

Household Instrument

S.No.	Question	Options	Instructions
Section A: Household Selection			
A1	District Code	[From dropdown list]	
A2	District	[From dropdown list]	
A3	Project Code	[From dropdown list]	
A4	Project	[From dropdown list]	
A5	Sector Code	[From dropdown list]	
A6	Sector	[From dropdown list]	
A7	Anganwadi Code	[From dropdown list]	
A8	Anganwadi Name	[From dropdown list]	
A9	UID	[From dropdown list]	
A10	Respondent Name	[From dropdown list]	
A11	Husband Name	[From dropdown list]	
A12	Enter Village	[Enter text]	
A13	Enter Tola	[Enter text]	
A14	Enter Surveyor Name	[Enter text]	
A15	Enter Surveyor Code	[Enter integer]	
A16	Are the respondent and husband name matching with the tracking sheet?	0 No 1 Yes	
	<i>If no, call your supervisor immediately and inform about the discrepancy. Do not begin survey until the discrepancy is cleared.</i>		
	<i>Note: [Informed consent]</i>		
A17	Do you agree to take part in the survey?	0 No 1 Yes	If 0, skip to the end
A18	Name of the respondent	[Enter text]	
A19	How many children's details will be filled in this survey? <i>(Surveyor note: Enter 1 if one child, 2 for twins, 3 for triplets)</i>	[Enter integer]	Response to lie between 1 and 3
Repeat A20-A22 for each child to be surveyed			
A20	Name of the child	[Enter text]	
A21	Sex of the child	1- Boy 2- Girl -87- Other -89- Did not answer	
A22	Date of birth of the child <i>Note to surveyors: If date is not known, enter -88. But month and year must be filled in</i>	[DD/MM/YYYY]	
A23	How many adult members does this household have? (Over 13 years of age)	[Enter integer]	
A24	How many children does this household have? (13 years old or younger)	[Enter integer]	

Section C: Infant and Maternal Morbidity

	<i>Note to respondent: Now I will ask you about the health of your child whose weight and height were just measured. These questions relate to episodes of illness that your child would have suffered in the last 3 months</i>		
C1	Was your child unwell in the last 3 months? <i>(Surveyor note: Please record any illness – small illnesses like cough, cold, diarrhea, vomiting as well as serious illnesses which require hospitalisation)</i>	0 No 1 Yes -88 Did not know -89 Did not answer	If 0, skip to C5
C2	What types of illnesses did he/ she have over the last 3 months? <i>Select all that apply</i>	1 Cold/ Cough/ Fever 2 Diarrhea/ Vomiting/ Stomach infections 3 Malaria/ Jaundice/ Dengue/ Other vector-based disease 4 Measles/ Chickenpox 5 Pneumonia 6 Physical injuries/ Fracture -87 Other -88 Did not know -89 Did not answer	
C3	For how many days was your child unwell in the last 1 month (30 days)?	[Enter integer]	
C4	How many times did you show your child when they were unwell to each of the following the last 3 months:		
C4.1	Government doctor/ Government hospital/ PHC	[Enter integer]	-88 Don't know -89 Did not answer
C4.2	Private doctor/ Private hospital/ Private clinic	[Enter integer]	-88 Don't know -89 Did not answer
C4.3	ANM/ Sub-centre	[Enter integer]	-88 Don't know -89 Did not answer
C4.4	Jholawala/ Bengali doctor/ Chemist	[Enter integer]	-88 Don't know -89 Did not answer
C4.5	Village healer/ Witch-doctor	[Enter integer]	-88 Don't know -89 Did not answer
C4.6	Self-medication	[Enter integer]	-88 Don't know -89 Did not answer
C4.7	Home remedies (like giving tulsi leaves, ghee, garlic, etc)	[Enter integer]	-88 Don't know -89 Did not answer
C4.8	Other (specify)	[Enter integer]	-88 Don't know -89 Did not answer

