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| <b>GHEI HUMJIBRE, KOJINA, SOROANO 2019</b> | <b>WOMAN QUESTIONNAIRE</b> |
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| <b>CONSENT</b> |  |
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| <p><i>Read consent again if woman did not hear it at the beginning of household questionnaire:</i></p> <p>MY NAME IS _____ AND I AM WORKING WITH GHEI TO COLLECT INFORMATION ABOUT THE COMMUNITY SO THAT GHEI CAN BETTER SERVE EVERYONE. I WOULD LIKE TO ASK YOU QUESTIONS ABOUT YOU AND YOUR CHILDREN'S HEALTH. YOU MAY CHOOSE NOT TO PARTICIPATE OR NOT TO ANSWER ANY OF THE QUESTIONS. THE INFORMATION FROM THIS QUESTIONNAIRE WILL BE USED BY GHEI STAFF, BUT NO ONE ELSE WILL BE ABLE TO SEE IT OR USE IT FOR ANY PURPOSE. THIS INTERVIEW WILL TAKE ABOUT 5 MINUTES FOR THIS PORTION AND 15 MINUTES TO DISCUSS EACH CHILD. WOULD YOU LIKE TO PARTICIPATE?</p> <p>YES <span style="margin-left: 200px;">NO</span></p> | <p><i>If woman has already agreed to participate, read this:</i></p> <p>NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT YOU AND YOUR CHILDREN'S HEALTH. THIS INTERVIEW WILL TAKE ABOUT 5 MINUTES FOR THIS PORTION AND 15 MINUTES TO DISCUSS EACH CHILD. AGAIN, ALL THE INFORMATION WE OBTAIN WILL NOT BE SHARED WITH ANYONE OUTSIDE OF GHEI STAFF.</p> |
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| <b>WOMAN IDENTIFICATION</b> | <b>WI</b> |
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| WI1. Interviewer name: _____     | WI2 Today's date (DD/MM/YYYY):<br>____ / ____ / ____ |
| WI3. GHEI house code (HH3) _____ |  |
| WI4. Woman's name: _____         | WI5. Woman's line number (CN1): _____                |

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| <b>CHILD IDENTIFICATION</b> | <b>CI</b> |
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| CI1. HOW MANY CHILDREN DO YOU HAVE WHO ARE YOUNGER THAN AGE 5 YEARS?<br><br><i>Children younger than five include children 0-4 years (born <u>after</u> today's month and day in 2014) _____</i> |                           |
| CI2. PLEASE TELL ME THE NAME OF EACH CHILD UNDER AGE 5.<br><i>After each child, ask: DO YOU HAVE ANOTHER CHILD UNDER AGE 5?</i>  |                           |
| CHILD'S NAME (CN2):  | Child's line number (CN1) |
|  | CI3. ____ ____            |
|  | CI4. ____ ____            |
|  | CI5. ____ ____            |
|  | CI6. ____ ____            |
|  | CI7. ____ ____            |

**CODER check:**

Does the number of children listed above: \_\_\_\_ match the number of children's questionnaires filled: \_\_\_\_? If not, ask the interviewer for clarification.

| PREGNANCY   |   | PR  |
|---|---|---|
| PR1. WE WOULD LIKE TO HELP PREGNANT WOMEN BECOME HEALTHIER, SO WE ARE ASKING ALL WOMEN ABOUT PREGNANCY. REMEMBER THAT WE WILL NOT SHARE YOUR RESPONSES WITH ANYONE. ARE YOU CURRENTLY PREGNANT? | No.....0<br>Yes.....1<br>Don't know.....88  | 0 ⇒ End of questionnaire<br><br>88 ⇒ End of questionnaire |
| PR2. HOW MANY MONTHS PREGNANT ARE YOU?  | _____ Months<br>Don't know .....88  |   |
| PR3. CAN YOU SHOW ME WHAT TYPE OF SALT YOU USE IN YOUR HOUSEHOLD?<br>(CIRCLE ALL SALT TYPES OBSERVED).  | No (Refused/Not Observed)..... 0<br>If yes, record Brand/Type of Salt:<br>Annapurna salt. ....1<br>Local salt (big) .....2<br>Local salt (small) .....3<br>Other (specify).....4<br>_____<br>Don't know .....88 |   |

Ghana Health and Education Initiative

**INTERVIEWER:** Now for each child under age 5 years (0-4 years) write the name and census line number in the information panel of a separate **Child Questionnaire**.