THE BOXES OF THE ANSWERS. READ NO OPTIONS		
<b>DO NOT READ LIST. WHEN THERE ARE NO MORE ANSWERS MENTIONED, MARK A 2 IN THE ANSWERS NOT MENTIONED AND GO TO NEXT SECTION</b>				
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>				
<b>S45701</b>		1) Strain or filter water	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45702</b>		2) Boil	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45703</b>		3) Treat with chlorine	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45704</b>		4) SODIS method (solar)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45705</b>		5) Iodine	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45706</b>		6) Nothing	1 = Yes 2 = No	<input type="checkbox"/>
<b>S45707</b>		7) Other, specify	1 = Yes <input type="checkbox"/> P57a 2 = No	<input type="checkbox"/>
<b>S45708</b>		8) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S457A</b>	57a	Specify other _____		<input type="checkbox"/>

## Household Surveys – Section 5 Pre and Postnatal Health

SECTION 5: pre and postnatal health		BASELINE QUESTIONNAIRE -2010 -	
<b>S5CODENC</b>	<b>SURVEY CODE</b>	[   _   _   _ ]	
<b>S5CODPER</b>	<b>PERSONAL IDENTIFICATION CODE</b>	[   _   _   _   _   _ ]	
<b>S5NM</b>	Type the name of the mother of the sample	[ ]	
<b>S5NN</b>	Type the name of the Child Of 24 months	[ ]	
<b>A. These questions are about health and postnatal OF THE MOTHER OF A CHILD FROM 0 TO 24 MONTHS</b>			
<b>B. PDA FILTER: IS THERE A CHILD FROM 0 TO 24 MONTHS IN THE FAMILY? 1. YES → CONTINUE, 2. NO → NEXT SECTION</b>			
<b>C. QUESTIONS TO THE MOTHER OF THE SAMPLE IF A CHILD UNDER 24 MONTHS: &lt;% S5NM%&gt;</b>			
Now I would like to ask you to <% S5NM%> about the care provided before, during, and after the birth of <% S5NN%>			
QUESTION CODE	QUESTION	ANSWER CODE	ANSWER
<b>S501</b>	1 When you was pregnant of <% S5NN%>, you went to prenatal care?	1 = Yes 2 = No → <b>P6</b>	[ ]
	3 Where You look for prenatal care during pregnancy of <% S5NN%>? <b>DO NOT READ LIST.</b> When the mother finished answering polled <input type="checkbox"/> Any other place? <b>NO LONGER ANSWER WHEN OTHERWISE SKIP TO QUESTION 4</b>		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes and move to P4 MENTIONED</b>			
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>			
<b>S503A</b>	3a House of the Midwife, Vigilante or Facilitator Community Health	1 = Yes 2 = No → <b>P3c</b>	[ ]
<b>S503B</b>	3b How many times you been?	98 = Do not know	[ ]
<b>S503C</b>	3c Convergence Center	1 = Yes 2 = No → <b>P3e</b>	[ ]
<b>S503D</b>	3d How many times you been?	98 = Do not know	[ ]
<b>S503E</b>	3e Health post	1 = Yes 2 = No → <b>P3G</b>	[ ]
<b>S503F</b>	3f How many times you been?	98 = Do not know	[ ]
<b>S503G</b>	3g Health Center	1 = Yes 2 = No → <b>P3i</b>	[ ]
<b>S503H</b>	3h How many times you been?	98 = Do not know	[ ]
<b>S503I</b>	3i Public hospital	1 = Yes 2 = No → <b>P3K</b>	[ ]
<b>S503J</b>	3j How many times you been?	98 = Do not know	[ ]
<b>S503K</b>	3k IGSS (or Social Security)	1 = Yes 2 = No → <b>P3M</b>	[ ]
<b>S503L</b>	3l How many times you been?	98 = Do not know	[ ]
<b>S503M</b>	3m APROFAM	1 = Yes 2 = No → <b>P3O</b>	[ ]
<b>S503N</b>	3n How many times you been?	98 = Do not know	[ ]
<b>S503O</b>	3o Private Hospital (private or	1 = Yes 2 = No → <b>P3q</b>	[ ]

		unique clinical-hospital)		
<b>S503P</b>	3p	How many times you been?	98 = Do not know	[ ]   [ ]
<b>S503Q</b>	3q	Private or unique clinical practice	1 = Yes 2 = No → <i>P3s</i>	[ ]
<b>S503R</b>	3r	How many times you been?	98 = Do not know	[ ]   [ ]
<b>S503S</b>	3s	Other, specify	1 = Yes 2 = No → <i>P4</i>	[ ]
<b>S503T</b>	3t	Other, specify		[ ]
<b>S503U</b>	3u	How many times you been?	98 = Do not know	[ ]   [ ]
<b>S504</b>	4	How many months of pregnant were you when you went to your <u>first</u> prenatal care? WRITE THE NUMBER OF WEEKS The maximum number is <u>40</u> WEEKS RESPOND IF MOTHER RECORD NUMBER IN MONTHS HERE TO BECOME THE MACHINE WEEKS: (MONTHS) _____ □ (WEEKS) _____	98 = Do not know	[ ]   [ ]
<b>S505</b>	5	How many months of pregnant were you when you went to your last prenatal care? WRITE THE NUMBER OF WEEKS The maximum number is <u>40</u> WEEKS RESPOND IF MOTHER RECORD NUMBER IN MONTHS HERE TO BECOME THE MACHINE WEEKS: (MONTHS) _____ □ (WEEKS) _____ ANSWER THIS QUESTION AFTER PASSING A P7	98 = Do not know number of times	[ ]   [ ]
	6	What was the reason why you did not come to control her pregnancy <% S5NN%>? NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO Q7</b>				
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>				
<b>S50601</b>		1) Distance to spot	1 = Yes 2 = No	[ ]
<b>S50602</b>		2) Controls at home	1 = Yes 2 = No	[ ]
<b>S50603</b>		3) Lack of confidence	1 = Yes 2 = No	[ ]
<b>S50604</b>		4) She think the attention is bad	1 = Yes 2 = No	[ ]

<b>S50605</b>		5) Long wait for attention	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50606</b>		6) health facility was closed or time of attention was shortly	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50607</b>		7) My husband not allowed me	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50608</b>		8) The family would not let me	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50609</b>		9) Cost of attention	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50610</b>		10) Do not speak my language	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50611</b>		11) Lack of time (homemaker)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50612</b>		12) Not a behaviour	1 = Yes 2 = No	<input type="checkbox"/>
<b>S50697</b>		97) Other, specify	1 = Yes <input type="checkbox"/> P6a 2 = No	<input type="checkbox"/>
<b>S50698</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S506A</b>		Other, specify _____		<input type="checkbox"/>
<b>S507</b>	7	Did you receive a visit from a midwife, doctor clinic, health guardian, or other person to help manage her pregnancy <% S5NN%>?	1 = Yes 2 = No → P8A	<input type="checkbox"/>
	7.1.	Who? Visited and how many times did it? DO NOT READ LIST. When the mother finished answering polled <input type="checkbox"/> <input type="checkbox"/> Any others? NO LONGER ANSWER WHEN OTHER, AFTER PASSING TO ANSWER THIS QUESTION P8A		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO P8A</b>				
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>				
<b>S507A</b>	7a	Healer	1 = Yes 2 = No → P7C	<input type="checkbox"/>
<b>S507B</b>	7b	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507C</b>	7c	Guard Health	1 = Yes 2 = No → P7E	<input type="checkbox"/>
<b>S507D</b>	7d	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507E</b>	7e	Community Facilitator	1 = Yes 2 = No → P7G	<input type="checkbox"/>
<b>S507F</b>	7f	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507G</b>	7g	Trained midwife	1 = Yes 2 = No → P7i	<input type="checkbox"/>
<b>S507H</b>	7h	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507I</b>	7i	Midwife unspecified	1 = Yes 2 = No → P7k	<input type="checkbox"/>
<b>S507J</b>	7j	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507K</b>	7k	Traditional Midwife	1 = Yes 2 = No → P7M	<input type="checkbox"/>
<b>S507L</b>	7l	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507M</b>	7m	Roving doctor	1 = Yes 2 = No → P7o	<input type="checkbox"/>
<b>S507N</b>	7n	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507O</b>	7o	Roving nurse	1 = Yes 2 = No → P7q	<input type="checkbox"/>
<b>S507P</b>	7p	How many visits had?	98 = Do not know	<input type="checkbox"/>
<b>S507Q</b>	7q	Health Promoter	1 = Yes 2 = No → P7s	<input type="checkbox"/>