C5	Have you been unwell in the last 3 months? <i>(Surveyor note: Please record any illness – small illnesses like cough, cold, diarrhea, vomiting as well as serious illnesses which require hospitalisation)</i>	0 No 1 Yes -88 Did not know -89 Did not answer	If 0, skip to D1
C6	What types of illnesses did you have over the last 3 months? <i>Select all that apply</i>	1 Cold/ Cough/ Fever 2 Diarrhea/ Vomiting/ Stomach infections 3 Malaria/ Jaundice/ Dengue/ Other vector-based disease 4 Measles/ Chickenpox 5 Pneumonia 6 Physical injuries/ Fracture -87 Other -88 Did not know -89 Did not answer	
C7	For how many days were you unwell in the last 1 month (30 days)?	[Enter integer]	
C8	How many times did you go to the following in the last 3 months when you were unwell:		
C4.1	Government doctor/ Government hospital/ PHC	[Enter integer]	-88 Don't know -89 Did not answer
C4.2	Private doctor/ Private hospital/ Private clinic	[Enter integer]	-88 Don't know -89 Did not answer
C4.3	ANM/ Sub-centre	[Enter integer]	-88 Don't know -89 Did not answer
C4.4	Jholawala/ Bengali doctor/ Chemist	[Enter integer]	-88 Don't know -89 Did not answer
C4.5	Village healer/ Witch-doctor	[Enter integer]	-88 Don't know -89 Did not answer
C4.6	Self-medication	[Enter integer]	-88 Don't know -89 Did not answer
C4.7	Home remedies (like giving tulsi leaves, ghee, garlic, etc)	[Enter integer]	-88 Don't know -89 Did not answer
C4.8	Other (specify)	[Enter integer]	-88 Don't know -89 Did not answer

Section D: Dietary Diversity

	<i>Now we will ask you some questions about the food you ate yesterday. Please think about all the food items consumed yesterday and let us know if you and your child consumed these items.</i>		
D1.1	[Cereals #1] Did you eat roti yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D1.2	[Cereals #1] Did your child eat roti yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D2.1	[Cereals #2] Did you eat rice yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D2.2	[Cereals #2] Did your child eat rice yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D3.1	[Cereals #3] Did you eat rice-based products like chilka roti, poha, chura, idli, or dosa yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D3.2	[Cereals #3] Did your child eat rice-based products like chilka roti, poha, chura, idli, or dosa yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D4.1	[Cereals #4] Did you eat bread or biscuits yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D4.2	[Cereals #4] Did your child eat bread or biscuits yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D5.1	[Cereals #5] Did you eat any other grains yesterday such as corn, millets, dalia, porridge, or cerelac?	0 No 1 Yes -88 Did not know -89 Did not respond	
D5.2	[Cereals #5] Did your child eat any other grains yesterday such as corn, millets, dalia, porridge, or cerelac?	0 No 1 Yes -88 Did not know -89 Did not respond	
D6.1	[Legumes and Nuts #1] Did you eat any dal yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D6.2	[Legumes and Nuts #1] Did your child eat any dal yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	

D7.1	[Legumes and Nuts #2] Did you eat soyabean dal or soyabean chunks yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D7.2	[Legumes and Nuts #2] Did your child eat soyabean dal or soyabean chunks yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D8.1	[Legumes and Nuts #3] Did you eat any nuts like peanuts, almonds, cashews, pistachios, or walnuts yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D8.2	[Legumes and Nuts #3] Did your child eat any nuts like peanuts, almonds, cashews, pistachios, or walnuts yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D9.1	[White Roots and Tubers #1] Did you eat potatoes or sweet potatoes yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D9.2	[White Roots and Tubers #1] Did your child eat potatoes or sweet potatoes yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D10.1	[White Roots and Tubers #2] Did you eat breadfruit, yam, lotus root, turnip, water chestnut, or green bananas yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D10.2	[White Roots and Tubers #2] Did your child eat breadfruit, yam, lotus root, turnip, water chestnut, or green bananas yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D11.1	[Dark Green Leafy Vegetables #1] Did you eat any green leafy vegetables yesterday such as spinach, mustard leaves, beet leaves, bathua leaves, or amaranth leaves?	0 No 1 Yes -88 Did not know -89 Did not respond	
D11.2	[Dark Green Leafy Vegetables #1] Did your child eat any green leafy vegetables yesterday such as spinach, mustard leaves, beet leaves, bathua leaves, or amaranth leaves?	0 No 1 Yes -88 Did not know -89 Did not respond	
D12.1	[Other Vegetables #1] Did you eat any food that contained onion or tomato yesterday?	0 Neither 1 Only respondent ate 2 Only child ate 3 Both respondent and child ate	
D12.2	[Other Vegetables #1] Did your child eat any food that contained onion or tomato yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	

