Consent

| S.No. | Question | Options | Instructio ns | |
|--------------------------------|--------------------------|----------------------|------------------|--|
| 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 | Enter Surveyor Name | [Enter text] | | |
| A12 | Enter Surveyor Code | [Enter integer] | | |
| | Note: [Informed consent] | | | |

| A13 | Do you agree to take part in the survey? | 0 No 1 Yes 2 Yes, but with an appointment | If 0, skip to < <ss_code>> If 2, skip to <<ss_code>></ss_code></ss_code> |
|-----|--|--|--|
| A14 | Did you eat meals at home and are not fasting/party/wedding? | 0 No 1 Yes | If 1, skip to < <ss_code >></ss_code |
| A15 | Can we record this call for quality assurance purposes? | 0 No 1 Yes | |
| A16 | Village Name | [Enter text] | |
| A17 | Tola Name | [Enter text] | |
| A18 | Name of Respondent | [Enter text] | |
| A19 | Is the beneficiary going to answer this survey? | 0 No 1 Yes | |
| A20 | Where is the beneficiary? | Passed away Has migrated or moved away | Ask if A19 = 0 |

| A21 | How is the respondent answering the survey related to the beneficiary? | 1 Self 2 Husband 3 Son 4 Daughter 5 Father-in-law 6 Mother-in-law 7 Brother-in-law 8 Sister-in-law 9 Father 10 Mother 11 Brother 11 Brother 12 Sister 13 Grandfather/Grandmother 14 Son-in-law/Daughter-in-law 15 Cousin 16 Aunt/Uncle 17 Niece/Nephew 18 Husband's other wife 19 Step-son/ Step-daughter -87 Other -88 Did not know -89 Did not answer | Ask if A19=0 |
|-----|--|---|-----------------|
| A22 | Name of tracking baby | [Enter text] | |
| A23 | Gender | 1- Boy2- Girl-87- Other-89- Did not answer | |
| A23 | Does the child mentioned in the tracking have a twin child who is alive? | 0 No 1 Yes | |

| A23.1 | Name of twin child | [Enter text] | Ask if A23 = 1 |
|-------|--|---|-------------------|
| A23.2 | Gender | 1- Boy 2- Girl -87- Other -89- Did not answer | Ask if A23 = 1 |
| A24 | How many adult members does this household have? | [Enter integer] | |
| A25 | How many children does this household have? | [Enter integer] | |

| Section B: Dietary Diversity | | | |
|------------------------------|--|--|--|
| | - | s about the food you ate yesterday. Please med yesterday and let us know if you and | |
| B1.1 | Did you eat any cereal yesterday? Note to surveyor: Select all items consumed by the respondent | 1 Rice 2 Roti 3 Other grains 4 Bread or biscuits 5 Rice based products 6 Chowmein, maggi, or noodles | |

| | | 99 Nothing out of these | |
|--------|--|--|----------------------------------|
| B1.2 | Did your child eat any cereal yesterday? Note to surveyor: Select all items consumed by the child | 1 Rice 2 Roti 3 Other grains 4 Bread or biscuits 5 Rice based products 6 Chowmein, maggi, or noodles 99 Nothing out of these | |
| B1.3 | Which utensil do you use to serve rice ? | Serving spoon Flat spoon Bowl | Ask if selected(B1.1, "1") |
| B1.3.1 | How many <utensils> of rice did you have? Note to Surveyor: Count all meals and add</utensils> | [Enter integer] | Ask if selected(B1.1, "1") |

| B1.3.2 | How many <utensils> of rice did your child have yesterday? Note to Surveyor: Count all meals</utensils> | [Enter | integer] | Ask if selected(B1.2, "1") |
|--------|--|-------------|----------------|----------------------------|
| | and add | | | |
| B2.1 | How many rotis did you eat yesterday? Note to Surveyor: Count all meals and add | [Enter | integer] | Ask if selected(B1.1, "2") |
| B2.2 | How many rotis did your child eat yesterday? Note to Surveyor: Count all meals and add | [Enter | integer] | Ask if selected(B1.2, "2") |
| B3.1 | Did you eat any legume yesterday? | 1 | Dal | |
| | | 2 | Nuts | |
| | | 3 | Soyabean | |
| | | 4 | Satoo | |
| | | 99 these | Nothing out of | |
| B3.2 | Did your child eat any legume | 1 | Dal | |
| | yesterday? | 2 | Nuts | |
| | | 3 | Soyabean | |
| | | 4 | Satoo | |

| | | 99 Nothing out of these |
|------|---|--|
| B4.1 | Did you eat any tuber yesterday? | 1 Potato 2 Breadfruit, yam, lotus root, turnip, water chestnut, or green bananas 99 Nothing out of these |
| B4.2 | Did your child eat any tuber yesterday? | 1 Potato 2 Breadfruit, yam, lotus root, turnip, water chestnut, or green bananas 99 Nothing out of these |
| B5.1 | Did you eat any othveg yesterday? | 1 Any food that contained onion or tomato 2 Other type of vegetable 99 Nothing out of these |