<b>S507R</b>	7r	How many visits had?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
<b>S507S</b>	7s	Other, <i>specify</i>	1 = Yes 2 = No → <i>P8A</i>	<input type="checkbox"/>
<b>S507 T</b>	7t	Specify other		<input type="checkbox"/>
<b>S507 U</b>	7u	How many visits had?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
<b>S508A</b>	8a	When was pregnant of <% <i>S5NN%</i> > gave him a vaccine to a child / a not suffer tetanus (convulsions after birth)?	1 = Yes 2 = No → <i>P9A</i> 8 = Do not know → <i>P9A</i>	<input type="checkbox"/>
<b>S508B</b>	8b	How many times you received the vaccine during pregnancy <% <i>S5NN%</i> >? <b>AFTER PASSING THIS QUESTION ANSWER QUESTION 10</b>	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
<b>S509A</b>	9a	In some time <u>before</u> pregnancy <% <i>S5NN%</i> >, did you receive any tetanus vaccine to protect you or another child?	1 = Yes 2 = No → <i>P10</i> 8 = Do not know → <i>Q10</i>	<input type="checkbox"/>
<b>S509B</b>	9b	<u>Before</u> pregnancy <% <i>S5NN%</i> >, how many times have been vaccinated against tetanus?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
<b>S510</b>	10	When you were pregnant with <% <i>S5NN%</i> >, you took iron pills or tablets, or prenatal folic acid?	1 = Yes 2 = No → <i>P14</i> 8 = Do not know → <i>P14</i>	<input type="checkbox"/>
<b>S511A</b>	11A	When you were pregnant with <% <i>S5NN%</i> >, you took ferrous sulfate / iron?	1 = Yes 2 = No → <i>P12a</i> 8 = Do not know → <i>P12a</i>	<input type="checkbox"/>
<b>S511B</b>	11B	How often did you take iron pills during pregnancy <% <i>S5NN%</i> >? <b>NOT READ OPTIONS</b>	1 = Once a gave a 2 = 2 times per day 3 = Once a week 4 = Twice a week 7 = Other, esp. <input type="checkbox"/> <i>P11C</i> 8 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
<b>S511C</b>	11C	Specify other		<input type="checkbox"/>
<b>S511D</b>	11D	How long did you take iron pills during pregnancy <% <i>S5NN%</i> >? <b>RESPOND IF MOTHER RECORD NUMBER IN MONTHS HERE TO BECOME THE MACHINE WEEKS: (MONTHS) _____ <input type="checkbox"/> (WEEKS) _____</b>	<b>RECORD NUMBER OF WEEKS (1 to 40)</b> 98 = Do not know	<input type="checkbox"/>   _____ <input type="checkbox"/>
<b>S512A</b>	12A	When You were pregnant with <% <i>S5NN%</i> >, did you take folic acid?	1 = Yes 2 = No → <i>P13a</i> 8 = Do not know → <i>P13a</i>	<input type="checkbox"/>
<b>S512B</b>	12B	How often did you take folic acid tablets during pregnancy	1 = Once a gave a 2 = 2 times per day	<input type="checkbox"/>   <input type="checkbox"/>

		<% S5NN%>? READ NO OPTIONS	3 = Once a week 4 = Twice a week 7 = Other, esp. <input type="checkbox"/> P12C 8 = Do not know	
<b>S512C</b>	12C	Specify other		
<b>S512 D</b>	12 D	How long did you take folic acid tablets during pregnancy <% S5NN%>? RESPOND IF MOTHER RECORD NUMBER IN MONTHS HERE TO BECOME THE MACHINE WEEKS: (MONTHS) _____ <input type="checkbox"/> (WEEKS) _____	RECORD NUMBER OF WEEKS (1 to 40) 98 = Do not know	[ ]   [ ] 
<b>S513A</b>	13A	Did you take prenatal pills?	1 = Yes 2 = No → P15a 8 = Do not know → P15a	[ ]
<b>S513B</b>	13B	How often did you take prenatal pills during pregnancy <% S5NN%>? READ NO OPTIONS	1 = Once a gave a 2 = 2 times per day 3 = Once a week 4 = Twice a week 7 = Other, esp. <input type="checkbox"/> P13C 8 = Do not know	[ ]   [ ]
<b>S513C</b>	13C	Specify other		
<b>S513D</b>	13D	How long did you take prenatal pills during pregnancy <% S5NN%>? RESPOND IF MOTHER RECORD NUMBER IN MONTHS HERE TO BECOME THE MACHINE WEEKS: (MONTHS) _____ <input type="checkbox"/> (WEEKS) _____ ANSWER THIS QUESTION AFTER PASSING P15A	RECORD NUMBER OF WEEKS (1 to 40) 98 = Do not know	[ ]   [ ] 
	14	Why not take any of these things during pregnancy <% S5NN%>? NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO P15a</b>				
<b>response codes: 1 = Yes, 2 = not mentioned above</b>				
<b>S51401</b>	1) Stomach pain		1 = Yes 2 = No	[ ]
<b>S51402</b>	2) It was not available		1 = Yes 2 = No	[ ]
<b>S51403</b>	3) I forgot		1 = Yes 2 = No	[ ]
<b>S51404</b>	4) Believe that baby fat		1 = Yes 2 = No	[ ]
<b>S51405</b>	5) It is a "hot food"		1 = Yes 2 = No	[ ]
<b>S51406</b>	6) No need		1 = Yes 2 = No	[ ]
<b>S51407</b>	7) Do not usually		1 = Yes 2 = No	[ ]
<b>S51408</b>	8) She does not like to take medicine		1 = Yes 2 = No	[ ]
<b>S51409</b>	9) Do not know that it is		1 = Yes 2 = No	[ ]

