Curamericas Global-Kenya

April 2020

KIKPOP KPC SURVEY: KNOWLEDGE, PRACTICE, AND COVERAGE

Based on household interviews of mothers of children younger than 24 months in Kisii County, Kenya

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Abbreviation and Acronyms Guide

- 1) HH: Household
- 2) MOH: Ministry of Health
- 3) MNCH: Maternal, Newborn and Child Health
- 4) KCMOH: Kisii County Ministry of Health
- 5) ODK: Open Data Kit
- 6) Curamericas: Curamericas Global
- 7) ENA: Essential Newborn Actions
- 8) WASH: Water, Sanitation and Hygiene
- 9) MAD: Minimum Acceptable Diet
- 10) HFD: Healthcare Facility Delivery
- 11) KTM: KoboToolBox
- 12) ODK: Open Data Kit
- 13) TBA: Traditional Birth Attendants
- 14) ODF: Open Defecation Free
- 15) USAID: United States Agency for International Development
- 16) KIKOP: Kisii Konya Oroiboro Project
- 17) EBF: Exclusive Breastfeeding

Introduction

a. Background

In 2010 the people of The Republic of Kenya voted to adopt a new constitution, which called for a decentralization of government structures as well as services. This allowed for the establishment of 47 semi-autonomous counties, which as of 2013, were each responsible for their own public works and services such as health care. While the central national government retains responsibility of creating health policy, providing technical assistance and management of referral facilities the groundwork for the health system is maintained by the individual counties.

The area of focus for this project is Kisii County. Situated in the southwestern region and sharing common borders with Nyamira County to the North, Narok County to the South, and Homabay and Migori Counties to the West, Kisii is an urban center of the southwest region. Per the 2019 Kenyan National Census the region is home to 1,266,860 individuals including more that 703,000 women and more than 234,000 children younger than 5 years of age.7 Overall, Kisii County spends less per capita on health than the national average (\$14.94 versus \$15.95 annually). The number of health personnel per capita is far below the national average with 21 nurses, 3 doctors, and 10 clinical officers per 100,000 people in Kisii compared to 55 nurses, 10 doctors, and 21 clinical officers per 100,000 people nationally. The population in Kisii County is quite dense, with approximately 2,800 people per sq. mile (North Carolina is 211 per sq. mile). In Kisii, most homes are built with mud walls and aluminum roofs. There is limited health care available in communities and health facilities often lack basic infrastructure (like running water), supplies and staff.1 This may explain why diarrheal diseases account for a larger proportion of population mortality than in the country as a whole (4.4% vs 3.7%). Common causes of morbidity in adults and children include malaria, diarrhea, skin diseases, and respiratory infections. Acute respiratory infections (ARI) are the leading cause of morbidity in children under age five, followed by malaria and diarrhea.1

Currently, the health and nutrition baseline indicators in Kisii County are below the national average.7 This situation is especially dire in terms of the child mortality rate (60 per 1,000 live births), the infant mortality rate (43 per 1,000 live births) and neonatal mortality rate (23 per 1,000 live births). UNICEF estimates the country-wide under-5 mortality rate to be 45.6 per live births. The Kisii County health authorities acknowledge incomplete data and consistent underreporting, which may contribute to dramatically under-estimated mortality rates for the region. Areas of special concern include maternal and neonatal mortality as well as malnutrition. The Kenyan Ministry of Health (MOH) found that 8.4% of children under age five were underweight (WFA<-2 Z-scores) in Kisii County while 25.5% of children in the same area were stunted (HFA<-2 Z-scores).6 Currently, the mortality of children under-5 is 74 per 1,000 live births, part of this alarming trend related to nutrition. In

The MOH also reported that only 69.3% of women delivered at the health facility.6 While only 62.8% of married or in union women aged 15-49 used any modern method of family planning.6 These factors have resulted in a high Maternal Mortality Ratio (MMR) in Kisii County (~500 deaths/100,000 births), which is significantly higher than the Kenyan national MMR (~ 488 deaths/100,000 live births).10 Currently, the leading cause of death for mothers in the region is postpartum hemorrhage.10 Studies attribute this high rate to access to quality healthcare facilities as well as poor health seeking behavior and poor socio-economic factors.10

Contributing to this high maternal mortality are the "four delays": 1) delay in family recognition of an obstetric complication; 2) once recognized, family delay seeking medical attention; 3) delay securing transportation to a health facility; and 4) once at the health facility, delay in receiving treatment. The associated factors include lack of family and community preparedness, lack of ambulances and costly transportation, lack of women's decision-making autonomy, adherence to traditions of home delivery, lack of health facility personnel and resources, and fear of abusive disrespectful treatment at the health facility. For these reasons, as well as those outlined within this document, the region was chosen by Curamericas Global (Curamericas) for the site of a three-year maternal, newborn and child health (MNCH) project.

In January 2018, Curamericas Global (Curamericas) and the Kisii County Department of Health (KCDOH) began a three-year MNCH project, called the Kisii Konya Oroiboro Project (KIKOP) to respond to the above challenges. The project is implemented in the catchments of three Level 2 and 3 health facilities in Kitutu Chache North and Kitutu Chache South sub-Counties of Kisii County. The project aims to serve approximately 35,960 beneficiaries, which includes 8,925 women of reproductive age (WRA-defined as 14-49 years of age), 14,386 adolescents (defined as 10-14 years of age), and 1,430 children under two years (U2).

The major objectives for this project include increasing access to quality, respectful maternal/newborn services; improving attention to obstetric emergencies (including postpartum hemorrhage); increasing provision of essential newborn care (including neonatal resuscitation); and reduced child stunting in under-two children.

This model provisions culturally appropriate, locally accessible, fully equipped, community-owned obstetric facilities and builds the capacity of paid front-line indigenous health workers to provide quality routine and emergency obstetric care and malnutrition screening and counseling. A uniquely patient-centered, results-based framework, KIKOP's approach, mobilizes communities to drive change in the improvement of health and nutrition outcomes, working in sustainable partnerships with civil society and government.

The main interventions of KIKOP are to:

- 1) mobilize communities, Community Health Extension Workers (CHEWs), Village Health Committees (VHCs), Community Health Volunteers (CHVs) to work in partnership with the local health facility;
- 2) adapt existing Level 2 and Level 3 health facilities in the project to the Community Birthing Center Model;

- 3) train and incorporation of Traditional Birth Attendants to encourage facility-based deliveries and referral;
- 4) utilize village-based volunteers/mother peer educators to disseminate health messages using the Care Group approach;
- 5) utilize a census-based monitoring and evaluation approach utilizing Curamericas Global's Community-Based Impact-Oriented (CBIO) methodology;
- 6) empower community partners to create an obstetric emergency response system;
- 7) ensure women receive respectful, culturally appropriate, and equitable services during maternal care, with focused attention on those most at risk (poorest, least educated, highest parity, and of age outside of prime child-bearing years (adolescents and women over 35).

b. Study Purpose and Objectives Process and Partnership Building

The Knowledge, Practice and Coverage (KPC) survey measures standardized maternal-child health, WASH, and nutrition indicators. This KPC report presents baseline data on 45 maternal and child health indicators for the Nyagoto catchment in Kitutu Chache North. Baseline data on the other two project catchments in Kitutu Chache South was collected in June 2018 and is included in a separate report. Together, this data provides overall baseline information for the region, which will be used to inform project and MOH programming.

The KIKOP works to reduce the rates of infant, child, and maternal mortality through community-driven health education and health facility improvements. The goal of the project is to reduce maternal/neonatal mortality and child stunting among women. This project aims to bridge the gap between health facilities and the community by providing health education and outreach and accomplishing the following:

- -Reduce deaths of mothers during pregnancy and delivery by 50%
- -Reduce deaths of neonates (babies in their first 28 days) by 35%
- -Reduce long-term, extreme malnutrition (i.e. stunting) by 50%
- -Reduce unwanted pregnancies in girls ages 10-19 so they can stay in school

c. Process and Partnership Building

A KPC is designed to be a participatory project that engages local partners and stakeholders throughout the process. A core component of this is capacity building and the ability to cultivate meaningful relationships within communities. This allows for the community to feel a sense of ownership regarding the project implementation, participation, and outcomes.

Curamericas Global has a rich history of conducting programming with communities on the African Continent for more than a decade. Specifically, the organization has been operating

within Kisii County, Kenya since October 2017 to reduce the number of mothers and infants dying from preventable causes. The primary local partner is the Kisii County Ministry of Health (KCMOH), but the leadership team, traditional birth attendants (TBA), and beneficiaries of the 39 communities of Nyagoto are also considered partners as well. Findings are reported to the KCMOH to help focus interventions to best serve mothers and their children within the catchment areas. In turn they provide support through training, supervision during census and surveys as well as technical assistance as needed. TBAs provide feedback on the health facility procedures and provider attitudes in order to increase health facility delivery, and in response Curamericas provides them with training on the importance of health facility delivery. Community leaders (clan elders) meet with us on a quarterly basis as participants on their village health committees. They help reinforce health messaging at the community level and set up community systems such as emergency transport.