| B5.2 | Did your child eat any othveg yesterday? | 1 Any food that contained onion or tomato 2 Other type of vegetable 99 Nothing out of these |
|------|---|---|
| B6.1 | Did you eat any fruit yesterday? | 1 Papaya/jackfr uit sabzi 2 Other fruits 99 Nothing out of these |
| B6.2 | Did your child eat any fruit yesterday? | 1 Papaya/jackfr uit sabzi 2 Other fruits 99 Nothing out of these |
| B7.1 | Did you eat any green leafy vegetables yesterday such as spinach, mustard leaves, beet leaves, bathua leaves, or amaranth leaves? | 0 No 1 Yes |
| B7.2 | 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 |

| B8.1 | Did you eat any orange fruit or vegetable yesterday? | 1 vegeta | Orange ables | |
|------|---|-------------|-----------------|--|
| | | 2 | Orange fruits | |
| | | 99 these | Nothing out of | |
| B8.2 | Did your child eat any orange fruit or vegetable yesterday? | 1 vegeta | Orange ables | |
| | | 2 | Orange fruits | |
| | | 99 these | Nothing out of | |
| B9.1 | Did you eat any nveg yesterday? | 1 | Eggs | |
| | | 2 | Flesh Meat | |
| | | 3 | Organ Meat | |
| | | 4 | Seafood | |
| | | 99 these | Nothing out of | |
| B9.2 | Did your child eat any nveg | 1 | Eggs | |
| | yesterday? | 2 | Flesh Meat | |
| | | 3 | Organ Meat | |
| | | 4 | Seafood | |
| | | 99 these | Nothing out of | |

| B10.1 | Did you consume oil, ghee, or butter through any of the items eaten yesterday? | 0 No 1 Yes |
|-------|---|--|
| B10.2 | Did your child consume oil, ghee, or butter through any of the items eaten yesterday? | 0 No 1 Yes |
| B11.1 | [Spices, Condiments, Beverages] Did you consume any of the following items yesterday? | 1 Chilli or spices 2 Pickle/chutne y 3 Tea/coffee 4 Cold drinks 5 Horlicks/Prote in powder 99 Nothing out of these |
| B11.2 | [Spices, Condiments, Beverages] Did your child consume any of the following items yesterday? | 1 Chilli or spices 2 Pickle/chutne y 3 Tea/coffee 4 Cold drinks |

| | | 5 Horlicks/Prote in powder 99 Nothing out of these |
|-------|---|--|
| B12.1 | Did you eat any sweets yesterday? | Kheer, halwa, ladoo, mithai Cake, chocolate, ice cream Nothing out of these |
| B12.2 | Did your child eat any sweets yesterday? | 1 Kheer, halwa, ladoo, mithai 2 Cake, chocolate, ice cream 99 Nothing out of these |
| B13.1 | Did you consume any milk products such as milk, paneer, dahi, or cheese yesterday? | 1 Milk 2 Milk products 3 Lassi, chaach, mattha 99 Nothing out of these |
| B13.2 | Did your child consume any milk products such as milk, paneer, dahi, or cheese yesterday? | 1 Milk2 Milk products3 Lassi, chaach, mattha |

| | | 99 Nothing out of these |
|-------|--|-------------------------|
| B15.2 | Did you eat any chips or kurkure yesterday? | 0 No 1 Yes |
| B16.1 | Did your child eat any chips or kurkure yesterday? | 0 No 1 Yes |
| B29 | How many times yesterday did your child eat any solid, semi-solid or soft foods (excluding breast milk)? Surveyor note: Count episodes as | [Enter integer] |
| | separate if there is a gap of 30 minutes or more between them | |

| B30 | Did you breastfeed your child in the last 24 hours? | 0 No 1 Yes -88 Did not know | |
|-----|---|-----------------------------|--|
| | | -89 Did not answer | |

| Section C: Infant Morbidity | | | | | |
|-----------------------------|---|--|----------------------------|--|--|
| | Note to respondent: Now I will ask yo coronavirus situation has impacted y | • | ow the | | |
| C1 | Was your child unwell in the last 3 months? (Surveyor note: Please record any illness – small illnesses like cough, cold, diarrhea, vomiting as well as serious illnesses which require hospitalisation) | 0 No 1 Yes -88 Did not know -89 Did not answer | If 0, skip to Section D | | |