		necessary		
<b>S51497</b>		97) Other, specify	1 = Yes <b>P14a</b> <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>S51498</b>		98) Do not know / no answer	1 = Yes 2 = No	<input type="checkbox"/>
<b>S 514A</b>	14	Other, specify	_____	<input type="checkbox"/>
<b>S515A</b>	15a	When You were pregnant with <% S5NN%>, was your blood pressure reviewed with this device? [PICTURE SHOW AND EXPLAIN]	1 = Yes 2 = No → <b>P16</b> 8 = Do not know → <b>P16</b>	<input type="checkbox"/>
<b>S515B</b>	15b	How many times were your blood pressure reviewed with this device during pregnancy <% S5NN%>?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
	16	Who Attended You during labor <% S5NN%>? <b>NOTE ALL THE ANSWERS.</b> <b>Check the boxes ANSWERS</b> <b>READ NO OPTIONS</b> <b>PROBE <input type="checkbox"/> Anyone else?</b> <b>PROBE WHAT PEOPLE WERE AND CIRCLE ALL MENTIONED PERSONS</b> <b>MOTHER.</b> If you mention midwife <b>PROBE TO DETERMINE IF "trained or trained" (CAT) or</b> <b>"empirical" (unskilled or untrained).</b>		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO P17 or P19 AS THE JUMPS</b>				
<b>response codes: 1 = Yes, 2 = not mentioned above</b>				
<b>S51601</b>		1) Nurse	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51602</b>		2) Roving Nurse	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51603</b>		3) Roving Medical (Doctor)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51604</b>		4) Medical (Doctor)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51605</b>		5) trained Midwife	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51606</b>		6) Healer	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51607</b>		7) Guardian Health	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51608</b>		8) Facilitator / a Community	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51609</b>		9) Housband	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51610</b>		10) No	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51611</b>		11) Health Promoter	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51612</b>		12) Family / friends	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51613</b>		13) Midwife unspecified	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5161 4</b>		14) Traditional Midwife	1 = Yes 2 = No	<input type="checkbox"/>
<b>S51697</b>		97) Other, specify	1 = Yes <b>P16a</b> <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>S51698</b>		98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S516A</b>	16a	Other, Specifye	_____	<input type="checkbox"/>
<b>S51600</b>	1600	Verify if <% S5NM%> answered "yes" to at least one of the questions from the 16.5 and 16.97	1 = There is at least one answer "yes" <input type="checkbox"/> <input type="checkbox"/> <b>Q17</b> 2 = There is not an answer "YES" <input type="checkbox"/> <input type="checkbox"/> <b>Q19</b>	<input type="checkbox"/>
<b>S517</b>	17	Was used a proper and hygienic kit like this, during delivery of <% S5NN%>?	1 = Yes <b>to</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 2 = No 8 = Do not know	

<b>S518</b>	18	What is it used for cutting the cord at delivery of <% S5NN%>? READ NO OPTIONS	1 = new razor blade 2 = new razor blade and boiled 3 = Razor blade used 4 = Razor blade used and boiled 5 = new Scissors 6 = new and boiled Scissors 7 = Scissors used 8 = Scissors used and boiled 9 = Knife 10 = Reed or tab 97 = Other, specify P18a → 98 = Do not know / Can not remember	<input type="checkbox"/>
<b>S518a</b>	18 to	Specify other _____		<input type="checkbox"/>
<b>S519</b>	19	Was Drying (cleaned <% S5NN%> immediately after birth, before the delivery of the placenta?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S520</b>	20	Was covered <% S5NN%> in a garment or blanket (blanket or jacket), immediately after birth, before the delivery of the placenta?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S521</b>	21	Where was the birth of <% S5NN%>? ONLY ONE CAN BE. READ NO OPTIONS	1 = the respondent House → P29 2 = House midwife / community facilitator / Guardian health 3 = Center Convergence 4 = Health post 5 = Health Centre 6 = Public Hospital 7 = IGSS 8 = APROFAM 9 = Private Hospital / Private Clinic 97 = Other, □□□□□□ P21a 98 = Do not know	<input type="checkbox"/>
<b>S5 21A</b>	21	other Specify _____		<input type="checkbox"/>
<b>S522</b>	22	After delivery of <% S5NN%> and before you left your house, did a health worker checked how was your health and your child / a? IF YES, ASK IF ONLY check MOTHER, ONLY CHILD, OR BOTH	1 = Yes, mother and child 2 = Yes, but only the mother 3 = Yes, but only the child 4 = No, neither the mother nor the child / a → P25	<input type="checkbox"/>
<b>S523</b>	23	How many days after delivery of <% S5NN%> was the first check? If the answer is <1 day note 1	1 = One day 2 = Two Days 3 = Three days 4 = four or more days 98 = Do not know	<input type="checkbox"/>
	24	Who Attended this time? NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS ANSWER THIS QUESTION AFTER PASSING A SECTION BELOW		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO NEXT SECTION</b>				

<b>response codes: 1 = Yes, 2 = not mentioned above</b>			
<b>S5 2401</b>		1) Medical	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2402</b>		2) Medical itinerant	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2403</b>		3) Nurse	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2404</b>		4) Nurse itinerant	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2405</b>		5) trained Midwife	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2406</b>		6) unspecified Midwife	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2407</b>		7) Traditional Midwife	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2408</b>		8) health promoter	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2409</b>		9) Guardian Health	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2410</b>		10) Healer	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2411</b>		11) Family / friends	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2412</b>		12) No one	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2497</b>		13) Other, specify	1 = Yes <b>P24a</b> <input type="checkbox"/> 2 = No <input type="checkbox"/>
<b>S5 2498</b>		98) don't know / he does not remember	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 24A</b>	24 to	Specify other _____	<input type="checkbox"/>
<b>S525</b>	25	After that you went home, did a health worker check how was his health and that of <% S5NN%>? <b>IF YES, ASK IF MOTHER ONLY checkup, fishing only CHILD, OR BOTH</b>	1 = Yes, mother and child 2 = Yes, but only the mother 3 = Yes, but only the child 4 = No, neither the mother nor the child / a → <b>P28</b> <input type="checkbox"/>
<b>S526</b>	26	How many days after delivery of <% S5NN%> was the first check? <b>IF THE ANSWER IS &lt;1 DAY NOTE 1</b>	1 = A gave a 2 = Two Days 3 = Three days 4 = four or more days 98 = Do not know <input type="checkbox"/>
	27	Who Attended this time? <b>NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS ANSWER THIS QUESTION AFTER PASSING A SECTION BELOW</b>	<input type="checkbox"/>
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO NEXT SECTION</b>			
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>			
<b>S5 2701</b>		1) Medical	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2702</b>		2) Medical itinerant	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2703</b>		3) Nurse	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2704</b>		4) Nurse itinerant	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2705</b>		5) trained Midwife	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2706</b>		6) unspecified Midwife	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2707</b>		7) Traditional Midwife	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2708</b>		8) health promoter	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2709</b>		9) Guardian Health	1 = Yes 2 = No <input type="checkbox"/>
<b>S52710</b>		10) Healer	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2711</b>		11) Family / friends	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2712</b>		12) No one	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 2797</b>		97) Other, specify	1 = Yes <b>P27a</b> <input type="checkbox"/> 2 = No <input type="checkbox"/>
<b>S5 2798</b>		988) Do not know / cannot remember	1 = Yes 2 = No <input type="checkbox"/>
<b>S5 27A</b>	27a	Specify other _____	<input type="checkbox"/>

28	Why You don't look for assistance after delivery of <% S5NN%>? NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS ANSWER THIS QUESTION AFTER PASSING A SECTION BELOW		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO NEXT SECTION</b>			
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>			
<b>S5 2801</b>	1) Distance to health facility	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2802</b>	2) Controls at home	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2803</b>	3) Lack of confidence	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2804</b>	4) believes that attention is bad	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2805</b>	5) Long wait for care	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2806</b>	6) Institution was closed or shortly care	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2807</b>	7) My husband would not let me	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2808</b>	8) The family would not let me	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2809</b>	9) Cost of care	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2810</b>	10) Do not speak my language	1 = Yes 2 = No	<input type="checkbox"/>
<b>S52811</b>	11) Lack of time (homemaker)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2812</b>	12) No customary	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 2897</b>	97) Other, specify	1 = Yes Q28A <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>S5 2898</b>	98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 28A</b>	28 a Specify other		<input type="checkbox"/>
<b>S529</b>	29 After <% S5NN%> was born, did a health worker checked how was your health and the health of your child? IF YES, ASK IF MOTHER ONLY check ONLY CHILD, OR BOTH	1 = Yes, mother and child 2 = Yes, but only the mother 3 = Yes, but only the child 4 = No, neither the mother nor the child → P32	<input type="checkbox"/>
<b>S530</b>	30 How many days after delivery of <% S5NN%> was the first check? IF THE ANSWER IS <1 1 DAY RECORD	1 = One day 2 = Two Days 3 = Three days 4 = four or more days 98 = Do not know	<input type="checkbox"/>
31	Who Attended this time? NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS ANSWER THIS QUESTION AFTER PASSING A SECTION BELOW		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO NEXT SECTION</b>			
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>			
<b>S5 3101</b>	1) Medical	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3102</b>	2) Medical itinerant	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3103</b>	3) Nurse	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3104</b>	4) Nurse itinerant		
<b>S5 3105</b>	5) trained Midwife	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3106</b>	6) unspecified Midwife	1 = Yes 2 = No	<input type="checkbox"/>

