**WASH Benefits study**

**Demographic Information of the Household**

|  |  |  |
| --- | --- | --- |
| **Household Id & Mother Id:** |  | |
| **Target Child’s Name:** |  | |
| **FRA Name:** |  | |
| **FRA ID:** |  | |
| **Date of Interview:** |  | |
| **Is this a daily, weekly, or monthly visit?** | 1. Daily (V2-V6)  2. Weekly (V1, V7, V8)  3. Monthly (P) | |\_\_\_| |

Iqvm †ewbwdU Kgb gwWDj 6

Lv`¨ MÖnY ZvwjKv - Dcv`vb welqK cÖkœcÎ

weeiY bs 4 (2013.10.22)

WASH Benefits Common Module 6

Food Frequency Questionnaire

Version Number 4 (2013.10.22)

cÖ‡qvM‡¶Î : wbw`©ó wkïiv

Administer to: Target Children

DËi`vZv : wkïi c&ªv\_wgK cwiPhv©Kvix

Respondent: Child’s primary caregiver.

c&ªv\_wgK cwiPhv©Kvix n‡jb wZwb whwb AwaKvsk mgq wkïi m‡½ \_v‡K| (GUv ‡ekxifvM ‡¶‡Î gv-B n‡q \_v‡K)

(The primary caregiver is the person that spends the most time with the child. This is often the mother.)

**f~wgKv**

Avwg GLb Avcbvi wkïi (bvg) Lv`¨MªnY msµvšÍ wel‡q wKQy cÖkœ Ki‡Z PvB| cÖ\_‡g Avgvi Rvbv `iKvi ‡h MZKvj Ges MZ 7 w`‡bi g‡a¨ wkïi (bvg) Lv`¨MªnY m¤ú‡K© ej‡Z cvi‡eb|

**Introduction**

Now I would like to ask you some questions about feeding [NAME]. First I need to know if you will be able to tell me about feeding [NAME] yesterday and over the last week.

Avcwb wK Rv‡bb wkï (bvg) MZKvj wK wK †L‡q‡Q?

Do you know what [NAME] consumed yesterday?

🞎 1 n¨vu (603 bs cÖ‡kœ hvb) Yes [skip C.603]

🞎 2 bv No

hw` bv nq Z‡e Ggb †KD wK Av‡Q †h Rv‡b wkï wK †L‡qwQj Ges whwb Avgv‡`i cÖkœmg~‡ni DËi w`‡q mnvqZv Ki‡e?

*If No,* Is there someone else who knows what the child ate, who can sit with us today and help answer questions?

🞎 1 n¨uv Yes

🞎 2 bvNo

wkïi mv‡\_ DËi`vZvi m¤ú©K

Respondent relationship to the participating child

🞎 1 gv Mother

🞎 2 evev Father

🞎 3 †evb Sister

🞎 77 Ab¨vb¨ (wbwÏ©ó Kiyb) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other (specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

wkï †h Lvevi †L‡q‡Q †hgb ey‡Ki `ya, Zij Lvevi Ges Ab¨vb¨ Lvevi

**Breastfeeding, Liquids, and Foods Eaten by the Child**

***C.605***

wkïwU wK GL‡bv ey‡Ki `ya cvb Ki‡Q, bvwK †m m¤ú~b©fv‡e eviwZ Lvevi Lv‡”Q?( hw` wkï ey‡Ki `ya Lvq Zvn‡j 1 †KvW Kiæb)

Is the baby still breastfeeding, or is he/she completely weaned?

🞎 1 GL‡bv ey‡Ki `ya cvb K‡i (607 bs cÖ‡kœ hvb) **Still**, breastfeeding (**Skip to C.607)**

🞎 2 evowZ Lvevi Lv‡”Q. ‡Kvb ey‡Ki `ya cv‡”Q bv (weaned, not receiving any breast milk)

***C.607***

GLb Avgv‡K ejyb wkïwU (bvg) MZKvj KZevi ey‡Ki `ya cvb K‡i‡Q ?

Now I would like you to tell me how many times [NAME] breastfed yesterday.

🞎🞎 evi TIMES

**NOTE: Skip C.607c if this is a daily visit**

**C. 607c**

MZ mßv‡n wK †Kvb w`b wkïi (bvg) ¶zavg›`v n‡qwQj?