D13.1	[Other Vegetables #2] Did you eat any other type of vegetable such as cauliflower, cabbage, patal, brinjal, beans, peas, mushroom, bamboo, green pepper, or garlic yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D13.2	[Other Vegetables #2] Did your child eat any other type of vegetable such as cauliflower, cabbage, patal, brinjal, beans, peas, mushroom, bamboo, green pepper, or garlic yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D14.1	[Vitamin A Rich Fruit and Veg #1] Did you eat any orange vegetables such as pumpkin, carrot, sweet potato or squash yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D14.2	[Vitamin A Rich Fruit and Veg #1] Did your child eat any orange vegetables such as pumpkin, carrot, sweet potato or squash yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D15.1	[Vitamin A Rich Fruit and Veg #2] Did you eat any orange fruits such as mango, papaya, musk melon or apricots yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D15.2	[Vitamin A Rich Fruit and Veg #2] Did your child eat any orange fruits such as mango, papaya, musk melon or apricots yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D16.1	[Other Fruits #1] Did you eat any other fruits such as apple, banana, fig, guava, custard apple, pineapple, watermelon, amla, orange, grapes, raisins, pomegranate, jackfruit or melon yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D16.2	[Other Fruits #1] Did your child eat any other fruits such as apple, banana, fig, guava, custard apple, pineapple, watermelon, amla, orange, grapes, raisins, pomegranate, jackfruit or melon yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D17.1	[Eggs #1] Did you eat any eggs yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D17.2	[Eggs #1] Did your child eat any eggs yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D18.1	[Flesh Meat #1] Did you eat any non-veg yesterday such as chicken, mutton, pork, duck, or beef?	0 No 1 Yes -88 Did not know -89 Did not respond	

D18.2	[Flesh Meat #1] Did your child eat any non-veg yesterday such as chicken, mutton, pork, duck, or beef?	0 No 1 Yes -88 Did not know -89 Did not respond	
D19.1	[Organ Meat #1] Did you eat any organ meat yesterday like kidney or liver?	0 No 1 Yes -88 Did not know -89 Did not respond	
D19.2	[Organ Meat #1] Did your child eat any organ meat yesterday like kidney or liver?	0 No 1 Yes -88 Did not know -89 Did not respond	
D20.1	[Seafood #1] Did you eat any seafood yesterday like fish, crabs, or prawns?	0 No 1 Yes -88 Did not know -89 Did not respond	
D20.2	[Seafood #1] Did your child eat any seafood yesterday like fish, crabs, or prawns?	0 No 1 Yes -88 Did not know -89 Did not respond	
D21.1	[Oils and Fats #1] Did you consume oil, ghee, or butter through any of the items eaten yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D21.1	[Oils and Fats #1] Did your child consume oil, ghee, or butter through any of the items eaten yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D22.1	[Spices, Condiments, Beverages #1] Did you consume chilli or spices through any of the items eaten yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D22.2	[Spices, Condiments, Beverages #1] Did your child consume chilli or spices through any of the items eaten yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D23.1	[Spices, Condiments, Beverages #2] Did you drink tea or coffee yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D23.2	[Spices, Condiments, Beverages #2] Did your child drink tea or coffee yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D24.1	[Spices, Condiments, Beverages #3] and [Sweets #1] Did you drink any cola, sherbet, or juice yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D24.2	[Spices, Condiments, Beverages #3] and [Sweets #1]	0 No 1 Yes -88 Did not know	