<b>S5 3107</b>	7) Traditional Midwife	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3108</b>	8) health promoter	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3109</b>	9) Guardian Health	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3110</b>	10) Healer	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3111</b>	11) Family / friends	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3112</b>	12) No one	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3197</b>	97) Other, specify	1 = Yes P31a <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>S5 3198</b>	98) Do not know / can not remember	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 31A</b>	31 a Specify other _____		<input type="checkbox"/>
	32 Why You don't look for assistance to control your health after delivery of [NAME OF CHILD 1]?		
	NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS ANSWER THIS QUESTION AFTER PASSING A SECTION BELOW		
<b>When Mrs. MENTION COMPLETE ANSWERS score 2 in boxes ABOVE AND GO TO NEXT SECTION</b>			
<b>Có response codes: 1 = Yes, 2 = not mentioned above</b>			
<b>S5 3201</b>	1) Distance to spot	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3202</b>	2) Controls at home	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3203</b>	3) Lack of confidence	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3204</b>	4) believes that attention is bad	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3205</b>	5) Long wait for care	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3206</b>	6) Institution was closed or shortly care	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3207</b>	7) My husband would not let me	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3208</b>	8) The family would not let me	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3209</b>	9) Cost of care	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3210</b>	10) Do not speak my language	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3211</b>	11) Lack of time (homemaker)	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 3297</b>	97) Other, specify	1 = Yes P32a <input type="checkbox"/> 2 = No	<input type="checkbox"/>
<b>S5 3298</b>	98) Do not know	1 = Yes 2 = No	<input type="checkbox"/>
<b>S5 32A</b>	32a Specify other _____		<input type="checkbox"/>

## Household Surveys – Section 6 Infant Feeding

Infant Feeding		BASELINE QUESTIONNAIRE -2010 -	
S6CODENC	SURVEY Code	[ ] [ ] [ ] [ ]	
S6CODPER	PERSONAL IDENTIFICATION CODE	[ ] [ ] [ ] [ ] [ ] [ ]	
<b>A. THESE QUESTIONS ARE ABOUT INFANT FEEDING of Children aged 0 to 24 months</b>			
<b>B. PDA FILTER: IS THERE A CHILD FROM 0 TO 24 MONTHS? 1. YES → CONTINUE, 2. NO → NEXT SECTION</b>			
<b>C. QUESTIONS TO THE MOTHER OF THE CHILD: &lt;% S5NM%&gt;</b>			
<b>Now I would like to ask to &lt;% S5NN%&gt; (Mothers name) about feeding &lt;% S5NN%&gt; (child name)</b>			
QUESTION CODE	QUESTION	ANSWER CODE	ANSWER
S601	1 You did you breastfeed <% S5NN%> at sometime?	1 = Yes 2 = No → P3	[ ]
S602	2 How much time after birth <% S5NN%> you started to breastfeed? WRITE THE NUMBER OF HOURS IF THE MOTHER ANSWERS IN DAYS, WRITE THE NUMBER OF DAYS HERE SO THE PDA WILL CONVERT IT TO HOURS: (DAYS) _____ → (hours) _____ AFTER ANSWERING THIS QUESTION GO TO P4	If less than 1/2 HOUR, enter "00" Between 01 and 96 hours, enter the number with two digits 97 = More than 96 hours 98 = Do not know / Cannot remember	[ ] [ ]
S603	3 Ever <% S5NN%> or received breast milk?	1 = Yes 2 = No → P5 8 = Do not know → P5	[ ]
S604	4 During the day and evening yesterday, <% S5NN%> received breast milk?	1 = Yes → P6 2 = No 8 = Do not know	[ ]
S605	5 Sometimes breastfed babies in various ways. For example, a baby can have breast milk with a spoon or cup. This may occur because the mother cannot be with the baby. Sometimes babies breastfeed from another woman's breast milk or take another woman breast milk with a spoon or cup, for example. During the day and evening yesterday, <% S5NN%> received breast milk in any of these forms mentioned?	1 = Yes 2 = No 8 = Do not know	[ ]
S606	6 Now I want to ask you about some of the medicines and vitamins that children sometimes take. During the day and evening yesterday, did you give <% S5NN%> vitamin drops or other medicines in drops?	1 = Yes 2 = No 8 = Do not know	[ ]
S607	7 During the day and evening yesterday, did <% S5NN%> received oral rehydration solution? SHOWN ORS envelope	1 = Yes 2 = No 8 = Do not know	[ ]
	8 Now I'd like to talk about liquids that <% S5NN%> may have taken or received during the day and evening yesterday. READ THE LIST FROM 8a TO 8i, starting with the next row		
S608A	8a During the day and evening yesterday, <% S5NN%>	1 = Yes	[ ]

		S5NN%> took or received pure water?	2 = No 8 = Do not know	
S608B	8b	During the day and evening yesterday, <% S5NN%> took or received special formula for infants such as: NAN, Prosobee or Enfamil?	1 = Yes → P9b 2 = No → P8C 8 = Do not know → P8C	<input type="checkbox"/>
S609B	9b	How many times <% S5NN%> took special formula for babies, such as: NAN, or Enfamil Prosobee during the day and evening yesterday?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
S608C	8c	During the day and evening yesterday, <% S5NN%> took or received bottled cow milk or fresh cow's or goat milk?	1 = Yes → P9c 2 = No → P8d 8 = Do not know → P8d	<input type="checkbox"/>
S609C	9 c	How many times took <% S5NN%> bottled cow milk or fresh cow's or goat milk?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
S608D	8d	During the day and evening yesterday, <% S5NN%> took or received natural or artificial juices or sugar water?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
S608E	8e	During the day and evening yesterday, <% S5NN%> took or received broth? Without vegetables, without meat, without rice, ETC. Only water or liquid.	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
S608F	8f	During the day and evening yesterday, <% S5NN%> took or received yogurt?	1 = Yes → P9f 2 = No → P8g 8 = Do not know → P8g	<input type="checkbox"/>
S609F	9f	How many times <% S5NN%> ate yogurt?	98 = Do not know	<input type="checkbox"/>   <input type="checkbox"/>
S608G	8g	During the day and evening yesterday, <% S5NN%> took or received liquid porridge? PORRIDGE WITH WATER ADDED TO MAKE IT MORE LIQUID.	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
S608H	8h	During the day and evening yesterday, <% S5NN%> took or received other water-based liquid such as tea, coffee, herbal tea, or other liquids such as these?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
S608I	8i	During the day and evening yesterday, <% S5NN%> took or received other liquids other than those mentioned above?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
	10	24 hour recall of food consumption for <% S5NN%> YESTERDAY DURING THE DAY AND NIGHT		
		Please list everything that <% S5NN%> ate in the house or outside the house during the day and evening yesterday.		
<p><b>A) Please remember since &lt;% S5NN%&gt; woke up yesterday and what did (s)he ate first. &lt;% S5NN%&gt; ate something?</b></p> <p>i) IF THE ANSWER IS "YES" → ASK: Please tell me everything that the child has eaten. Ask → Did the child eat anything else? (REPEAT THIS QUESTION UNTIL THE MOTHER SAY child did not eat more → go to Part "C")</p> <p>ii) IF THE ANSWER IS "NO" → go to Part "B".</p>				
<p><b>B) What did &lt;% S5NN%&gt; do after waking up? ? &lt;% S5NN%&gt; ate something at that time?</b></p> <p>i) IF THE ANSWER IS "YES" → ASK: Please tell me everything &lt;% S5NN%&gt; ate. PROBE <input type="checkbox"/> Did the child eat anything else? (REPEAT THIS QUESTION UNTIL THE MOTHER SAY ate nothing more and went → sleep go to Part "C")</p>				