The KPC is part of an extensive community entry process. This process involves initial meetings with beneficiaries as well as local and regional leaders followed by formative research through qualitative interviews conducted with project stakeholders: traditional birth attendants, health facility staff, mothers with children under age two, clan elders, community health volunteers, and Community Health Extension Workers. During this process KIKOP works with community stakeholders to map communities and conduct a household census. The KPC follows this process and utilizes local CHVs as interviewers and guides. Survey results were shared with community members and project stakeholders soon after analysis.

Methods

The KPC in Kisii County was a cross-sectional survey which employed quantitative data collection methods through structured questionnaires targeting mothers of children aged 0-23 months within the region to collect baseline program data.

a. Questionnaire Development and Scope

The questionnaire used in the KPC was created in 2018 by Curamericas staff to best fit the needs of the community and project. When the survey was redeployed in 2019, minor adjustments were made based on staff feedback. The final questionnaire consisted of 134 questions created to assess standardized maternal-child health, WASH, and nutrition indicators. The survey was written in English. It was translated into Kikisii, the local language of the region, during the interview.

The survey questions were broken down into household identifications and ten section modules which included:

- 1. Mother's demographic data
- 2. Mother's obstetric antecedents
- 3. Pregnant woman care
- 4. The birth and newborn care
- 5. Puerperium control and attention to newborn
- 6. Maternal lactation, nutrition and micronutrients
- 7. Complementary feeding

- 8. Water and Sanitation
- 9. Vaccination
- 10. Child Illness

Curamericas Global provides training to mothers and child caretakers on hand washing, water treatment and storage, proper feces disposal, the treatment of disease as well as pregnancy, birth, and postpartum health and well-being through educational home visits and the use of Community Health Promoters. The questionnaire was created to develop baseline data in order to assess program outcomes. All survey questions and labels are original content created by staff and uploaded on the ODK for use on internet enabled devices. All survey responses were recorded electronically and available in real-time after uploading to staff to assess internationally.

b. KPC Indicators

In total the KPC questionnaire covered ten modules to gather data focusing on 45 health indicators. A list of the indicators can be found in Appendix Section C along with the tabulation plan describing how those indicators were calculated. The program's main focus was on creating a baseline assessment for the eight key indicators in Table A below.

Table A: Key Health Indicators

Health facility deliveries	Percentage of women interviewed who report that their most recent delivery occurred in a health facility (clinic or hospital - level 2, 3, 4 or 5) attended by a health professional (doctor, nurse, nurse-midwife, professional midwife, auxiliary nurse).
Attention to obstetric complications	Percentage of women interviewed who report that they experienced a complication during pregnancy, delivery, or in the postpartum of their most recent pregnancy, <u>and</u> who received attention for the complication from a health professional (doctor, nurse, auxiliary nurse, professional midwife) in a health facility (clinic or hospital - level 2, 3, 4 or 5).
Respectful, culturally appropriate care	Percentage of women interviewed who report that their most recent delivery occurred in a health facility <u>and</u> who state that the delivery met all the following conditions a) they received respectful courteous service; b) presence of family permitted; c) the woman able to choose her position of delivery and birth attendant; d) the woman was given sufficient privacy and e) the woman/family were allowed to consume traditional teas/foods and conduct traditional practices.
Danger sign recognition	Percentage of women who, when interviewed, could name at least 3 danger signs in pregnancy that require immediate attention from a health professional. Percentage of women interviewed who can name at least 3 danger signs in delivery that require immediate attention from a health professional
	Percentage of women interviewed who can name at least 3 danger signs in the post-partum period for herself that require immediate attention from a health professional Percentage of women interviewed who can name at least 3 danger signs in the post-partum period for her newborn that require immediate attention from a health professional
Birth plan/ Emergency transportation- household	The percentage of women interviewed who state that their family had a birth/transport plan in place during their most recent pregnancy that meets at a minimum the following conditions: 1) identified the health facility where the woman plans to deliver; 2) how woman will get to the health facility and cost of that transportation; 3)identified how the family will secure the transportation money; 4) identified who will accompany the woman to the health facility; and 5) identified who will care for the woman's children and home during her absence and who will help her post-partum.

c. Survey Sites and Population

The survey was conducted from a single catchments of Kitutu Chache North Sub-County of Nyagoto, Kisii County with approximate population of 11,204 beneficiaries, which includes 2693 women of reproductive age (WRA-defined as 14-49 years of age), 4,377 adolescents (defined as 10-19 years of age), and 442 children under two years (U2). Table B below displays population and demographics of the catchments area. Within the catchment area there are 25 distinct villages, which contained 431 HH eligible to complete the survey at the time. A list of these villages can be found in the Appendix Section A.

Table B: Census Data

Catchment	Total Population	WRA	Under 2 years	Adolescents, Ages 10- 19 years
Matongo	10405	2604	435	4283
Iranda	14351	3628	553	5726
Nyagoto	11204	2693	442	4377
KENYA TOTAL	35960	8925	1430	14386

d. Demographic Data

For the given population a summary of the demographic data has been collected to create a snapshot of important facts regarding the community members from the 100 women with at least one child under the age of 24 months who completed the survey. The data is summarized below in Table C. The villages who participated as well as the number of participants from each village can be found in the Appendix Section A.

Table C: Demographic Snapshot of Participants

Characteristic of Respondents (n= 100)		n	Percent %
Age (years)	Median: 24 years		
(n=100)	Mean: 25.34 ±5.75		
	years		
	Range: 29 years		
Average Age of First Pregnancy	Mean	19.93	
		years	
Highest education attained	Some Primary	24	24%
	(Grades 4-7)		
	Completed Upper	21	21%
	Primary		
	Some Secondary	22	22%
	Completed	26	26%
	Secondary		
	College,	6	6%
	Pre-University		
	Some	1	1%
	College/University		
Language	Kisii	90	90%
	Kiswahili	10	10%
Average Monthly Household Income	5102.13	47	X
(Kenyan Shillings)			
Amount Spent on Medical Services in the	616.02	98	X
past month (per Household)			
(Kenyan Shillings)			
Marital status	Married	77	77%
	Married, but not	2	2%
	staying together		
	Separated	1	1%
	Single	19	19%
	Widowed	1	1%
Current occupation	Farming	64	64%
	Formal	2	2%
	Employment		
	Casual labor	2	2%
	Own Business	7	7%
	Petty	1	1%
	Trading/Hawking		
	Housewife	8	8%
	Dependent	15	15%
	Other	1	1%
Religion	Christian	100	100%

e. Sampling and Sample Size

Simple Random Sampling (SRS) was the primary strategy used for survey participation. Community maps provided a list of 431 households in the region eligible to participate in the survey. Household lists were generated one month prior to the survey (October 2019). A household had to contain a mother with a child under 24 months of age to be eligible for participation. The sampled villages are shown in Appendix Section A.

Samples were pulled using a random number generator. Three samples had to be pulled in order to locate the sufficient respondents given considerable in and out migration in the area. The first sample generated consisted of 108. Then two additional samples were created using SRS containing a total of 53 households.

The difficulties in data collection stemmed from having issues locating some respondents due to migration from census to KPC. It was apparent that there is a trend in the region that women within the North sub-county often migrate, returning back months later or sometimes never. Some reasons for this migration include domestic disputes, moving for school, and moving to be closer to work and family. Also, there is a belief that this was caused by people returning home for the national census (which was occurring at the same time) and then returning to the city after. 104 respondents were able to be located, 100 provided consent and completed the survey.

The four respondents who refused to provide consent stated that NGOs have come and gone without making an impact and therefore did not take part. Additionally, some respondents had poor experiences at health clinics and therefore refused consent.

f. Survey Planning and Organization

As mentioned above, the KPC survey was based on an initial baseline survey conducted previously in two different KIKOP catchments. The survey was updated by program staff to better serve the new catchment of Nyagoto. Program staff was responsible for developing, checking, and input of all questionnaire data into the ODK.

Before dissemination, Curamericas interns along with program staff in Kenya tested the survey for accuracy in three parts. The survey went through four drafts before the tests began. The first part of testing was to check the skip logic and patterns in the questionnaire. The second part of testing was to make sure all of the options aligned with the indicators and were simple to follow. The third part of pre-testing was to compare the paper survey to the online tablet survey module in order to ensure that all labels matched. After the three tests were completed a final practice test was administered to check work. In total, there were four trial runs of the survey and then an additional 2 field pre-tests with staff and volunteers before it was rolled out for community use.

g. Recruitment and Training

The in-country survey staff underwent a half day of group training, during which they became familiar with the questionnaire, data collection methods, indicators and answer definitions. Project staff created a PowerPoint presentation before the training for certain survey questions

that could potentially cause confusion. Although all KIKOP staff participated in the training, only 3 staff were involved in KPC data collection as the rest of the staff collected census data. These 3 staff – 2 Program Assistants and 1 Field officer - were selected by the Project Coordinator. During training Staff reviewed all indicators and ensured that the team had a uniform understanding of every question and all answer options - to ensure consistency in the data obtained and so that the questions could be accurately translated and/or explained to the interviewee.