In the past week, were there any days that [NAME] lost his/her appetite?

|  |  |
| --- | --- |
| 1. **DËi Response** | 1. **KZw`b How many days?** |
| 🞎 **1 n¨vu** Yes  🞎 **2 bv (608 bs cÖ‡kœ hvb )** No [skip to 608]  🞎 **99 Rvwb bv (608 bs cÖ‡kœ hvb )**  99 Don’t Know [skip to 608] | 🞎 w**`b** Days |

GLb MZKvj mvivw`b Avi mviviv‡Z (†kl 24 N›Uv, mv¶vrKv‡ii mgq ‡\_‡K) Avcbvi wkï [bvg] wK wK Zij Lvevi †L‡q‡Q Avwg †m m¤ú‡K© wKQz Rvb‡Z PvB‡ev| Avcbvi wkï ‡h Zij Lvevi †L‡q‡Q & Avwg †m m¤ú‡K© Rvb‡Z PvB, Zv Ab¨ †h †Kvb Lvev‡ii mv‡\_ wgwk‡q †nvK bv †Kb |

ZvwjKv †\_‡K cÖkœ¸‡jv co–b Ges mwVK N‡i wUK wPý w`b

Now I would like to ask you about liquids that [NAME] may have had yesterday during the day or at night (last 24hours, starting from the time interview). I am interested in whether your child had the item even if it was combined with other foods.

*For each item on the list, read the question below and tick the appropriate box.*

**C.608**

‡Kvb cvbxq cvb K‡i‡Q wKbv? **(ZvwjKv †\_‡K cÖ‡Z¨KwU cÖkœ c‡o †kvbvb )**

Did [NAME] drink/have any [ITEM FROM LIST]? *Read question 14 times, once for each item*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Lvevi Gi bvg Food Item** | **GB cvbxq Uv †L‡q‡Q/ cvb K‡i‡Q wKbv?**  **Drink / take / eat this item?** | **MZKvj w`‡b ev iv‡Z KZ evi (bvg) GB LveviwU †L‡q‡Q/ cvb K‡i‡Q ? (ZvwjKv †\_‡K)**  **How many times yesterday during the day or night did [NAME] consume [ITEM FROM LIST]?** |
| 1. | cvwb Water? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv 99 Don’t Know | 🞎🞎 **evi** Times |
| 2. | wPwbi cvwb Sugar water? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 3. | cÖvwYR `ya, †KŠUvi `ya, ¸ov `ya?  Milk, including any animal fresh milk, milk in tin or box, or powdered milk? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 4. | wkï Lv`¨ †hgb b¨vb, j¨vK‡Uv‡Rb, ev‡qvwgj A\_ev gvB eq? Infant formula such as NAN or Lactogen or Biomeal or My Boy? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 5. | `ya Pv? Tea made with milk? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 6. | is Pv? Tea made without milk? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 7. | `B? Yogurt? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 8. | `ya ev cvwb w`‡q dzUv‡bv km¨ RvZxq Lvevi †hgb mywR, Pv‡ji ¸ov BZ¨vw` ? Thin Porridge or Barley? | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 9. | d‡ji im? Fruit juice | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 10. | cvwbi gZ cvZjv my¨c [†Kvb k³ Dcv`vb Qvov]  Clear broth [soup without solid ingredient] | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 11. | Wv‡ei cvwb (Ab¨ wKQzi mv‡\_ bv wgwk‡q)  Coconut water (plain) | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |
| 12. | niwjKm ev Ab¨ ‡Kvb m®úyiK úvwbq Horlicks (or any other supplementary drinks) | 🞎 1 n¨vu Yes  🞎 2 bv No  🞎 99 Rvwb bv  99 Don’t Know | 🞎🞎 **evi** Times |

Gi ci MZKvj mvivw`b Avi iv‡Z (‡kl 24 N›Uv, mv¶vrKv‡ii mgq ‡\_‡K) Avcbvi wkï [bvg] wK wK †L‡q‡Q Avwg †m m¤ú‡K© wKQ zcÖkœ wR½vmv Ki‡ev| Avcbvi wkï hv wKQz †L‡q‡Q &Avwg †m m¤ú‡K© me wKQzB Rvb‡Z PvB, Zv evmvq ev Ab¨ †h †Kvb RvqMvq †nvK bv †Kb |

wb‡`©kbvi Rb¨ Avjv`v c„ôv e¨envi Kiƒb,hv gv ‡Kg‡b Ki‡Z mvnvh¨ Ki‡e| gv‡K ej‡Z w`b wkïwU wK †L‡qwQj| wkï wU hv †L‡qwQj , cÖwZwU Lvevi ( A\_ev Dcv`vb ) G ‡Mvj wPý w`b Ges n¨uv †Z wUK wPý w`b

Next I would like to ask you some questions about the foods that [NAME] ate yesterday during the day or at night (last 24hours, starting from the time interview). I would like to know everything that [NAME] ate, whether at home or someplace else.