ii) IF THE ANSWER IS "NO" →pass PART "C"				
<b>FOR EACH FOOD THE MOTHER MENTIONS enter "1" in RESPONSE COLUMN.</b>				
<b>If food is NOT on the list, write it down on QUESTION 10R AND SPECIFY THE FOOD.</b>				
<b>If the food is USED as a condiment, include them in QUESTION 10o.</b>				
<b>IF MIXED DISHES OR COMPOUNDS OF several ingredients or foods are mentioned, like soup, broth, stewed, braised, etc. ASK → What ingredients or foods were in [THIS DISH MIX]?</b>				
<b>WHEN SHE FINISHED, ask → Anything else?</b>				
<b>C) When the mother finished REMEMBERING what THE CHILD ate, read every food she did not mention asking the question: During the day and night yesterday &lt;% S5NN%&gt; ate [FOOD]?</b>				
<b>EVERY FOOD must have an answer.</b>				
<b>When questions are answered GO TO QUESTION 11.</b>				
<b>S610A</b>	10a	Bread, Rice, tortillas, noodles or other foods made from grain?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 B</b>	10b	Pumpkin, carrots, squash, sweet potatoes or other vegetables in orange?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 C</b>	10c	Potatoes, taro, cassava or any other food from roots or tubers?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 D</b>	10d	Dark green leafy vegetable - such as spinach, amaranth, macuy, tzoloj, chipilín, roqtix, güisquil tip, squash tip, or other dark green leafy foods?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 E</b>	10e	Fruits that are yellow or orange inside, like ripe mangoes, ripe papayas, melon, sapota? <b>NOT BE INCLUDED</b> pineapple.	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 F</b>	10f	Any other fruit or vegetable?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 G</b>	10g	Liver, kidney, heart or other giblets?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 H</b>	10h	Beef, turkey, pig, chicken, lamb, duck, goat, or other meat?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 I</b>	10i	Eggs?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 J</b>	10j	Fish or seafood? Fried or dry?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 K</b>	10k	Beans, peas, lentils, habas or nuts?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 L</b>	10l	Cheese, cream, yogurt or other foods made from milk?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 M</b>	10m	Did you use and / or gave oil, margarine, shortening, butter or foods with these things?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 N</b>	10n	Sweet foods like chocolates, icecream, cakes, or cookies or other food with sugar?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 O</b>	10o	Flavored condiments, such as chilly, pepper, salt, broth, or other species that are dry or powder?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 P</b>	10p	Ants, snails, or other insects?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 Q</b>	10q	Food prepared with palm oil, palm kernel or palm sauce?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S610 R</b>	10r	Any type of food that is not in the list?	1 = Yes 2 = No → <b>P11</b>	<input type="checkbox"/>
<b>S610 S</b>	10s	Specify other food:	_____ (If it does not mention other → P11)	<input type="checkbox"/>

<b>S610 T</b>	10t	Specify other food: _____ (If it does not mention other → P11)	<input type="checkbox"/>
<b>S610 U</b>	10u	Specify other food: _____ (If it does not mention other → P11)	<input type="checkbox"/>
<b>S610 V</b>	10v	Specify other food: _____ (If it does not mention other → P11)	<input type="checkbox"/>
<b>S610 W</b>	10w	Specify other food: _____ (If it does not mention other → P11)	<input type="checkbox"/>
<b>S610 X</b>	10x	Specify other food: _____ (If it does not mention other → P11)	<input type="checkbox"/>
<b>S611</b>	11	<i>PDA: Check Q10a to P10q</i>	<input type="checkbox"/>
		1 = Yes, at least once "yes" → P13 2 = No, not once "yes" → P12 3 = All "do not know" → P13	
<b>S612</b>	12	? <% S5NN%> ate food whole or crushed during the day and evening yesterday?	<input type="checkbox"/>
		1 = Yes → <i>Return to P10 and ask for food you ate, when finished move on → P13</i> 2 = No → P14 8 = Do not know → Q14	
<b>S613</b>	13	How many times <% S5NN%> ate food whole or crushed during the day and evening yesterday?	<input type="checkbox"/> <input type="checkbox"/>
<b>S614</b>	14	? <% S5NN%> drank something from a bottle during the day and evening yesterday?	<input type="checkbox"/>
		1 = Yes 2 = No 8 = Do not know	
		I would like to ask you about some foods that <% S5NN%> may have eaten. I wonder if (s)he consumed them, including when combined with other foods.	
<b>S615</b>	15	During day and evening yesterday <% S5NN%> consumed or crushed whole foods that were prepared with CSB (like polenta or yellow porridge)?	<input type="checkbox"/>
		1 = Yes 2 = No 8 = Do not know	
<b>S616</b>	16	During the day and evening yesterday, <% S5NN%> consumed any foods that were mixed with micro-nutrient powders (MNP)? SHOW AN ENVELOPE OF Mercy Corps MNP.	<input type="checkbox"/>
		1 = Yes 2 = No 8 = Do not know	
<b>S617</b>	17	During day and evening yesterday, <% S5NN%> supplements consumed lipid-based micro-nutrients such as Nutri Nim? SHOW AN ENVELOPE of LNS OF Mercy Corps	<input type="checkbox"/>
		1 = Yes 2 = No 8 = Do not know	
<b>S618</b>	18	During the day and evening yesterday, <% S5NN%> took porridge or foods made with fortified cereals such as Cerelac, Vitacereal Incaparina or Bienestarina?	<input type="checkbox"/>
		1 = Yes 2 = No 8 = Do not know	
<b>S619</b>	19	During the day and evening yesterday, <% S5NN%> took porridge or beverages made	<input type="checkbox"/>
		1 = Yes 2 = No	

with unfortified cereals?