Staff tested the questionnaire both individually and in pairs, with one person acting as the interviewer and the other responding as though they were a villager. It was a priority that all those who worked with the KPC were fluent in Kikisii and English. During training, the team was able to discuss every question and option from the survey in Kikisii, as well as take part in family planning demonstrations, and familiarize themselves with the MNCH booklet.

h. ODK Data Collection

KoboToolBox (KTB) and Open Data Kit (ODK) provide a framework for implementing field data gathering campaigns, and enhance the information management capabilities using mobile devices or tablets for data collection. One of the main advantages of the system is that it allows data gathering with or without internet connectivity. The survey was created and edited on paper and then inputted by program staff into KTB.

Once the KPC questionnaire was ready for use, it was inputted into KTB and then downloaded and connected to ODK. KIKOP and Curamericas staff tested the survey multiple times to check for any errors of the skips and flow in the questionnaire.

i. Data Collection and Field Procedures

The county and sub-county public health office and community health strategy focal person supported by Curamericas staff mobilized the village elders and CHVs within the catchment to prepare them for the survey. The village elders and CHVs guided the staff to visit the selected households to interview the mothers of children less than 24 months old.

When a mother/caregiver had more than one child aged 0-23 months, the youngest child was selected to minimize the mother's recall bias regarding health and nutrition care services received during (pregnancy, delivery, postpartum and infant and young child feeding). Furthermore, the youngest child is often more vulnerable to childhood illnesses, and thus was best suited to provide better morbidity patterns than older children in the same household.

The questionnaire was collected on tablets using ODK software described in the previous section and uploaded to Google Drive for analysis. The three-member team of surveyors in Kenya had the appropriate skills and knowledge of the system through their training to collect data and troubleshoot during data collection. Overall the team consisted of 2 project assistants and one field officer who were in the communities over an estimated 25 working days through the months of October and November 2019. The data was then provided for analysis on December 10th.

j. Data Quality Assurance

The use of tablets and ODK/KTB enabled staff to develop quality checks such as skip patterns, age limits and filters, which greatly minimize errors during data collection. This allowed field staff to concentrate on interviewing and active engagement with the respondents. The online real-time data access by staff in the country and in the United States through the server, enabled identification of errors by the field staff. The ODK also helped the staff to track the completed and submitted questionnaires daily verifying the supervisors' reports. The survey coordinator corrected errors in a timely manner allowing for missing data to be identified before the team completed the catchment. The strong supervision of the teams and clear roles discussed prior fieldwork contributed to improved quality of data.

k. Data Analysis

In order to complete data analysis all survey information was downloaded from the ODK server in .xls format and integrated into a master spreadsheet. The confidence interval (CI) values were calculated in Python or Stata using a library called SciPy, as well as an online software program called Winpepi. Fischer's 95% CI were used to widen values, while ensuring that data was still precise. Select indicator analyses were independently confirmed through multiple sources and fact-checking.

Results

In total, 100 mothers completed the survey and were used in the data analysis to provide baseline results for the 45 indicators assessed through the KIKOP program in Kisii, Kenya. The Tabulation Plan Tables containing all indicators can be found in the Appendix Section C. The KPC data below for the results serve as best estimates of the key maternal and infant health indicators. It is important to remember that these estimates are calculated with a certain level of error, as some indicators had a very low number of respondents leading to large confidence intervals. Each indicator was calculated at 95% confidence and is presented with upper and lower confidence intervals.

The tables below outline the findings of the 10 key indicators as well as deficits in the data analysis uncovered in relation to WASH goals, vaccination rates, and nutrition. The main concern with the results stems around small sample sizes lending to wide CIs. While we believe the data is sound reflective of the community, it should be noted that very wide CIs (0.50 to 1.10) can indicate data is consistent with a wide range of possibilities, future surveys will look to recruit higher numbers to generate narrower CIs.

Table D: Key Health Indicator Results

Indicator	Definition	Result (Percentage)
Health facility deliveries	Percentage of women interviewed who report that their most recent delivery occurred in a health facility (clinic or hospital - level 2, 3, 4 or 5) attended by a health professional (doctor, nurse, nurse-midwife, professional midwife, auxiliary nurse).	66% (CI: 56%, 75%)
Attention to obstetric complications	Percentage of women interviewed who report that they experienced a complication during pregnancy of their most recent pregnancy, and who received attention for the complication from a health professional (doctor, nurse, auxiliary nurse, professional midwife) in a health facility (clinic or hospital - level 2, 3, 4 or 5).	100% (CI: 81%, 100%)
	Percentage of women interviewed who report that they experienced a complication during pregnancy of their most recent delivery and who received attention for the complication from a health professional (doctor, nurse, auxiliary nurse, professional midwife) in a health facility (clinic or hospital - level 2, 3, 4 or 5).	100% (CI: 54%, 100%)
	Percentage of women interviewed who report that they experienced a complication during pregnancy of their most recent postpartum period and who received attention for the complication from a health professional (doctor, nurse, auxiliary nurse, professional midwife) in a health facility (clinic or hospital - level 2, 3, 4 or 5).	67% (CI: 35%, 90%)

D	Damanta a af i i i	00/ (Q1, 00/ 50/)
Respectful,	Percentage of women interviewed	0% (CI: 0%, 5%)
culturally	who report that their most recent	
appropriate care	delivery occurred in a health facility	
	and who state that the delivery met	
	all the following conditions a) they	
	received respectful courteous	
	service; b) presence of family	
	permitted; c) the woman able to	
	choose her position of delivery and	
	birth attendant; d) the woman was	
	given sufficient privacy and e) the	
	woman/family were allowed to consume traditional teas/foods and	
	conduct traditional practices.	
Dongor sign		15% (CI: 9%, 24%)
Danger sign	Percentage of women who, when interviewed, could name at least 3	15% (Cl. 9%, 24%)
recognition	danger signs in pregnancy that	
	require immediate attention from a	
	health professional.	
	•	2% (CI: 0%, 7%)
	Percentage of women interviewed	2% (CI: 0%, 7%)
	who can name at least 3 danger	
	signs in delivery that require immediate attention from a health	
	professional Remarks as of warmen interminated	50/ (CI, 20/ 110/)
	Percentage of women interviewed	5% (CI: 2%, 11%)
	who can name at least 3 danger	
	signs in the post-partum period for	
	herself that require immediate	
	attention from a health professional	150/ (CL 00/ 240/)
	Percentage of women interviewed	15% (CI: 9%, 24%)
	who can name at least 3 danger	
	signs in the post-partum period for	
	her newborn that require immediate	
D' 4 1 /	attention from a health professional	00/ (CI 00/ 40/)
Birth plan/	The percentage of women	0% (CI: 0%, 4%)
Emergency	interviewed who state that their	
transportation-	family had a birth/transport plan in	
household	place during their most recent	
	pregnancy that meets at a minimum	
	the following conditions: 1)	
	identified the health facility where	
	the woman plans to deliver; 2) how	
	woman will get to the health facility	
	and cost of that transportation;	
	3)identified how the family will	
	secure the transportation money; 4)	
	identified who will accompany the	
	woman to the health facility; and 5)	
	identified who will care for the	
	woman's children and home during	

her absence and who will help her postpartum.	

Table E: Maternal and Infant Care Behavior Indicator Results

Indicator	Definition	Results (Percent)
	Percentage of women interviewed who report that their most recent delivery occurred in a health facility (clinic or hospital - level 2, 3, 4 or 5) attended by a health professional (doctor, nurse, nurse-midwife, professional midwife, auxiliary nurse).	66% (CI: 56%, 75%)
Antenatal Care: 4+ Prenatal Checks	Percentage of women interviewed who had at least 4 ANC checks from a health professional prior to their most recent delivery per their Maternal Health Card.	34% (CI: 25%, 44%)
Male Partner Involvement in Newborn Care	Percentage of women interviewed who report that their husband/male partner accompanied them to at least one (1) antenatal care visit	27% (CI: 19%, 37%)
Essential Newborn Actions	Percentage of newborns of women interviewed [most recent delivery] who received all the following immediately after birth: a) immediate thermal care (drying and wrapping); b) immediate breastfeeding (IBF) (within 1 hour); c) clean cord care d) weighing and measuring; and e) BCG and Hep B immunization	1% (CI: 0%, 8%)

Postpartum Care	The percentage of women interviewed	34% (CI: 25%, 44%)
	who reported that they received a post-	
	partum check by a health professional	
	(doctor, nurse, auxiliary nurse,	
	professional midwife) for themselves and	
	their newborn within 48 hours of their	
	most recent delivery.	

