Consent

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	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>>
A14	Did you eat meals at home and are not fasting/party/wedding?	0 No 1 Yes	If 1, skip to <<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?	1 Passed away 2 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 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- Boy 2- 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			
	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.		
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*	[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 and add*	[Enter integer]	Ask if selected(B1.2, "1")
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 Nothing out of these	
B3.2	Did your child eat any legume yesterday?	1 Dal 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/jackfruit sabzi 2 Other fruits 99 Nothing out of these	
B6.2	Did your child eat any fruit yesterday?	1 Papaya/jackfruit 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 Orange vegetables 2 Orange fruits 99 Nothing out of these	
B8.2	Did your child eat any orange fruit or vegetable yesterday?	1 Orange vegetables 2 Orange fruits 99 Nothing out of these	
B9.1	Did you eat any nveg yesterday?	1 Eggs 2 Flesh Meat 3 Organ Meat 4 Seafood 99 Nothing out of these	
B9.2	Did your child eat any nveg yesterday?	1 Eggs 2 Flesh Meat 3 Organ Meat 4 Seafood 99 Nothing out of these	

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/chutney 3 Tea/coffee 4 Cold drinks 5 Horlicks/Protein 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/chutney 3 Tea/coffee 4 Cold drinks	

		5 Horlicks/Protein powder 99 Nothing out of these	
B12.1	Did you eat any sweets yesterday?	1 Kheer, halwa, ladoo, mithai 2 Cake, chocolate, ice cream 99 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 Milk 2 Milk products 3 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 separate if there is a gap of 30 minutes or more between them*	[Enter integer]	

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: 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.	
C1	Who usually goes to the market to shop for food items?	1 Respondent herself 2 Respondent's husband 3 Other family member	
C2	Is the respondent the person who usually does the shopping?	0 No 1 Yes	
C3	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	

C4	How much money was spent on food items such as vegetables, fruits, eggs, meat, milk, dal, spices, etc on this visit?	[Enter integer]	
C5.1	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	
C5.2	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		
C6	How much money was spent on food items such as rice, wheat, oil, and sugar on this visit?	[Enter integer]	
C7	Surveyor input: Was the information given by the respondent very accurate or more like an approximation?	0 – Accurate 1 – Approximation	

	SECTION D: Sevika Interaction		
	Now we are going to ask you some questions about your Anganwadi Centre		
D1	In the past one month, how many days did you visit the anganwadi centre in your village?	[Enter integer]	
D2	In the past one month, how many days did the village sevika speak to you about your food and nutrition or government schemes?	[Enter integer]	
D3	Has the sevika visited your home in the last month?	0 No 1 Yes -88 Did not know -89 Did not answer	
D4	Over the last month did you receive any dry ration from the AWC? (THR)	0 No 1 Yes -88 Did not know -89 Did not answer	
Now I will read out a list of services, please let me know if you use these services at your anganwadi centre, or through home visits:			
D5.1	Deworming for children	0 No 1 Yes -88 Did not know -89 Did not answer	
D5.2	Height and weight measurement for children	0 No 1 Yes	

		-88 Did not know	
		-89 Did not answer	
D5.3	Information related to food and nutrition during pregnancy/ lactation	0 No 1 Yes -88 Did not know -89 Did not answer	
D5.4	Iron/ Calcium tablets during pregnancy and lactation	0 No 1 Yes -88 Did not know -89 Did not answer	
D5.5	Vaccination shots for pregnant women and infants	0 No 1 Yes -88 Did not know -89 Did not answer	
D5.6	Distribution of THR	0 No 1 Yes -88 Did not know -89 Did not answer	
D5.7	Registration for government schemes	0 No 1 Yes -88 Did not know -89 Did not answer	
D6	Over the last month, did you receive dry ration for your child (in lieu of hot cooked meals)?	0 No 1 Yes -88 Did not know	

		-89 Did not answer	

SECTION E: Cognition			
	Now we will ask you a few questions about your child's activities. We know that every child is different and children are able to do different activities at different ages. We just want to know about your child and what they have been able to do and haven't been doing yet.		
E1	Does your child run, stopping herself and without bumping into things or falling over?	1 Yes 2 Sometimes 3 Not Yet -88 Did not know -89 Did not answer	
E2	Does your child climb on furniture?	1 Yes 2 Sometimes 3 Not Yet -88 Did not know -89 Did not answer	
E3	Can your child remove clothes on her own without your help? (Mark as yes even if the child can only remove pants)	1 Yes 2 Sometimes 3 Not Yet -88 Did not know -89 Did not answer	

E4	When your child wants something does she tell you by pointing to it?	1	Yes	
		2	Sometimes	
		3	Not Yet	
		-88	Did not know	
		-89	Did not answer	
E5	When you ask your child to, does she go into another room and find familiar objects or toys? For example you might ask your child to "Bring water" or "Go get your chappal"	1	Yes	
		2	Sometimes	
		3	Not Yet	
		-88	Did not know	
		-89	Did not answer	
E6	Does your child say words other than "Mama" and "Papa?" For example words may include "Bakri" or "Gai" or "Kaan" or "Naak"	1	Yes	
		2	Sometimes	
		3	Not Yet	
		-88	Did not know	
		-89	Did not answer	
E7	Does your child say two word sentences? Such as "Khaana do" or "Mama paani do" or "Yeh kya hai?" or "Mera haath pakdo"	1	Yes	
		2	Sometimes	
		3	Not Yet	
		-88	Did not know	
		-89	Did not answer	
E8	Does your child scribble?	1	Yes	
		2	Sometimes	
		3	Not Yet	
		-88	Did not know	
		-89	Did not answer	

E9	Has your child started eating food on her own?	1	Yes	
		2	Sometimes	
		3	Not Yet	
		-88	Did not know	
		-89	Did not answer	