8 = Do not know

## Household Surveys – Section 7 Vaccinations and Preventive Health

SECTION 7: Vaccinations and preventive health		BASELINE QUESTIONNAIRE - 2010 -	
S7CODENC	SURVEY CODE	[         ]	
S7CODPER	PERSONAL IDENTIFICATION CODE	[             ]	
<b>A. THESE QUESTIONS ARE ABOUT VACCINES THAT HAS HAD THE PREVENTIVE HEALTH CHILD (If CHLD are aged 0 to 24 months)</b>			
<b>B. PDA FILTER: IS THERE A CHILD FROM 0 TO 24 MONTHS? 1. YES → CONTINUE, 2. NO → NEXT SECTION</b>			
<b>C. QUESTIONS TO THE MOTHER OF THE CHILD &lt;% S5NM%&gt;</b>			
QUESTION CODE	QUESTION	ANSWER CODES	ANSWER
	Now I would to ask you about vaccines <% S5NN%>		
S701	1 Do you have a card on which are recorded vaccines <% S5NN%>?	1 = Yes 2 = No card → P4	[ ]
S70 2	2 Please could I see the vaccination card?	1 = Yes, view 2 = No → P5 view	[ ]
	3 VERIFY IF THE CARD <% S5NN%> RECEIVED:		
3A S70	3a BCG	1 = Yes 2 = No	[ ]
3B S70	3b Polio1	1 = Yes 2 = No	[ ]
S70 3C	3c Polio2	1 = Yes 2 = No	[ ]
S70 3D	3d Polio3	1 = Yes 2 = No	[ ]
S70 3E	3e Penta1 (hepatitis, influenza, diphtheria, tetanus and pertussis tea)	1 = Yes 2 = No	[ ]
S70 3F	3f Penta2 (hepatitis, influenza, diphtheria, tetanus and pertussis)	1 = Yes 2 = No	[ ]
S70 3G	3g Penta3 (hepatitis, influenza, diphtheria, tetanus and pertussis)	1 = Yes 2 = No	[ ]
3H S70	3h MMR (Measles, Mumps and Rubella)	1 = Yes 2 = No	[ ]
3I S70	3i Polio R1 (first booster of diphtheria, pertussis and tetanus tea)	1 = Yes 2 = No	[ ]
3J S70	3j Polio R2 (second booster of diphtheria, pertussis and tetanus)	1 = Yes 2 = No	[ ]
S70 K	3k DPT R1 (first booster of diphtheria, pertussis and tetanus tea)	1 = Yes 2 = No	[ ]
3L S70	3l DPT R2 (Second reinforcing diphtheria, pertussis and tetanus)	1 = Yes 2 = No	[ ]
3M S70	3m Vitamin A. IF NOT SHOWN VITAMIN A RECORD 3 or 4 and ask Mrs.	1 = Yes 2 = No → P30 3 = not available in the card and had 4 = not available in the card and had no P30 →	[ ]
S70 3N	3n RECORD THE LAST DOSE OF VITAMIN received.	RECORD day, month, and year	[   ] day [   ] Month [       ] Year
3O S70	3o Iron (ferrous sulphate syrup) APPEARS	1 = Yes 2 = No → P3q	[ ]

		IRON OR WRITE 3 or 4 and ask Mrs.	3 = do not exist in the card and had 4 = not exist in the card and had no <b>P3q</b> →	
<b>S70 3P</b>	3p	RECORD THE LAST iron dose received.	RECORD day, month, and year	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>S70 3Q</b>	3q	Acid folic acid (tablets). FOLIC ACID OR APPEARS score 3 or 4 and ask Mrs.	1 = Yes 2 = No → <b>P3s</b> 3 = do not exist in the card and had 4 = not exist in the card and had no <b>P3s</b> →	<input type="text"/>
<b>3R S70</b>	3r	RECORD THE LAST doses of folic acid have received.	WRITE day, month, and year	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>3S S70</b>	3s	Dewormer. WRITE OR APPEARS dewormer 3 or 4 and ask Mrs.	1 = Yes 2 = No → <b>P3U</b> 3 = do not exist in the card and had 4 = not exist in the card and had no <b>P3U</b> →	<input type="text"/>
<b>S70 3T</b>	3t	RECORD THE LAST DOSE RECEIVED dewormer.	WRITE day, month, and year	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>3U S70</b>	3u	"Chispitas". WRITE OR APPEARS Sparky 3 or 4 and ask Mrs.	1 = Yes 2 = No → <b>P3W</b> 3 = do not exist in the card and had 4 = not exist in the card and had no <b>P3W</b> →	<input type="text"/>
<b>S70 3V</b>	3v	RECORD THE LAST DOSE RECEIVED SPARKLER.	WRITE day, month, and year	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>S70 3W</b>	3w	In the past 12 months, did you take <% S5NN%> to weight control?	1 = Yes 2 = No → Next section 8 = Do not know → Next section	<input type="text"/>
<b>S70 3X</b>	3x	In the past 12 months, how many times was taken <% S5NN%> to weight control?	98 = Do not know	<input type="text"/>   <input type="text"/>
<b>S70 3Y</b>	3y	RECORD THE LAST VISIT YOUR WEIGHT. WRITE RESPONSE AND GO TO NEXT SECTION	RECORD day, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR. WRITE RESPONSE AND GO TO NEXT SECTION	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>S704</b>	4	Have you ever had a card or vaccination card (or health) of <% S5NN%>?	1 = Yes → <b>P6</b> 2 = No 8 = Do not know	<input type="text"/>
<b>S70 5</b>	5	Have you received <% S5NN%> a	1 = Yes 2 = No → <b>P7</b> 8 = Do not know	<input type="text"/>

		vaccine to prevent disease? Have you ever vaccinated your child ?	not know → Q7	
	6	Tell me please if <% S5NN%> has received any of the following vaccines:		
<b>S706 A</b>	6a	BCG against tuberculosis, this is a shot in the right arm (or shoulder) that leaves a scar and is usually given at birth.	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S706 B</b>	6b	Did <% S5NN%> receive Polio vaccine, given as drops in the mouth?	1 = Yes 2 = No → P6e 8 = Do not know → P6e	<input type="checkbox"/>
<b>S706 C</b>	6c	How many times?	8 = Do not know	<input type="checkbox"/>
<b>S706 D</b>	6d	Does the first polio vaccine was given at 2 months of age?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S706 E</b>	6e	Did <% S5NN%> receive MMR or DPT or Pentavalent vaccine, which is usually applied while Polio vaccine and applied to the muscle (the buttock or leg)?	1 = Yes 2 = No → P6G 8 = Do not know → P6G	<input type="checkbox"/>
<b>S706 F</b>	6f	How many times?	8 = Do not know	<input type="checkbox"/>
<b>S706 G</b>	6g	Did <% S5NN%> receive MMR (Measles, Mumps and Rubella) or Three viral vaccine that is applied on the left arm?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S706 H</b>	6h	Did <% S5NN%> receive the first reinforcement of Polio?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
<b>S706 I</b>	6i	Did <% S5NN%> receive the first reinforcement of DPT?	1 = Yes 2 = No 8 = Do not know	<input type="checkbox"/>
	7	Now let me ask you about some medicines and vitamins that your bab may have received or taken.		
<b>S707A</b>	7a	? <% S5NN%> ever received a dose of vitamin A as this? CAPSULE SHOW	1 = Yes 2 = No → P7C 8 = Do not know → P7C	<input type="checkbox"/>
<b>S707 B</b>	7b	When received it last?	WRITE day, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>S707 C</b>	7c	Does <% S5NN%> ever received a dose of iron or ferrous sulfate, like this? SHOW CAPSULE	1 = Yes 2 = No → P7E 8 = Do not know → P7E	<input type="checkbox"/>
<b>S707 D</b>	7d	When received it last?	WRITE Tell, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month <input type="text"/>   <input type="text"/>   <input type="text"/>   <input type="text"/> Year
<b>S707 E</b>	7e	Does <% S5NN%> ever received a dose of folic acid, like this? CAPSULE SHOW	1 = Yes 2 = No → P7G 8 = Do not know → P7G	<input type="checkbox"/>
<b>S707 F</b>	7f	When received it last?	WRITE day, month, and year	<input type="text"/>   <input type="text"/> day <input type="text"/>   <input type="text"/> Month

			Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	[ ]   [ ]   [ ]   [ ] Year
<b>S707 G</b>	7g	Does <% S5NN%> have received a dose of sparks like these? <i>CAPSULE SHOW</i>	1 = Yes 2 = No → P7i 8 = Do not know → P7i	[ ]
<b>S707 H</b>	7h	When received it last?	WRITE day, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	[ ]   [ ] day [ ]   [ ] Month [ ]   [ ]   [ ]   [ ] Year
<b>S707 I</b>	7i	Does <% S5NN%> have ever been treated like this with dewormer? <i>SHOW CAPSULE</i>	1 = Yes 2 = No → P8 8 = Do not know → P8	[ ]
<b>S707 J</b>	7j	When received it last?	WRITE day, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	[ ]   [ ] day [ ]   [ ] Month [ ]   [ ]   [ ]   [ ] Year
<b>S70 8</b>	8	In the past 12 months, did you take <% S5NN%> to weight control?	1 = Yes 2 = No → Next section 8 = Do not know → Next section	[ ]
<b>S70 9</b>	9	In the past 12 months, how many times was <% S5NN%> taken to weight control?	98 = Do not know	[ ]   [ ]
<b>S707M</b> <b>S07p10</b>	10	When was the last time you took <% S5NN%>to weight control? <b>WRITE RESPONSE AND GO TO NEXT SECTION</b>	WRITE day, month, and year Enter "98" if there is no day or month. Enter "9998" MISSING YEAR.	[ ]   [ ] Day [ ]   [ ] Months [ ]   [ ]   [ ]   [ ] Year

Household Surveys – Section 9 Home Action Plan

SECTION 9: Home Action plan		BASELINE QUESTIONNAIRE - 2010	
S7CODENC	SURVEY CODE	[         ]	
A. THESE QUESTIONS ARE ABOUT HOME AND PLOT (LAND) MANAGE			
B. FILL IN EVERY FAMILY SAMPLE			
C. QUESTIONS TO THE MOTHER OF THE SAMPLE			
QUESTION N	QUESTION	ANSWER CODES	ANSWE R
CODE			
<b>S900</b>	Who is the Mother of sample? <b>[NAME OF MOTHER]</b>		
	Now I would like to ask some questions to <b>[NAME OF MOTHER]</b>		
<b>S901</b>	1 Does your family have a management plan for housing and plot?	1 = Yes 3 = <b>P3</b> is in progress → 2 = No → <b>P3</b> 8 = Do not know → <b>P3</b>	<input type="checkbox"/>
	<b>READ NO OPTIONS</b>		
<b>S902</b>	2 Can I have it be displayed?	1 = Yes is shown and MC 2 = If it shows, but it is by MC 3 = not shown  8 = Do not know	<input type="checkbox"/>
	<b>READ NO OPTIONS</b>		
<b>S903</b>	3 What material is the most of the floor of this house?	1 = Ground 2 = Cement firm 3 = mosaic, wood or other coatings 7 = Other, esp.	<input type="checkbox"/>
<b>S904</b>	4 What material is most of the walls and walls of this house?	1 carton 2 = Carrizo, palm or bamboo 3 = mud or daub 4 = Wood 5 = asbestos sheet, galvanized metal or 6 = Adobe 7 = Partition or brick partition wall, block, stone, masonry or concrete 8 = Other Materials	<input type="checkbox"/>
<b>S905</b>	5 What material is the most of the roof of this house?	1 = Duralita 2 = Palma, shingle or wood 3 = asbestos sheet, galvanized metal or 4 = Tile 5 = Concrete slab, brick vault or roof, brickwork beams 7 = Other Materials	<input type="checkbox"/>
<b>S906</b>	6 Is there a separate	1 = Yes 2 = No	<input type="checkbox"/>

		room for cooking, whether in the home or apart?		
<b>S907</b>	7	Does the room to cook ALSO is used for sleeping?	1 = Yes 2 = No	<input type="checkbox"/>
<b>S908</b>	8	In total how many rooms have this property without corridors or bathrooms ?	# Of Rooms	<input type="checkbox"/>
<b>S909</b>	9	And of [TOTAL quarter-P8] how many rooms are used for sleeping?	# Of bedrooms	<input type="checkbox"/>
<b>S910</b>	1 0	L What is your main source of water?  READ OPTIONS.  Check only one answer.	1 = Piped water inside the kitchen or Bath 2 = Piped water outside the house but within the field 3 = Water piped public key or hydrant 4 = Well water or pump 5 = Spring water, river or lake 6 = Water Pipe 7 = Natural spring 8 = catchment tank 9 = Rainwater 97 = Other 98 = Do not know	<input type="checkbox"/>
<b>S911</b>	1 1	This property has:  READ	1 = toilet or sanitary 2 = latrine or toilet 3 = do not use toilet (do on the floor, corral, barn, beach, etc..) 7 = Other	<input type="checkbox"/>

OPTIONS.

Choosing the option that used primarily.

There can only be ONE

<b>S912</b>	1 2	Does this household have electricity?	1 = Yes 2 = No	<input type="checkbox"/>
<b>S913</b>	1 3	Do you have a vegetable patch?	1 = Yes 2 = No → <i>next section</i>	<input type="checkbox"/>
<b>S914</b>	1 4	Please can I see the vegetable patch	1 = Yes, the family has 2 = No, no vegetable patch 3 = not allowed to observe	<input type="checkbox"/>

Household Surveys – Section 13 Participation in Other Projects or Programs

SECTION 13: Participation in other projects or programs MIDTERM EVALUATION QUESTIONNAIRE

S13CODENC SURVEY CODE [ ] [ ] [ ] [ ] [ ]

A. These questions are about participation BENEFICIARY PROCOMIDA in projects or programs of other institutions.

**B. FILL IN FAMILIES answer affirmatively be beneficiaries of a project or PROCOMIDA separate program.**

**C. QUESTIONS TO THE MOTHER OF THE SAMPLE**

QUESTION CODE	QUESTION	ANSWER CODE	ANSWER
S 1300	Who? Mother n is the sample?	[NAME OF MOTHER]	
	Now I would like to ask some questions to [NAME OF MOTHER]		
S1301	1 How many projects of other institutions involved?		[ ]
	I would like to answer some questions of the projects involved, starting with the one is more important for the family s In the [PROJECT No.1]		
S1302	2 What type of institution is implemented?	1 = Government. 2 = Non-governmental organization. 3 = Do not know.	[ ]
S1303	3 When became involved?	WRITE THE MONTH, AND YEAR	[ ] [ ] Months [ ] [ ] [ ] [ ] [ ] Year
S1304	4 What kind of support do you receive on that project? NOTE ALL THE ANSWERS. Check the boxes ANSWERS READ NO OPTIONS	response codes: 1 = Yes, 2 = not mentioned above	
S130401	1) Food	1 = Yes 2 = No	[ ]
S130402	2) Money.	1 = Yes 2 = No	[ ]
S130403	3) agricultural inputs queues. (Fertilizer, tools, seeds)	1 = Yes 2 = No	[ ]
S130404	4) Other production inputs.	1 = Yes 2 = No	[ ]
S130405	5) Health training	1 = Yes 2 = No	[ ]
S130406	6) production training	1 = Yes 2 = No	[ ]
S130407	7) Other, specify	1 = Yes 2 = No	[ ]
S130407a	Other, specify		[ ]
S1305	5 Are you involved in another project / program?	1 = Yes → RETURN TO P2 2 = No End the interview	[ ]