Table F: WASH Indicator Results

Indicator	Definition	Results (Percent)
Handwashing Station	Percentage of households with a	0% (CI: 0%, 4%)
	handwashing station with cleaning	
	product, water and recipient	
Maternal Handwashing Behavior	The percentage of mothers	6% (CI: 2%, 13%)
	interviewed who report that in the	
	past 24 hours they washed their hands	
	with soap and water at all the four	
	critical moments: before food	
	preparation, before feeding children,	
	after defecation, and after attending	
	to a child who has defecated	
Proper POU Water Treatment	The percentage of women	6% (CI: 2%, 13%)
Troper 100 water Treatment	interviewed who state that their	070 (C1. 270, 1370)
	households are applying effective	
	water treatment (boiling, chlorination,	
	SODIS, or filter) regularly (either the	
	day of or the day before the	
	interview) to their water used for	
	drinking or cooking.	
Proper Water Storage	The percentage of women	15% (CI: 9%, 24%)
	interviewed who state that their	
	household stores all of their potable	
	water safely (in a covered	
	tank/cistern* or in a covered	
	container with a narrow (<4 cm)	
	opening) as verified through	
	interviewer observation.	
Improved Latrine	Percentage of mothers who had an improved latrine	63% (CI: 53%, 72%)
	improved fautific	

Open Defecation Free Household	Percentage of households of interviewed mothers that 1) have no open defecation site; 2) have a basic latrine facility with drop hole cover to prevent flies and 3) have a hand washing station, per observation by interviewer	0% (CI: 0%, 4%)
Proper Feces Disposal	The percentage mothers interviewed who state that she safely disposed of their child's feces the last time s/he passed stool (either put the stool or dirty water in a latrine or in a toilet connected to a drainage system).	61% (CI: 51%, 71%)
Child Deworming – 12 -17 Months	Percentage of 12-18-month children of mothers interviewed who had been dewormed [with albendazole or other MOH approved anti-parasite medication]in the past 6 months according to their health card	32% (CI: 15%, 54%)
Child Deworming – 18-24 Months (All)	Percentage of 18-24-month children of mothers interviewed who had been dewormed [with albendazole or other MOH approved anti-parasite medication]in the past 6 months according to their health card	0% (CI: 0%, 17%)

Table G: Nutritional Standard Indicator Results

Indicator	Definition	Results (Percent)
Minimum Dietary Diversity	Women interviewed with breastfed	39% (CI: 25%, 53%)
(MDD) of Breastfed Children	children between 6 and 23 months	
	who provided sufficient dietary	
	diversity within the past 24 hours	
Minimum Meal Frequency (MMF)	Women interviewed with breastfed	58% (CI: 43%, 71%)
 Breastfed Children 	children between 6 and 23 months	
	who provided sufficient feeding	
	frequency within the past 24 hours	

Minimum Acceptable Diet –	The percentage of women	23% (CI: 13%, 37%)
Breastfed Children 6-23 Months	interviewed with a child 6-23 months	
	who report practicing proper IYCF	
	practices for their 6-23-month-old	
	child in the past 24 hours, both in	
	providing sufficient dietary diversity	
	and frequency of feedings.	
EBF during the First 6 Months	Percentage of women interviewed	34% (CI: 23%, 47%)
	with a child 6+ months who report	
	that they practiced EBF for first 6	
	months	
EFT during Previous Day	Percentage of women interviewed	100% (CI: 88%, 100%)
	with a child <6 months who report	
	that they breastfed the previous day	

Table H: Child Immunization Rates and Deworming Indicator Results

Indicator	Definition	Results (Percent)
Immunization of Children – 6-11	Women of children ages 6-11	100% (CI: 78%, 100%)
months	months who report that their child	
	had received all required	
	vaccinations	
Immunization of Children – 12-17	Women of children ages 12-18	100% (CI: 86%, 100%)
months	months who report that their child	
	had received all required	
	vaccinations	
Immunization of Children – 18-24	Women of children ages 18-24	45% (CI: 23%, 68%)
Months	months who report that their child	
	had received all required	
	vaccinations	
Proper Treatment of Diarrhea	Percentage of under-2 children of	55% (CI: 23%, 83%)
(Curamericas)	mothers interviewed who had a	
	diarrhea episode in the two weeks	
	preceding the interview and whose	
	mothers report that they were	
	given ORS (packets or home	
	solution)	

Timely Treatment of Malaria with ACT	whose mothers were interviewed who were diagnosed with malaria during the previous two weeks and who were treated with ACTs the same or next day after the fever began as reported by the mother interviewed.	
Proper/Timely Care-Seeking for Pneumonia	Percentage of under- 2 children whose mothers were interviewed who had presented with a chest-related cough and fast and/or difficult breathing in the previous two weeks and who were taken to an appropriate health provider within 48 hours of presenting symptoms as reported by the mother interviewed.	32% (CI: 14%, 55%)
Vitamin A – Dose 1 - 6-11 months	Percentage of 6-11-month children of mothers interviewed who received Vitamin A supplementation in the past 6 months according to their health card	73% (CI: 45%, 92%)
Vitamin A – Dose 2 - 12-17 months	Percentage of 12-18-month children of mothers interviewed who received Vitamin A supplementation in the past 6 months according to their health card	0% (CI: 0%, 14%)
Vitamin A – Dose 3 - 18-24 months	Percentage of 18-24-month children of mothers interviewed who received Vitamin A supplementation in the past 6 months according to their health card	30% (CI: 12%, 54%)

Discussion of Key Findings

Out of the 45 indicators assessed, many results for the baseline report were well below national averages as well as WHO/UNICEF objectives coupled with our own program goals. Outlined below are the areas with the greatest deficits, that are areas the program wishes to address to create better health outcomes from women and children.

a. Maternal and Infant Care Behavior

Facility Delivery and Respectful - Culturally Appropriate Care:

Table I: Distance to Healthcare Facility

Minutes Traveled to Clinic	Percentage of Women	95% Confidence Interval
0-14 minutes	10%	4.12%, 15.55%
15-29 minutes	27%	18.30%, 35.70%
30-44 minutes	36%	26.60%, 45.41%
45-59 minutes	15%	8.00%, 22.00%
> 1 hour	12%	5.63%, 18.40%

From the survey, 66% (CI: 55.85%, 75.18%) of women reported that they gave birth in a health facility while under the care of a healthcare professional, and of these women, none reported receiving respectful-culturally appropriate care. The recorded proportion of women who gave birth in a health facility is around the national average (61.2%), but studies have shown that women in rural communities more than 5km from a facility are less likely to utilize care in facilities.7.3 Furthermore, the number of women who received respectful care in this study was alarming, as none felt they received respectful care. Yet, this is similar to qualitative studies conducted in the region and similar counties in Kenya.6 Unfortunately, as county and national rates for health facility delivery have increased, there is an alarming rate of women reporting disrespectful and inappropriate care practices.6 Moving forward, in order to reduce infant and maternal mortality while increasing facility delivery rates, a focus will be put on addressing access to respectful and culturally appropriate care. To do this, a recent study outlined key areas of focus on interventions including; neglectful care, increased abuse of young mothers, genderbased violence from health workers, and barriers to care.6 Additionally, many in the region face barriers in accessing this care, especially as it relates to distance to travel to a facility in minutes as recorded in Table I above.

Maternal and Newborn Care:

A focus of the KIKOP intervention is to provide newborn care to women in Kisii County. The baseline data shows that only 34% of women attended at least four ANC visits with a skilled provider before giving birth (CI: 24.82%, 44.15%). A skilled provider is considered a doctor, nurse, nurse-midwife, professional midwife, or auxiliary nurse. Furthermore, only 5% (CI: 1.64%, 11.23%) of women indicated that they had planned what facility they would deliver at and only 1% (CI: 0.03%, 5.45%) of women had arranged transportation to a facility. 0% of survey respondents had a birth plan with all 5 components.

Expanding maternal knowledge increases the number of infants receiving essential newborn actions after birth, leading to better health outcomes. Essential newborn actions include the following immediately after birth: a) immediate thermal care (drying and wrapping); b) immediate breastfeeding (IBF) (within 1 hour); c) clean cord care d) weighing and measuring; and e) BCG and Hep B immunization. The baseline data concluded that only 1% of women indicated that their children received all of the care measures listed (CI: 0.04%, 8.16%).

Additionally, only 34% (CI: 24.82%, 44.15%) of women indicated that they and their newborn were visited by a health professional within 48 hours of giving birth for a postpartum checkup. Further training of health professionals and mothers could increase this indicator, along with better access to facilities and resources.

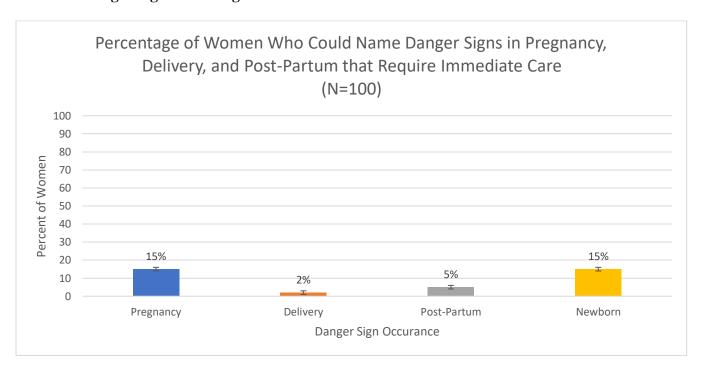
Danger Sign Recognition:

The program hopes to not only increase the percentage of women delivering in a health facility and attending ANC visits but also increase maternal knowledge on obstetric danger signs to increase health-seeking behavior. Indicators related to knowledge of dangers signs throughout pregnancy, labor, delivery, and the postpartum. Table J below displays the percent of women surveyed who could name the danger signs at different points in their pregnancy and postpartum along with the 95% confidence intervals at these markers. Currently, all responses regarding danger signs were recognizable at less than 20% of the women surveyed, which is well below the intended goal. The complete data as well as a graph can be seen below in Table J and Chart A.