	Did your child drink any cola, sherbet, or juice yesterday?	-89 Did not respond	
D25.1	[Sweets #2] and [Milk Products #1] Did you eat kheer, halwa, laddo, or mithai yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D25.2	[Sweets #2] and [Milk Products #1] Did your child eat kheer, halwa, laddo, or mithai yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D26.1	[Sweets #3] and [Milk Products #2] Did you or your child eat cake, chocolate, or ice cream yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D26.2	[Sweets #3] and [Milk Products #2] Did your child eat cake, chocolate, or ice cream yesterday?		
D27.1	[Milk Products #3] Did you consume any milk products such as milk, paneer, dahi, or cheese yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D27.2	[Milk Products #3] Did your child consume any milk products such as milk, paneer, dahi, or cheese yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D28.1	[Milk Products #4] and [Spices, Condiments, Beverages #3] Did you drink lassi or chhas yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D28.2	[Milk Products #4] and [Spices, Condiments, Beverages #3] Did your child drink lassi or chhas yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	
D29.1	Did you or your child consume any other food item yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	If 1, ask D30.1
D30.1	Please specify details	[Enter text]	
D29.2	Did your child consume any other food item yesterday?	0 No 1 Yes -88 Did not know -89 Did not respond	If 1, ask D30.2
D30.2	Please specify details	[Enter text]	
D31	How many times yesterday did your child eat any solid, semi-solid or soft foods (excluding breast milk)? <i>Surveyor note: Count episodes as separate if there is a gap of 30 minutes or more between them</i>	[Enter integer]	

	Now we will ask you about how many times your breastfed your child yesterday. Please think about all the times that you fed your child breast milk for more than 2-3 minutes.		
D32	[Breastfeeding #1] How many times did you breastfeed your child yesterday from 6am – 12pm? <i>Surveyor note: Count episodes as separate if there is a gap of 30 minutes or more between them</i>	[Enter integer]	
D33	[Breastfeeding #2] How many times did you breastfeed your child yesterday from 12pm – 6pm? <i>Surveyor note: Count episodes as separate if there is a gap of 30 minutes or more between them</i>	[Enter integer]	
D34	[Breastfeeding #3] How many times did you breastfeed your child yesterday from 6pm – 10pm? <i>Surveyor note: Count episodes as separate if there is a gap of 30 minutes or more between them</i>	[Enter integer]	
D35	[Breastfeeding #4] How many times did you breastfeed your child yesterday from 10pm – 7am this morning? <i>Surveyor note: Count episodes as separate if there is a gap of 30 minutes or more between them</i>	[Enter integer]	

SECTION F: PMMVY			
F1	Is this your first child?	0 No 1 Yes -88 Did not know -89 Did not answer	
F2	If yes, did the sevika register you for the Pradhan Mantri Matritva Vandana Yojana scheme - through which you get Rs. 5,000 for your first pregnancy?	0 No 1 Yes -88 Did not know -89 Did not answer	
F3	If yes, have you received any transfers through this scheme?	0 No 1 Yes -88 Did not know -89 Did not answer	
F4	How much money have you received?	[Enter integer]	
F5	Did you withdraw this money?	0 No 1 Yes -88 Did not know	

		-89 Did not answer	
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Section G: Beliefs

Now I am going to ask you some questions on how much you think pregnant and lactating mothers should eat.

G1	Do you think a woman should eat more than usual, less than usual, or the same as usual during pregnancy?	0 – Same as usual 1 – Less than usual 2 – More than usual -88 – Did not know -89 – Did not answer	
G2	Do you think a woman should eat more than usual, less than usual, or the same as usual during lactation?	0 – Same as usual 1 – Less than usual 2 – More than usual -88 – Did not know -89 – Did not answer	

Section H: THR

Now I am going to ask you some questions about the availability of Take Home Rations (THR) that the sevika gives you at the anganwadi.

Ask H1-H4 for pink packets, green packets, and orange packets.

H1	Did you receive these pink THR packets from the sevika at the anganwadi in May? <i>Surveyor to show image of pink packet</i>	0 – No 1 – Yes -88 – Did not know -89 – Did not answer	If 1, skip to H3
H2	Did you not receive these packets because you did not want them or because the sevika never gave them to you?	1 – Respondent did not want that month's THR 2 – Sevika did not give that month's THR -87 – Other -88 – Did not know -89 – Did not answer	Skip to H5
H3	How many pink packets did you receive in May?	[Enter integer]	
H4	When did you pick up these packets from the anganwadi?	[Enter integer] 1 – Days ago 2 – Weeks ago 3 – Months ago -88 – Did not know -89 – Did not answer	

Ask H5-H6 for pink packets, green packets, and orange packets.