Household Surveys – Section 14 Resilience

S14CODENC		SURVEY CODE	
[ ] [ ] [ ] [ ]			
<b>A. These questions are about the ability to obtain food</b>			
<b>B. FILL IN FOR EVERY FAMILY SAMPLE</b>			
<b>C. QUESTIONS TO THE MOTHER OF THE SAMPLE</b>			
QUESTION CODE	QUESTION	Code	ANSWER
S 1400	Who is the Mother in the sample?		[NAME OF MOTHER]
Now I would like to ask some questions to [NAME OF MOTHER] Do not read answers, investigate.			
S14 01	During the past 30 days, how many times has your family stopped eating their favorite food and replaced with food they like less or of lower quality because they ran out of preferred food and do not have enough money to buy?	Note the number of days (0-30) If you say once a week, mark 4 If he says occasionally mark 90 If you say hardly ever, mark 91 If you say never, mark 0 Do not know: 98	[ ] [ ]
S14 02	During the past 30 days, how many times have you borrowed food from family, friend or neighbor, or bought on credit, because he had no money to buy?	Note the number of days (0-30) If you say once a week, mark 4 If he says occasionally mark 90 If you say hardly ever, mark 91 If you say never, mark 0 Do not know: 98	[ ] [ ]
S14 03	During the past 30 days, how many times have you relied on wild food, hunt or harvest immature crops to eat, because you had no money to buy?	Note the number of days (0-30) If you say once a week, mark 4 If he says occasionally mark 90 If you say hardly ever, mark 91 If you say never, mark 0 Do not know: 98	[ ] [ ]
S14 04	During the past 30 days, how many times have you consumed grains that were saved for use as seed?	Note the number of days (0-30) If you say once a week, mark 4 If he says occasionally mark 90	[ ] [ ]

		<p>If you say hardly ever, mark 91  If you say never, mark 0  Do not know: 98</p>
<b>S14 05</b>	During the past 30 days, how many times have you had to send someone in your family to beg for food?	<p>Note the number of days (0-30) <input type="text"/> <input type="text"/></p> <p>If you say once a week, mark 4  If he says occasionally mark 90  If you say hardly ever, mark 91  If you say never, mark 0  Do not know: 98</p>
<b>S14 06</b>	During the past 30 days, how many times have you reduced the portion sizes of meals?	<p>Note the number of days (0-30) <input type="text"/> <input type="text"/></p> <p>If you say once a week, mark 4  If he says occasionally mark 90  If you say hardly ever, mark 91  If you say never, mark 0  Do not know: 98</p>
<b>S14 07</b>	During the past 30 days, how many times have you reduced the portion sizes of adults so children could be fed, because you didn't have enough food or money to buy more?	<p>Note the number of days (0-30) <input type="text"/> <input type="text"/></p> <p>If you say once a week, mark 4  If he says occasionally mark 90  If you say hardly ever, mark 91  If you say never, mark 0  Do not know: 98</p>
<b>S14 08</b>	During the past 30 days, how many times family members who work were fed at the expenses of those who do not work? ( <i>reduction of ration of those family members that don't work</i> )	<p>Note the number of days (0-30) <input type="text"/> <input type="text"/></p> <p>If you say once a week, mark 4  If he says occasionally mark 90  If you say hardly ever, mark 91  If you say never, mark 0  Do not know: 98</p>
<b>S14 09</b>	During the past 30 days, how many times have you reduced the number of daily meals?	<p>Note the number of days (0-30) <input type="text"/> <input type="text"/></p>

		<p>If you say once a week, mark 4          If he says occasionally mark 90          If you say hardly ever, mark 91          If you say never, mark 0          Do not know: 98</p>
<b>S14 10</b>	During the past 30 days, how many times didn't you eat all day?	<p>Note the number of days (0-30) <input type="text"/> <input type="text"/></p> <p>If you say once a week, mark 4          If he says occasionally mark 90          If you say hardly ever, mark 91          If you say never, mark 0          Do not know: 98</p>
<b>S14 11</b>	What was the last month that you received PROCOMIDA ration?	<p>Note the number. month(1-12) <input type="text"/> <input type="text"/></p> <p>Do not know: 98</p>

## Appendix E: Evaluation Dates

<b>Dates / Periods</b>	<b>Evaluated Clusters</b>	<b>Completed surveys</b>	<b>Expected surveys</b>	<b>% of interviews</b>
<b>June 15 to June 22</b>	16	310	320	96.88
<b>June 25 to June 29</b>	10	197	200	98.50
<b>July 2 to July 13</b>	24	477	480	99.38
<b>Totals</b>	50	984	1000	98.40

## Appendix F: Information Sources

Insert List of all information sources including documents reviewed (list of references – have asked Marcel to provide), key informants (# mothers, # children, # CHVs). **KARINA – can you extract from data?**

Level	Respondent	# of Respondents (n)
<b>Community</b>	CHV (local staff or related with MSPAS)	
<b>CC</b>	CHV (local staff or related with MSPAS)	
<b>Household</b>	Mother	
	Child under 5 years of age	

## Appendix G: Questionnaire Modules (Topics)

### Topics Included in Community Level Questionnaires

Section	Topic	Description	Addressed to
<b>Heading</b>	General information of the survey	Coding of the interviewers, geographic location.	CHV (local staff or related with MSPAS)
<b>I</b>	General information of the interview	Date and time of the survey, reporting data.	
<b>II</b>	Health infrastructure in the locality	Presence of health personnel and official buildings and traditional. Distances between home and health infrastructure.	
<b>III</b>	Available staff in the communities	Local health personnel (midwives, traditional healers, health monitors).	
<b>IV</b>	Community participation	Local Health Organization (Committee or Health Committee and its functions).	

### Topics Included in CC Level Questionnaires

Section	Topic	Description	Addressed to
<b>Headings EC1, EC2</b>	General information	Geographic location of the Convergence Center.	Local staff or related with MSPAS (CHV)
<b>Initial information EC1, EC2</b>	General information	Date, time, name and position of the respondent.	
<b>I (EC1)</b>	Education and basic knowledge of the informant	Schooling, working time in relation to health, training received on the care and feeding of the pregnant mother, nursing mother, sick children, overall health. Basic knowledge of AIEPI-AINME-C, use of nutritional supplements for mothers and children.	
<b>II (EC2)</b>	Danger Signs in Pregnancy	Knowledge of health in relation to the danger signs during pregnancy, delivery and postpartum. Warning signs related to child health. Knowledge in immunization, growth monitoring, de-worming, use of nutritional supplements.	

### Topics Included in Household Level Questionnaires

Section	Topic	Description	Addressed to
<b>Initial</b>	Household General information	Household identification and geographical location. Information of the interview.	Mothers
<b>I</b>	Members of the household	Listing and coding of household members. Basic information about the family (integration, leadership, language. No. of children under 24 and 60 months).	

<b>II</b>	Dietary Diversity Household	Diet composition of the household.	
<b>III</b>	Food Safety	Frequency of the household feeding, availability of financial resources to purchase food.	
<b>IV</b>	Knowledge of the mother	Knowledge of danger signs in pregnancy, childbirth, newborn care (diseases, nutrition, breastfeeding, hygiene practices).	
<b>V</b>	Pre and post natal health	Attendance and frequency of prenatal care. Institutions that have visited. Causes of attendance / non-attendance at health centers. Attention from MSPAS staff. Vaccination. Supplements for mother and child. Care during and after delivery. Evaluation of maternal care.	
<b>VI</b>	Baby food	Breastfeeding, child feeding.	
<b>VII</b>	Vaccinations and preventive health	Verification of vaccination, supplementation, deworming, and growth control.	
<b>VIII</b>	Morbidity and attention seeking	Child health problems associated with breathing and digestion among others. Treatments applied from home to health services.	
<b>IX</b>	Home Action Plan	Tenure of the Plan. Characterization of housing (floor, ceiling, walls). Access to water and sanitation.	
<b>X</b>		Anthropometry.	Children < 5
<b>XI</b>	Using food from PROCOMIDA	Reception or non-reception of rations and their motives. Consumption and duration of rations.	Mothers
<b>XII</b>	Participation in other projects	Other projects which involved the target population, help they provide.	
<b>XIII</b>	resilience	Questions about resilience strategies in homes during the 30 days prior to the interview. Last date for reception of food PROCOMIDA.	
<b>Conclusion</b>	Final survey Metadata	End time, language used, the result of the interview, other observations.	Interviewer
<b>Revision</b>		Review editor, date, results, and recommendations.	Editor

## Appendix H: Implementation Area Map