Table J: Comparison of Danger Sign Knowledge Indicators

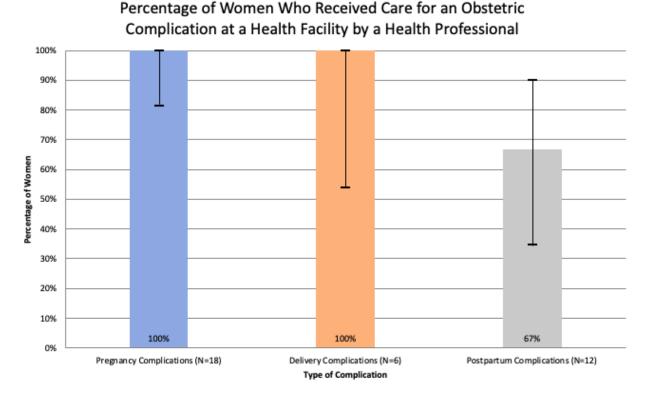
Danger Sign	Percentage of Women Who Can Name at Least 3	95% Confidence Interval
Pregnancy	15%	8%, 22%
Delivery	2%	0%, 7%
Postpartum	5%	2%, 11%
Newborn	15%	8%, 22%

Chart A: Danger Sign Knowledge



Despite the fact that many participants were unable to name obstetric danger signs or have a birthing plan in place, those women who have undergone obstetric emergencies visit a health facility at high rates. In Chart B below there is a visual for the percentage of women who were treated for an obstetric emergency as well as the timing of the emergency. For both pregnancy complications and delivery complications 100% of the surveyed women sought out care at a health facility. In comparison only about 66.7% of women sought out care for postpartum complications, which is probably due in part to the lack of knowledge of known danger signs among women for postpartum complications in their newborn and their own bodies. Further education regarding the matter could increase the percentage of women both seeking care and recognizing when care is needed for themselves and their children.

Chart B: Obstetric Emergencies



b. WASH Modules

Part of the goal of the program is to increase sanitation in the area as in accordance with USAID standards for Handwashing and Waste Disposal. The USAID WASH module, part of the USAID Maternal and Child Survival Program (MCSP), was used as an example and guide for standards and best practices to reduce childhood illness and improve community health.

Of the surveyed households, no woman reported having a handwashing station with cleaning product, water and receptacle (0%, CI:0%, 3.62%). It is estimated that 6% (CI: 2.23%, 12.60%) of households in the area are practicing proper water treatment and 15% indicate that they are using proper water storage methods (CI: 8.65%, 23.53%). Proper water treatment practices

include boiling, chlorination, SODIS, or filter regularly being used either the day of or the day before the interview, for their water used for drinking or cooking.

An area of focus is proper waste (feces) disposal in the communities to increase sanitation and halt the spread of waste-borne disease. Proper waste disposal was calculated as the percentage of mothers interviewed who state that they safely disposed of their child's feces the last time s/he passed stool (either put the stool or dirty water in a latrine or in a toilet connected to a drainage system). The results showed that a little over half (57%) of households were correctly practicing waste disposal (CI: 90.76%, 99.96%). These numbers tie into the low percentage of households who complied with water treatment, storage, and open defecation free households. No participant reported living in an open defecation free household, meaning that their household did not: 1) have no open defecation sites; 2) have a basic latrine facility with drop hole cover to prevent flies and 3) have a hand washing station, per observation by interviewer. But, 63% of respondents did report having an improved latrine which they used (CI: 52.76%, 72.44%). An improved latrine is considered a pit latrine with a slab, ventilated improved pit latrine, or flush or pour flush toilet connected to a sewer system, septic tank, or pit latrine.

Parasitic infections are often a problem in areas that lack proper water treatment practices. In the observed data it has been documented that there is low compliance with proper water treatment practices within the catchment. Parasites can also be spread through contaminated food in addition to water, and contamination can occur in a variety of ways including from waste crosscontaminating with food and water.2 The catchment also showed a lack of compliance with proper waste disposal methods and water storage coupled with a lack of ODF households. For these reasons there was a large proportion of children between the ages of 12-17 months being treated with albendazole or other MOH approved anti-parasite medications (32%, CI: 14.95%, 53.50%). Older children were not prescribed this medication, but these numbers may be skewed by the fact that data was recorded from the health card information and there is a low proportion of mothers that seek treatment immediately for these diseases. The administration of albendazole is a precautionary measure in this catchment due to low compliance with proper water treatment and waste disposal. The WHO recommends that 100% of children receive the medication at 12 months, 18 months, and 24 months. 2 As discussed, the rates in the region are well below this average, possibly relating to other health issues due to parasitic infections such as malnutrition and diarrhea.2

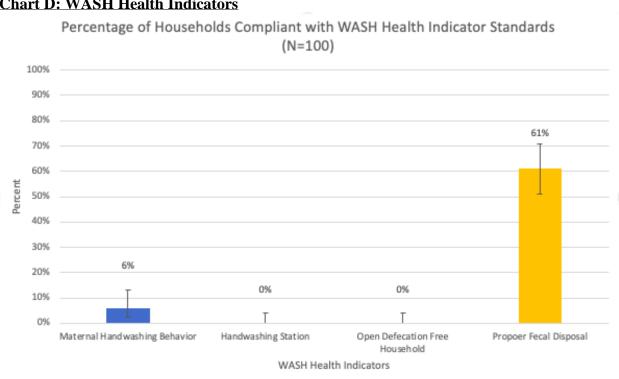


Chart D: WASH Health Indicators

c. Nutrition Standards

While maternal health and nutrition is very important, infant nutrition also plays a key role in preventing mortality.9 The WHO suggests that adequate nutrition during infancy is paramount for predicting future health outcomes and recommends all infants should be exclusively breastfed for the first 6 months of life. In the sample, the region is way below this goal with only 34% (CI: 23%, 47%) of mothers with children older than 6 months reporting EBF for the first six months of their child's life. This percentage is in line with the Kenyan National Average of 33% of mothers practicing EBF for the first 6 months.9 In order to promote better health outcomes as the child grows, more needs to be done to increase EBF practices for the first six months.

Data regarding nutrition including minimum acceptable diet, minimum meal frequency, and minimum dietary diversity for children between 6 months and 23 months was alarming. Only 39% (CI: 25%, 53%) of breastfed children met the benchmark for MDD while only 23% (CI: 13%, 37%) reached the benchmark for minimum acceptable diet. Barely more than half of mothers (58%, CI:43%, 71%) indicated that their child was provided MMF in the previous 24 hours. These numbers are troubling as infants require the proper nutrition to grow into healthy children with strong immune systems.9

d. Childhood Immunization Rates and Deworming

KIKOP is also interested in improving the health of children and decreasing preventable deaths. Part of this goal includes ensuring that children are up to date on vaccinations and that parents understand when children need to receive medical care by a medical professional. The WHO has a vaccination goal internationally of 90% of children being up to date on their vaccinations in order to prevent deaths from diseases with known cures and vaccines. In Kisii County as children age the percentage who keep up to date on all vaccinations decreases. By best estimates 100% (CI: 78.2%, 100%) children between the ages of 6-11 months are fully vaccinated, and 100% (CI: 86.28%, 100%) of children between the ages of 12-18 months are fully vaccinated. But between the ages of 18-24 months only about 45% of children are fully vaccinated (CI: 23.06%, 68.47%). So, once children enter their first year of life, they are less likely to receive continued vaccinations and very much under the WHO global goals for stopping deaths from preventable diseases. This reasoning could be tied into the fact that many households live far from a health care facility, as described in Table I.

Percentage of Children in Kisii County with Full Immunizations by Age 100% 90% 80% 70% 60% 50% 30% 20% 10% 100% 45% 0% 6-11 Months (n=15) 12-17 Months (n=25) 18-24 Months (n=20) Age of Children

Chart E: Childhood Immunizations

Furthermore, the program follows the goals and standards set forth by USAID for the Sick Child Module (MCSP) for treating childhood disease and illnesses. The module lays out not only the expectation for sanitation but also the definitions of each component. According to USAID standards, only 27.3% (CI: 6.02%, 60.97%) of children received proper treatment for diarrhea and according to Curamericas standards only 54.5% (CI:23.38%, 83.25%) of children received proper treatment of diarrheal disease. Both of these baselines are way below standards for care and treatment of diarrhea. Relating to malaria, only 20% (CI: 0.51%, 71.64%) of children under 2 years old were treated with ACTs within a day of fever diagnosis. Of the under 2-year-old children who were diagnosed with pneumonia, 31.8% (CI: 13.86%, 54.87%) were taken to a health facility for treatment within 48 hours of presenting symptoms. This could be for a plethora

of reasons including a lack of symptom recognition or lack of resources to go to a health facility. Still, a large part of decreasing preventable deaths has to do with seeking timely treatment.