H5	Did you receive these pink THR packets from the sevika at the anganwadi in April? <i>Surveyor to show image of pink packet</i>		
H6	Did you receive these pink THR packets from the sevika at the anganwadi in March?		

	Surveyor to show image of pink packet		
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SECTION G: Financial Inclusion			
	Now we are going to ask you about your bank account.		
G1	Do you have a bank account? <i>Note to surveyor: Do not include joint accounts</i>	0 No 1 Yes -88 Did not know -89 Did not answer	If 0, -88, or -89, skip to E1
G2	Have you ever withdrawn money from this account?	0 No 1 Yes -88 Did not know -89 Did not answer	If 0, -88, or -89, skip to E1
G3	Over the last 3 months, how many times have you withdrawn money from this account?	[Enter integer]	
G4	Over the last 3 months, how much money have you withdrawn from this account?	[Enter integer]	

SECTION E: Expenditure			
	Now we are going to ask you about expenditure on food in the last week. Please call the person who usually goes to the market.		
E1	Who usually goes to the market to shop for food items?	1 Respondent herself 2 Respondent's husband 3 Other family member	
E2	Is the respondent the person who usually does the shopping?	0 No 1 Yes	
E3	How many times in the last week did you or someone from your household go to the market or kirana store?	[Enter integer]	
	<i>Repeat for each visit</i>		
E4	How much money was spent on food items such as vegetables, fruits, eggs, meat, milk, dal, spices, etc on this visit?	[Enter integer]	
E5	How many times did you or someone from your household go to the ration shop (FPS) in the last month?	[Enter integer]	
	<i>Repeat for each visit</i>		
E6	How much money was spent on food items such as rice, wheat, oil, and sugar on this visit?	[Enter integer]	
	Now we are going to ask you about household expenditure on non-food items in the last month. Please call the person who would know most about this.		
E7	How much money was spent on household supplies and personal items in the last 1 month (30 days)?	[Enter integer]	

	For example, items such as soap, hair oil, clothes, shoes, etc?		
E8	How much money was spent on educational expenses in the last 1 month (30 days)? For example school fees, tuition fees, school uniforms, textbooks, etc	[Enter integer]	
E9	How much money was spent on medical expenses in the last 1 month (30 days)? For example doctor's fees, medicines, etc	[Enter integer]	
E10	How much money was spent on fuel or electricity in the last 1 month (30 days)? For example kerosene, LPG, cooking fuel, manure cakes, solar, electricity bill, etc	[Enter integer]	
E11	How much money was spent on house, land, or shop rent in the last 1 month (30 days)?	[Enter integer]	
E12	How much was spent on farm or business inputs in the last 1 month (30 days)? For example fertilizer, seeds, pump, generator, etc	[Enter integer]	
E13	How much money was spent on repairs or maintenance of the house or business place in the last 1 month (30 days)?	[Enter integer]	
E14	How much money was spent on household assets in the last 1 month (30 days)? For example TV, radio, wall clocks, electronics, kitchen appliances, etc	[Enter integer]	
E15	How much money was spent on festivals, weddings, pujas, etc in the last 1 month (30 days)?	[Enter integer]	
E16	How much money was spent on travelling in the last 1 month (30 days)? For example tempo or bus fares, train tickets, etc?	[Enter integer]	

SECTION H: Respondent contact information

H1	Respondent mobile number	[Enter integer]	
SECTION I: Surveyor Input			
I1	Record GPS location		
I2	Survey status code	SS01 – Survey complete SS02 – Survey incomplete SS03 – Maternal death (baby unavailable) SS04 – Respondent cannot be found SS05 – Respondent not at home/ busy/ unwell	

		SS06 – Respondent not available for entire survey duration SS07 – Refused before starting the survey SS08 – Refused during the survey SS09 – Other (disabled, etc) SS10 – Miscarriage or infant death SS11 – Wrong registration (overage baby)	
I3	Is the respondent:	1 Respondent is dead 2 Respondent has migrated	
I4	Who told you?	1 Household member 2 Neighbour	
I5	Name of the person	[Enter integer]	
I6	Mobile number of the person	[Enter integer]	
I7	Surveyor comments	[Enter text]	