*Use the separate page of instructions, with questions to help the mother remember. Do not read the list below. Let the mother tell you what the child ate. Circle each food (or ingredient) that the child ate, and tick “[****√****] 1 Yes” for that food group.*

**wb‡b¥i ZvwjKvwU c‡o ïbv‡eb bv**

**C.609**

|  |  |  |
| --- | --- | --- |
|  | wkï MZKvj ‡h Lvevi/Lv`¨ ˆZixi Dcv`vb †L‡q‡Q(†Svj A\_ev wm× hv B †nvK bv †Kb)  Foods/ingredients in recipes (may be in a sauce or porridge) eaten by the child yesterday |  |
| 1 | wLPzox Khichuri  ( wLPzox wK wK w`‡q ivbœv n‡q‡Q †R‡b wb‡q dzW MÖc Abyhvqx bx‡P †KvW Kiyb)  (tick ‘yes’ and ask for the ingredients and code below according to food group) | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 2 | cvwb‡Z ev `y‡a wm× Kiv km¨ RvZxq Lvevi †hgb: mywR,fvZ, iywU, byWzjm, Ab¨vb¨ km¨ RvZxq `vbv`vi Lv`¨  Porridge Rice Bread/ Roti Noodles Other foods made by grain | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 3 | wgwó Kzgov, MvRi, Ab¨vb¨ njy` meRx  Pumpkin Carrots Other yellow vegetable | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 4 | Avjy mv`v wgwó Avjy  Potato White sweet potato | 🞎 1 n¨vu Yes  🞎 2 bvi No |
| 5 | wgwó Kzgov kvK, mwilv kvK, gUi ïwU kvK, cyBu kvK, Ab¨vb¨ Mvp meyR kvK  Pumpkin Mustard Bean Pigeon pea/ Motorshuti Other dark green  leaves leaves leaves leaves leaves | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 6 | cvKv Avg , cvKv †cu‡cu  Ripe mango Ripe papaya | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 7 | Kjv, Avbvim, ‡cqviv, Av‡cj, Av½yi, Kgjv Ab¨vb¨ dj  Banana Pineapple Guava Apple Grape Orange Other fruit | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 8 | U‡g‡Uv, wcuqvR , gvkiyg, ‡pom, ZvRv mxg/gUi ïwU Ab¨vb¨ mewR  Tomato Onion Mushroom Lady’s finger Fresh bean / Motorshuti other Vegetable | 🞎 1 n¨vu Yes  🞎2 bv No |
| 9 | KwjRv wMjv  Liver Kidney Heart | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 10 | †h †Kvb gvsm ,cï cvwLmn  Any type of meat / flesh, including from birds and animals | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 11 | †h †Kvb ai‡Yi wWg  Any type of egg | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 12 | ZvRv gvQ, ïUwK gvQ, Ab¨vb¨ gvQ / mvgyw`ªK Lvevi  Fresh fish Dried fish Other fish / seafood | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 13 | mxg,Wvj,mqv, Pxbvev`vg, †Kki, fvix Pxbvev`vg Ab¨vb¨ †h †Kvb Wvj ev ev`vg RvZxq Lv`¨  Beans Peas / Soya Groundnut Cashew Pounded Any other  Lentils groundnut legume or nut | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 14 | cwbi `B Ab¨vb¨ `ya RvZxq Lv`¨  Cheese Yogurt Other milk products | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 15 | Dw™¢¾ ‡Zj (WvjWv) cïi Pwe© GK ai‡bi gvLb  Vegetable oil Animal fat Margarine | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 16 | PK‡jU wgwó/ K¨vwÛ wcVv wgwó we¯‹zU  Chocolate Sweets / candies Cake Cookies / sweet biscuits | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 17 | ¯^v` e„w× KviK imyb gmjv  Seasonings Garlic Spices | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 18 | wPswo, KvKov  Prawns Crab | 🞎 1 n¨vu Yes  🞎 2 bv No |
| 19 | hw` Lv`¨ ZvwjKvq bv \_v‡K Zvn‡j wb‡P Lvev‡ii bvg wjLyb|  *If not on list above, write food(s) here and at bottom* | 🞎 1 n¨vu Yes  🞎 2 bv No |

Avcwb MZKvj mvivw`b Avi iv‡Z (‡kl 24 N›Uv, mv¶vrKv‡ii mgq ‡\_‡K) Avcbvi wkï [bvg] wK wK †L‡q‡Q Zv ej‡jb [wcQ‡bi c„ôvi †Mvj Kiv Lvev‡i bvg ¸‡jv co–b] GQvov Avcbvi wkï [bvg] bv¯Ívmn Avi wK wKQz †L‡q‡Q ?

**C.610**

You mentioned that [NAME] ate [read back circled foods on previous page] yesterday during the day or at night (last 24hours, starting from the time interview).

Did [NAME] have any other food at all, including snacks?