Programmatic Implications

Moving forward, the program will use the data calculated and presented in this report as a baseline set of data to use in program planning moving forward. By identifying current deficits in key program goals there are now areas of focus for future reports. The overall focus will be to decrease infant and maternal mortality rates in the region. The program will achieve this by improving access to health facilities with trained professionals, as well as providing training and outreach regarding education about health resources and practices for mothers. By providing better educational resources regarding obstetric complications, handwashing, waste disposal, and immunization the rates of complications will decrease in the community. The program will also use results regarding respectful and culturally appropriate care as a guideline for improvements not only in training but in policy.

Information Dissemination Action Plan

Preliminary results have already been shared by program staff in-country with the Ministry of Health at the sub-county and county levels. The staff received some feedback at this time. Once the KPC report is finalized it will be distributed to program partners, grant funders, the Ministry of Health and community leaders for dissemination in full. An executive summary will also be readily available for public viewing.

Resources

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- 4) Kenya Demographics, Health & Infant Mortality. (n.d.). Retrieved from https://data.unicef.org/country/ken/
- 5) Kenya's Vision 2030: Health Services. (n.d.). Retrieved from https://www.kisii.go.ke/index.php/departments/health-services
- 6) Kenyan Ministry of Health. (2015). Kisii County: Health at a Glance. *Kisii County: Health at a Glance*.
- 7) Lusambili AM, Naanyu V, Wade TJ, Mossman L, Mantel M, Pell R, et al. (2020) Deliver on Your Own: Disrespectful Maternity Care in rural Kenya. PLoS ONE 15(1): e0214836. https://doi.org/10.1371/journal.pone.0214836
- 8) Mbugua, Samwel, and Kerry L. D. MacQuarrie. 2018. Maternal Health Indicators in High-Priority Counties of Kenya: Levels and Inequities. DHS Further Analysis Reports No. 110. Rockville, Maryland, USA: ICF.
- 9) Mohamed, M. J., Ochola, S., & Owino, V. O. (2018). Comparison of knowledge, attitudes and practices on exclusive breastfeeding between primiparous and multiparous mothers attending Wajir District hospital, Wajir County, Kenya: a cross-sectional analytical study. International breastfeeding journal, 13, 11. https://doi.org/10.1186/s13006-018-0151-3
- 10) Osoro, A. A., Ng'ang'a, Z., Mutugi, M., & Wanzala, P. (2014). Maternal mortality among women seeking health care services in Kisii Level 5 Hospital. *American Journal of Public Health Research*, 2(5), 182-187.
- 11) Republic of Kenya Ministry of Health. (2014). *Health Sector: Human Resources Strategy 2014-2018*. Nairobi, Kenya.

Appendix

Appendix Section A: Village and Number of Respondents

Village	Number of Respondents
Bomondo	6
Emanyi	2
Engoto B	7
Getienko	3
Karisebe	6
Kenyoni 1	4
Kenyoni 2	2
Maguti	3
Morara 1	5
Morara 2	4
Mwabarake 1	3
Mwabarake Borabu	6
Mwamwebi Borabu	3
Mwamwebi Ebate	2
Mwanyagotunga 2	7
Mwanyakundi Borabu	5
Nyabikondo 1	4
Nyabirundu	4
Nyagisai	5
Nyamariba 2	3
Nyamorianyi	2
Nyangoso	2
Nyantaro	5
Siara 1	3
Siara 2	4

Appendix Section B: Survey Questionnaire

QUESTIONNAIRE KNOWLEDGE PRACTICE AND COVERAGE (KPC) SURVEY OF WOMEN WITH CHILDREN UNDER 2 YEARS OF AGE

INFORMED CONSENT KITUTU CHACHE SOUTH SUB-COUNTY MINISTRY OF HEALTH UN PARTNERSHIP WITH CURAMERICAS GLOBAL INFORMED CONSENT

Curamericas team conducting a survey of North sub-county. The information you procommunity. Everything you tell me will be Your name will not appear on any documents answer, just let me know and I will go on need more information about the survey participate in the survey. However, we expected the survey of the survey.	Explain to the mother: My name is and I am part of the Kisii County Ministry of Health and Curamericas team conducting a survey on women's health and nutrition of children 0-23 months in Kitutu Chache North sub-county. The information you provide will help to plan for health and nutrition services in your community. Everything you tell me will be confidential and will not be disclosed to anyone without your consent. Your name will not appear on any document or report. If I ask you any question that you feel you don't want to answer, just let me know and I will go on to the next question. You can stop the interview at any time. In case you need more information about the survey, you may contact Thomas Oirere of MOH. You have the right not to participate in the survey. However, we encourage you to participate to help your community. The interview will take not more than 45 minutes. Do you have any question?		
Will you participate in the survey?			
IF YES → Sign (or fingerprint) below and proceed with the interview IF NO→ Go to the next mother on the list			
Sign (or thumbprint) of the mother or interviewee:			

Questions to determine if mother is eligible for interview:

What is the age of your last-born child? [Verify Age from MCH booklet if able]

- A. 0-23 months
- B. 24 months and above [confirm from the MCH booklet]> END INTERVIEW

Do you have more than one child under age 2?

- → If Yes: Select child to participate in interview. If there is more than one child in this age group, interviewer picks the youngest child. If there are twins, interviewer picks child using coin toss.
- → If No: Continue interview. Questions will be about her child under age 2.

	Household Identification	on (House_ID)	Value	LABEL ODK
1	Village Name	Bomondo	Bomondo	Village
		Botabori 1	Botabori_1	
		Botabori 2	Botabori_2	
		Engoto A	Engoto_a	
		Engoto B	Engoto_b	
		Getienko	Getienko	
		Karisebe	Karisebe	
		Kenyoni 1	Kenyoni_1	
		Kenyoni 2	Kenyoni_2	
		Maguti	Maguti	
		Morara 1	Morara_1	
		Morara 2	Morara_2	
		Mwamaobe A	Mwamaobe_a	
		Mwamaobe B	Mwamaobe_b	
		Mwabarake 1	Mwabarake_1	
		Mwabarake 2	Mwabarake_2	

Mwabarake Borabu	Mwabarake bora
Mwamwebi Borabu	Mwamwebi borab
	_
Mwamwebi Ebate	Mwamwebi_ebate
Mwamwebi Masongo	Mwamwebi_mason
Mwamwebi Ondiri	Mwamwebi_ondir
Mwanyagotunga 1	Mwanyagotunga_1
Mwanyagotunga 2	Mwanyagotunga_2
Mwanyakundi 1	Mwanyakundi_1
Mwanyakundi Borabu	Mwanyakundi_bo_1
Mwanyakundi Kemanko	Mwanyakundi_ke
Nyabikondo 1	Nyabikondo_1
Nyabikondo 2	Nyabikondo_2
Nyabirundu	Nyabirundu
Nyagisai	Nyagisai
Nyagoto	Nyagoto
Nyamariba 1	Nyamariba_1
Nyamariba 2	Nyamariba_2
Nyamorianyi	Nyamorianyi
Nyangoso	Nyangoso
Nyantaro	Nyantaro
Siara 1	Siara_1

		Siara 2	Siara_2	
		Emanyi	Emanyi	
2	Household number			HHID
3	Name of household head			HH_Head
4	Nearest Health facilit	A. Nyagoto health center B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub-county E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility	E. L3ISC	Near_HF
5	How many minutes walking does it take you to get to the nearest health facility?	A. 0-14 minutes B. 15-29 minutes C. 30 minutes-44 minutes D. 45 minutes – 59 minutes E. 1 hour + F. Does not know	A. 0-14min B. 15-29min C. 30-44min D. 45-59min E. >1_hr F. 999	HF_Dist
IDE	ENTIFICATION		Value	ODK LABEL
6	I Interviewer name	List of interviewers] – moved to end of questionnaire	Text	Interviewer

	First name of child		Text	Child_Name
	To learn more		I CAC	- Traine
	about the services			
	you and your child			
	(name) have			
	received, i would			
	like to look at your			
	mother child			
	health			
	booklet/anc card			
	and that of your			
	last-born child.			
7	Kindly show me			
′	the mch			
	booklets/anc card.			
	• If there is			
	more than one			
	child in this age			
	group, interviewer			
	picks the youngest child			
	• If there are twins,			
	interviewer picks			
	child using coin			
	toss			
	Child's sex	A. Male	A. Male	Child_Sex
8		B. Female	B. Female	
			Date	Child_DOB
	Child's date of	A/		
9	birth	dd mm yyyy		
٦	[verify with health	{If parent does not remember or		
	card]	does not have health card, use		
		01/01/2017}		

	Child's age in		Number	Child_Age
	months			
		months		
	Use 0 if the child is			
	not yet one month			
	old			
10				
10	Answer according			
	to health card, or			
	if not available,			
	use the age			
	provided by the			
	caretaker			