| C2 | What types of illnesses did he/ she | 1 Cold/ Cough/ Fever | |
|------|---|--|-----------------------|
| | have over the last 3 months? | 2 Diarrhea/ Vomiting/ Stomach infections | |
| | Select all that apply | 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 unwell to each of the following the la | - | |
| C4.1 | | | -88 Don't know |
| | Government doctor/ Government hospital/ PHC | [Enter integer] | -89 Did not answer |
| C4.2 | | | -88 Don't know |
| | Private doctor/ Private hospital/ Private clinic | [Enter integer] | -89 Did not answer |

| C4.3 | | | -88 Don't know |
|------|-----------------|-----------------|-----------------------|
| | ANM/ Sub-centre | [Enter integer] | -89 Did not answer |

| SECTIO | SECTION D: Market Access | | | | |
|--------|---|--|---|--|--|
| | Now we are going to ask you some questions about banking | | | | |
| D1 | Do you have a bank account? | 0 No 1 Yes -88 Did not know -89 Did not answer | If 0, -88, -89, skip to Section E | | |
| D2 | When was the last time you tried to withdraw money from your account? | 0 Have never withdrawn money 1 Within the last week 2 1-2 weeks ago 3 2-4 weeks ago 4 Between 31-60 days ago -88 Did not know -89 Did not answer | | | |

| 1 | ı | | Ī |] | I |
|---|----|---|---------------------------|---|---|
| | D3 | When was the last time you deposited money in your account? | 0 Never deposited money | | |
| | | | 1 Within the last 30 days | | |
| | | | 2 Between 31-60 days | | |
| | | | 3 Between 61-90 days | | |
| | | | 4 Over 90 days ago | | |
| | | | -88 Did not know | | |
| | | | -89 Did not answer | | |

| SECTION E: Expenditure | | | | |
|------------------------|--|---|--|--|
| | Now we are going to ask you about ellow the last week. Please call the person who market. | | | |
| E1 | Who usually goes to the market to shop for food items? | 1 Respondent herself2 Respondent's husband3 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] | | |
| | Repeat for each visit | | | |

| • | | 1 | • |
|------|--|--|---------------------|
| E4 | How much money was spent on food items such as vegetables, fruits, eggs, meat, milk, dal, spices, etc on this visit? | [Enter integer] | |
| E5.1 | Did you or someone from your household go to the ration shop (FPS) in the last month? | 0 No 1 Yes -88 Did not know -89 Did not answer | |
| E5.2 | How many times did you or someone from your household go to the ration shop (FPS) in the last month? | [Enter integer] | Skip if E5.1 = 0 |
| | Repeat for each visit | | |
| E6 | How much money was spent on food items such as rice, wheat, oil, and sugar on this visit? | [Enter integer] | |

| E7 | Now we are going to ask you about he non-food items in the last month. Pleat would know most about this. | | |
|----|---|-----------------|--|
| E9 | How much money was spent on household supplies and personal items in the last 1 month (30 days)? For example, items such as soap, hair oil, clothes, shoes, etc? | [Enter integer] | |

| E10 | 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] | |
|-----|---|-----------------|--|
| E11 | How much money was spent on medical expenses in the last 1 month (30 days)? For example doctor's fees, medicines, etc | [Enter integer] | |
| E12 | 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] | |
| E13 | How much money was spent on house, land, or shop rent in the last 1 month (30 days)? | [Enter integer] | |
| E14 | 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] | |
| E15 | How much money was spent on repairs or maintenance of the house or business place in the last 1 month (30 days)? | [Enter integer] | |

| E16 | 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] | |
|-----|---|--------------------------------|--|
| E17 | How much money was spent on festivals, weddings, pujas, etc in the last 1 month (30 days)? | [Enter integer] | |
| E18 | 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] | |
| E19 | Surveyor input: Was the information given by the respondent very accurate or more like an approximation? | 0 – Accurate 1 – Approximation | |

| SECTION F: Impact of Covid | | | | | |
|----------------------------|--|---------------|--|--|--|
| | Now we are going to ask you some questions about how coronavirus has affected your daily life | | | | |
| F1 | If you wished to withdraw money, would you be able to visit the bank/CSP/Pragya Kendra from where you usually withdraw money from? | 0 No 1 Yes | | | |

| | | 2 Never withdrawn money | |
|----|--|---|------------------|
| F2 | Over the past two weeks, how many times have you visited the bank/CSP/Pragya Kendra to withdraw money? | [Enter integer] | |
| F3 | If you wished to visit the market/kirana shop to purchase something, would you be able to visit the market/kirana shop easily? | 0 No 1 Yes | |
| F4 | Why were you or someone from your family not able to visit the FPS in the last month? | 1 Did not want to pick it up/ did not require it 2 No transport available 3 Unable to move due to ill health / old age 4 FPS was closed 5 Scared of police 6 Because of crowd 7 Money shortage 8 Dealer refused to give ration -87 Other, specify -88 Did not know -89 Did not answer | Skip if E5.1 = 1 |