🞎 1 n¨vu Yes

🞎 2 bv No

hw` n¨v nq, Zvn‡j c~‡e©i c„ôvi cÖkœ ¸‡jv Avevi Kiyb Ges †Mvj wPý w`b | g‡b Kiv †kl n‡j, hw` †mB `‡ji †Kvb Lvevi ev Lv`¨ Dcv`v‡b †Mvj Kiv bv nq Zvn‡j bv †Z wUK wPý w`b|

hw` C.609Ges C.610 Gi me DËi bv nq Zvn‡j C.611 bs cÖ‡kœ hvb |

*If “yes”, use the same probing questions and circle on the list on previous page.* ***At the end of the recall tick “[****√****] 2 No” if no food or ingredient is circled for that group.***

If C.609 and C.610 are all ‘No’ skip to C.611

**C. 610a**

MZKvj mvivw`b Avi mviviv‡Z (‡kl 24 N›Uv, mv¶vrKv‡ii mgq ‡\_‡K) Avcbvi wkï [bvg] KZevi k³, Avav k³ Av\_ev big Lvevi †L‡q‡Q Zij Lvevi ev‡`?

†bvU : mKj ai‡bi `ya ev cvwb w`‡q dzUv‡bv km¨ RvZxq Lvevi |

How many times did [NAME] eat solid, semi-solid, or soft foods other than liquids yesterday during the day or night (last 24hours, starting from the time interview)? *Note: include all forms of porridge, including thin porridge.*

🞎🞎 **evi** Times

GLb Avwg Avcbvi Kv‡Q wfUvwgb/wgbv‡ij Gi ewo A\_ev Wªcm m¤ú©‡K Rvb‡Z PvB‡ev|

Now I would like to ask you about vitamin/mineral pills or drops.

**NOTE: Skip C.613 & C.614 if this is a daily visit**

**C.613**

MZ mvZ w`‡b Kqw`b Avcbvi wkï [bvg] wfUvwgb/wgbv‡ij Gi ewo A\_ev Wªcm wb‡q‡Q?

On how many days did [NAME] have any vitamin/mineral pills or drops in the last 7 days?

**(0 - 7)=w`b** [00 n‡j C.615 bs cÖ‡kœ hvb]

(0 – 7) = DAYS[*if* 00 then skip to C.615]

66 = †L‡q‡Q,wKš‘ Kqw`b †L‡q‡Q Zv Rv‡bbv

66 Child had, but number of days not known

99 = †L‡q‡Q wK Lvqwb Rv‡bbv

99 Don’t know if child had or not

🞎🞎

**C.614**

hw` wkï wfUvwgb/wgbv‡ij Gi ewo A\_ev Wªcm wb‡q \_v‡K : wK ai‡bi?

If baby was given vitamin / mineral drops or pills:   What type?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DËi `vZv‡K †gvoK †`Lv‡Z ejyb Ges Dc‡ii jvB‡b bvg wjLyb|

*Ask the respondent to show the package and write the name on the line above.*

 **ch©‡e¶Y:**ewo A\_ev Wªcm Gi bv‡gi , Z‡\_¨i Drm wK?Observation: What is the source of the information on the pill or drop name? 

🞎 1 Z\_¨ cvIqv hvq wb Information not available

🞎 2 Z\_¨ msMÖnKvix †gvoK †`‡L‡Q Data collector saw package

🞎 3 DIi `vZv g‡bK‡i bvg ej‡Z †c‡i‡Q Respondent remembered and told name

**NOTE: Skip C.615 part 3 & 4 (day before yesterday and in past 7 days) if this is a daily visit**

**C.615**

wkï wK KL‡bv gqjv ev gvwU wL‡q‡Q?

Has the child eaten any dirt or soil?

g‡b Kivi Rb¨ úªwZwU mgq Avjv`v fv‡e Rvb‡Z Pvb

: *Ask for each recall period:*

|  |  |  |
| --- | --- | --- |
| 1 | AvR Today | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |
| 2 | MZKvj Yesterday | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |
| 3 | MZ Kv†ji Av‡Mi w`b Day before yesterday | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |
| 4 | MZ mvZ w`b (&AvR‡Ki w`b †\_‡K MZ GK mßvn?) In the past 7 days (since this day last week?) | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |

**NOTE: Only ask this question if Household ID + Mother ID is in special list (provided by jess)**

**NOTE: Skip C.616 part 3 & 4 (day before yesterday and in past 7 days) if this is a daily visit**

**NOTE: Skip all of C.616 if this is a monthly visit**

**C.616**

Has the child consumed “Shonamoni”?

g‡b Kivi Rb¨ úªwZwU mgq Avjv`v fv‡e Rvb‡Z Pvb

: *Ask for each recall period:*

|  |  |  |
| --- | --- | --- |
| 1 | AvR Today | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |
| 2 | MZKvj Yesterday | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |
| 3 | MZ Kv†ji Av‡Mi w`b Day before yesterday | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |
| 4 | MZ mvZ w`b (&AvR‡Ki w`b †\_‡K MZ GK mßvn?) In the past 7 days (since this day last week?) | 🞎 1 Yes 🞎 2 No 🞎 99 Don’t know |