MODULE 1: MOTHER'S DEMOGRAPHIC DATA

No.	Questions	Coding	Value	Skip	ODK Label
11	What was your age (mother's age) at your last birthday? [verify with health card if able] [enter 999 if mother doesn't know]	years	Number		Mother_Age
12	Are you currently pregnant?	A. Yes B. No → C. Unsure →	A. 1 B. 0 C. 999	#14 #14	Mother_Preg
13	How many months pregnant? [enter 999 if mother doesn't know]	months	Number		Mother_Gest

14	Are you currently lactating?	•	LACT	Mother_Lact
177	Are you currently factating:	B. Not Lactating B.	. NLACT	
15	What language are you most	A. English	A. ENG	Mother_Lang
		B. Kiswahili	B. KIS	
	comfortable with using to	C. Kikisii	C. KIK	
	express/communicate with	D. Luo	D. LUO	
	others?	E. Luhya	E. LUH	
		F. Other	F. OTH_15	
	What is the highest level of education that you have completed?	A. None	A. None	Mother_Edu
		B. Some Lower primary	B. SLP	
		(class 1-3)	C. CLP	
		C. Completed lower	D. SUP	
		primary	E. CUP	
		D. Some Upper Primary	F. SS	
		(class 4-7)	G. CS	
		E. Completed upper	H. SCU	
		primary	I. CPU	
16		F. Some Secondary	J. Post-Grad	
		G. Completed	K. OTH_16	
		secondary		
		H. Some		
		college/university		
		I. College/Pre-		
		university/University		
		J. Postgraduate		
		K. Other		

		A. Christian	A. CHRIST	Mother_Rel
	Which religion do you belong	B. Muslim	B. MUSL	
17	to?	C. Traditional	C. TRAD	
		D. Hindu	D. HINDU	
		E. Other	E. OTH 17	
		A. Married	A. Marr	Mother_Marital
		B. Married but not	B. Marr NST	_
		staying together	C. Separated	
		C. Separated	D. Divorced	
		D. Divorced	E. Staying NM	
18	What is your marital status?	E. Staying together but	F. Widowed	
		not married	G. Single	
		F. Widowed		
		G. Single (never		
		married)		
		A. Formal Employment	A. Form_Emp	Mother_Emp
	What would you say is your	B. Informal employment/Jua	B. Inform_Emp	
	What would you say is your main Occupation/Source of	Kali	C. Cas_Lab	
	livelihood currently?	C. Casual labor	D. Busina	
	inventional currently:	D. Own business	E. Petty_Hawk	
19	[Choose one response only]	E. Petty trading / Hawking	F. S_Farm	
	[, ,]	F. Farming	G. D_Farm	
		G. Dairy farming	H. Dep	
		H. Dependent	I. H_wife	
	I. Housewife		J. OTH_19	
	NATIONAL CONTRACTOR OF THE STATE OF THE STAT	J. Other	Number	Income
20	What is your family's monthly	Ksh	INGILIDE	income
	cash income?	(999= Does not know)		
	In the past month, about how	Ksh	Number	Health_Exp
21	much did your family spend on health care (fees, medicines)?	(999= Does not know)		

	[Interviewer observes this directly]	A. Earth/Dirt/smeared with cowdung	A. Dirt B. Cement	House_floor
22	Of what material is the floor of the house?	B. Concrete/cement C. Tile/vinyl/linoleum D. Other	C. Tile D. OTH_22	

MODULE 2 – MOTHER'S OBSTETRIC ANTECEDENTS

No.	Questions	Coding	Skip	
24	How many pregnancies have you had that resulted in a live birth?	Live birth #(999= Does not know)		Mother_Num_LB
	How many pregnancies have you had that resulted in a stillbirth?			Mother_Num_SB
25	[Stillbirth: the birth of an infant that has died in the womb or during labor after at least 28 weeks (7 months) of pregnancy)	Stillbirth # (999= Does not know)		

26	How many pregnancies have you had that resulted in a miscarriage? [Miscarriage is the spontaneous loss of a fetus before the 28 weeks (or 7 months) of pregnancy]	Miscarriage # (999= Does not know)	Mother_Num_Mis
	How many pregnancies have you had that you intentionally terminated? [This question prompts for abortion but kindly don't mention the word abortion. Enter 999 if mother doesn't know or not willing to answer]	Abortion # (999 = Does not know)	Abortions
	How many pregnancies have you had in your life? [sum total of livebirths, stillbirths, miscarriages and abortions]	Pregnancies #	how_many_pregnancies_you_had_in_your_life
27	How old were you when you became	years old (999= Does not know)	Mother_First_Preg

	pregnant for the first time?		

MODULE 3. PREGNANT WOMAN CARE

The following questions are about the mother's pregnancy the child identified in question 7

No.	Questions	Coding	Value	Skip ODK Label
28	How many antenatal care checks did you go to during your pregnancy with [child name]? Enter number of checks according to mother	A. Less than 4 ANC checks B. 4 or more ANC checks C. Don't know	A. Unde r_4a nc B. 4+an c C. 999	ANC_ Mothe r
29	[Refer to MNCH booklet] How many ANC checks did you go to during your pregnancy with [child name]? Record number of checks made during the pregnancy of [name of child] according to health booklet.	A. Less than 4 ANC checks B. 4 or more ANC checks C. MCH booklet unavailable	e B. 4+an	ANC_ MNCH
30	When you were pregnant with [child name], did your husband/partner accompany you to antenatal care?	A. Yes B. No → C. Doesn't remember →	A. 1 B. 0 C. 999	#32 ANC_P artner

No.	Questions	Coding	Value	Skip	ODK
31	How many antenatal care checks did your husband/partner accompany you to when you were pregnant with (child name)?	ANC checks (if none, put 0)	Number		ANC_P artner_ Att
32	When you were pregnant with (child name), did you and your family have a birth plan?	A. Yes B. No → C. Doesn't remember →	A. 1 B. 0 C. 999	#34 #34	Birthpl an
33	What did that birth plan include? [Multiple responses allowed. Indicate all responses mentioned. Do not read choices]	A. Name of the health facility where you planned to deliver; B. Mode of transport to the facility C. Money for transport D. Person to accompany you to health facility E. Person to care of your home/other children during your absence F. Other	a. Facility_Deliv b. Transport c. Money d. Person_Acc e. Person_Home f. OTH_33		Birthpl an_Co mp

No.	Questions	Coding	Value	Skip	ODK Label
33b.	Other – Kindly specify what was in your birthplan	Text	Text		Birthpl an_oth er
34	During your last pregnancy did you receive/buy tablets or syrup containing iron or folic acid? (Show example iron tablets/syrup/folic acid)	A. Yes B. No C. Doesn't remember →	A. 1 B. 0 C. 999	#36 #36	Supp
35	For how many days did you consume the tablets or syrup? Note: If respondent replies in weeks or months, convert weeks or months to days	days (999= Does not know)	Number		Supp_ days

No.	Questions	Coding	Value		Skip	ODK
						Label
36	What problems or signs of danger during pregnancy would make you seek help urgently with health personnel? [Do not read the list. Probe; anything else? Mark all responses mentioned]	 A. Vaginal hemorrhage B. Difficulty breathing/lack of air C. Fever D. Strong abdominal pain E. Headache/blurry vision F. Seizures/Convulsions G. Foul-smelling vaginal discharge H. The baby doesn't move anymore I. Brown or green vaginal discharge J. Swollen feet, face, body K. The water broke L. Other M. Did not know 	B. C. D. E. F. G. H. I. J.	Vag_ Hem o SOB Fever SAP HA Seiz BV FD Yeast Edem a PRO M OTH_ 36 DNR_ 36		Preg_D ang

No.	Questions	Coding	Value	Skip	ODK Label
	What other danger sign during pregnancy?	Text	Text		other_ pg_dan ger
37	Did mother list 3 or more danger signs on the list?	A. Yes B. No	A. 1 B. 0		Preg_D ang3
38	During your last pregnancy, did you have any complications or discomfort? [Note: this is about the pregnancy, not the birth]	A. Yes B. No→ C. Doesn't remember→	A. 1 B. 0 C. 999	#42 #42	Preg_c omp

No.	Questions	Coding	Value		Skip	ODK
39	What was the complication during the pregnancy? [Do not read the list of complications. Mark all that are applicable]	A. Miscarriage B. Hypertension (Preeclampsia/eclampsia) C. Excessive bleeding D. Infection/Fever E. Malaria F. Foul Vaginal Discharge G. HIV/AIDS H. Sexually transmitted infection (STI) I. UTI (urinary tract infection) J. Rhesus incompatibility K. Abdominal pains L. Breech presentation M. Doesn't remember X. Other specify	B. C. D. E. F. G. H. I. J. K.	Hem orr Infx Mala ria Disch arge HIV STI UTI Rhes us Abd_ pains		Preg_C omp_t ype
39b.	Other – Kindly specify the other complication mentioned above	Text		Text		Other_ compl
40	Did you receive any treatment for your pregnancy complications?	A . Yes B . No	A. 1 B. 0 C. 999		#42 #42	Preg_c omp_t x

No.	Questions	Coding	Value	Skip	ODK
					Label
41	Where did you receive treatment?	A. Nyagoto health center B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub-county E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Home L. Other M. Doesn't remember	A. Nyagoto _41 B. Marani_ 41 C. L2ISC_41 D. L2OSC_4 1 E. L3ISC_41 F. L3OSC_4 1 G. L4ISC_41 H. L4OSC_4 1 I. L5_41 J. Private Health Facility K. Home L. OTH_41 M. DNR 41		Preg_c omp_l oc
	Kindly specify other facility you received treatment	Text	Text		Other_ Facility _Comp

MODULE 4: THE BIRTH AND NEWBORN CARE

[NOTE: THE FOLLOWING QUESTIONS RELATE TO THE PREGNANCY THAT RESULTED IN THE LIVE BIRTH OF THE CHILD ON THE U2 REGISTER]

No.	Questions	Coding	Value	Ski ps	ODK Label
42	Was the birth normal or did you have any complications or discomforts	 A. Birth with complications B. Normal birth	A. BWC B. NB C. 999	#4 7 #4 7	Birth_comp
43	What was your birth's complication? [Do not read the list of complications. Mark all that are applicable]	A. Long labor/dystocia B. Wrong Delivery Presentation (transverse/occiput) C. Hypertension (Preeclampsia/eclampsia) D. Hemorrhaging E. Infection/Fever F. Retained placenta G. Placenta Previa H Ruptured membrane I. Premature birth J. Breech Presentation K. Cord Prolapse/compression J. Other (Specify) K. Doesn't remember	A. Long_Dyst B. Trans_Occip C. HTN_43 D. Hemorr_43 E. Infx_43 F. Place_retai G. Place_prev H. Memb_Rupt I. Prem_Birth J. OTH_43 K. DNR_43		Birth_Comp_type
	What other birth complications did you experience?	Text	Text		What_other_birth_c omplications_43
44	Did you receive any treatment for the birth complications?	A. Yes B. No→ C. Doesn't remember→	A. 1 B. 0 C. 999	#4 7 #4 7	Birth_Comp_tx

No.	Questions	Coding	Value	Ski	ODK Label
45	Where did you receive treatment for the birth complications?	A. Nyagoto health center B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub-county E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of sub-county I. Level 5 J. Private Health Facility K. Other L. Home M. Doesn't remember	A. Nyagoto_ 45 B. Marani_4 5 C. L2ISC_45 D. L2OSC_45 E. L3ISC_45 F. L3OSC_45 G. L4ISC_45 H. L4OSC_45 I. L5_45 J. PHF_45 K. OTH_45 L. HOME_45 M. DNR_45	ps	Birth_Comp
	Other (specify) – where did you receive treatment for the birth complications	Text	Text		Other_specify_45
46	Did you get a C-section?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		C_Section

No.	Questions	Coding	Value	Ski	ODK Label
				ps	
		A. Doctor	A. Doc		Birth_attend
		B. Professional Nurse	B. PN		
		C. Auxiliary nurse	C. AN		
		D. Skilled birth attendant	D. SBA		
	Who attended to your last birth?	E. Traditional birth attendant	E. TBA		
47		(TBA)	F. clinician		
47	[Do not read the options. You can mark	F. Clinician	G. CHW		
	multiple choices]	G. Community Health Worker	H. family		
		H. Family member	I. none		
		I. Nobody	J. other_47		
		J. Other (specify)	K. 999		
		K. Doesn't remember			
47b.	Other (specify) – kindly specify the	Text	Text		other_specify_47
4/0.	person who attended to your birth				

A. Nyagoto health center B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub- county E. Level 3 in sub-county F. Level 3 out of sub- county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Home (no SBA) → H. L4OSC L. Home (with SBA) → H. L4OSC L. Home (with SBA) 48 J. PHF_4 Birth_Loc A8 F. L3OSC 48 F. L3OSC 48 F. L3OSC 48 F. L4OSC 48 F. L4OS	No.	Questions	Coding	Value		Ski	ODK Label
B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub- county E. Level 3 in sub-county F. Level 3 out of sub- county G. Level 4 in sub-county H. Level 4 out of subcounty F. Level 5 J. Private Health Facility K. Home (no SBA) → H. L48 H. L40SC L. Home (with SBA) 48 J. PHF_4 H. L40SC L. Home (with SBA) 48 J. PHF_4						ps	
8 K. HOME _NOS BA_48 L. HOME _SBA_	48		 B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub-county E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of sub-county I. Level 5 J. Private Health Facility K. Home (no SBA)	B. C. D. E. F. G. H. I. J. K.	to_48 Maran i_48 L2ISC_ 48 L2OSC _48 L3ISC_ 48 L3OSC _48 L4ISC_ 48 L4OSC _48 L5_48 PHF_4 8 HOME _NOS BA_48 HOME	#5 4 #5	Birth_Loc

No.	Questions	Coding	Value	Ski	ODK Label
				ps	
48b.	Before we move to the next section confirm in the delivery was home (with or without skilled attendant) or a facility delivery	A. Facility delivery (public or private) B. Home based delivery	cili ty_ del iv B. Ho m e_ del ive		before_we_move_t o_the_next_sec
	During the birth, did the health personnel allow your family to be present?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		HFD_Fam
49	During the birth, did the health personnel treat you promptly, and with kindness and respect?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		HFD_Respect
50	During the birth were you given adequate privacy?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		HFD_Privacy
51	During the birth, were you allowed to choose the birthing position and your birth attendant?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		HFD_Position
52	During or after the birth, did the health personnel permit traditional foods and practices?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		HFD_Trad
53	Immediately before or after the birth, did you get an injection or a pill to prevent hemorrhaging (excessive bleeding)?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		AMSTL_Bleed

No.	Questions	Coding	Value	Ski	ODK Label
				ps	
54	The person who attended to you during the birth, did they hold your abdomen and hold the umbilical cord so that the placenta would come out?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		AMSTL_CordTract
55	Immediately after the expulsion of the placenta, did anyone massage your uterus so that it would contract and prevent excessive hemorrhaging?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		AMSTL_Massage
56	After the umbilical cord was cut, what did they use to prevent infection?	A. Medicine/ Chlorhexidine/ antiseptic B. Jik C. Nothing D. Ashes E. Clean warm water F. Mothers milk G. Lizard feces H. Other (specify) I. Doesn't remember	A. Meds_57 B. Jik C. Nothing_57 D. Ashes E. warm_water F. milk G. lizard_feces H. OTH_57 I. DNR_57		ENC_CordCare
56b.	What other did you use to prevent cord infection?	Text	Text		Other_specify_57

No.	Questions	Coding	Value	Ski	ODK Label
57	Immediately after the birth and before the expulsion of the placenta, what was done to baby [NAME]? [Mark A only if both acts -dried and wrapped- were performed] Kindly specify what other was done to	A. Dried and wrapped with warm cloth/blanket B. Placed skin-to-skin on the mother C. Baby was taken away by health worker D. Baby was washed with water E. Other specify F. Doesn't remember Text	A. DWCB_ B. SKIN_2_SKIN C. Baby_Away D. Baby_Washed E. OTH_ F. 999	ps	ENC_Dry Other_specify_57
57b.	the baby immediately after birth and				
58	How soon after birth did you breastfeed baby [NAME]?	A. Immediately or within the first hour B. After the first hour C. Doesn't remember	A. STAT B. S/P1HR C. 999		ENC_IBF
59	Immediately after the birth, was the baby weighed?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		ENC_Weigh
60	Immediately after the birth, was the baby's height measured?	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999		ENC_Measure

No.	Questions	Coding	Value	Ski	ODK Label
				ps	
	[Check in the Maternal Child Health	A. Yes	A. 1		ENC_BCG
	booklet]	B. No	B. 0		
61	Did child receive BCG vaccination the day they were born?	C. Booklet not available/not listed in booklet	C. NB		
62	Date of BCG vaccination {Put 01/01/2017 if mom doesn't remember, child did not receive one, or date is not on health card}	DD/MM/YYYY	Date		BCG_Date
	[Check in the Maternal Child Health	A. Yes	A. Yes		ENC_OPVO
	booklet]	B. No	B. No		_
63	Did child receive OPVO vaccination the day they were born?	C. Booklet not available/not listed in booklet	C. NB		
64	Date of OPVO vaccination {Put 01/01/2017 if mom doesn't remember, child did not receive one, or date is not on the health card}	D. DD/MM/YYYY	Date		ENC_OPVO

No.	Questions	Co	ding	Value	Ski	ODK Label
					ps	
65	What problems or danger signs during labor/delivery would make you seek urgent care with health personnel? [Do not read the list. Probe; anything else? Mark all responses mentioned]	B. C. D. E. F. G. H. I.	Seizures Fever Abundant hemorrhaging/Pla centa previa Fast/difficult breathing Placenta not coming out Strong headache/blurry vision Long labor/hard labor Breech presentation Cord prolapse/cord compression Other (specify)	A. Seizure B. Fever C. Hemorr_66 D. Rap_RR E. Placenta_no F. Pound_HA G. LLHL_66 H. breech I. coerd_comp J. OTH_66 X. 999		Delivery_dang
	Would you kindly specify the other danger signs during labor	Text		Text		Other_specify_66
	1	^	Voc	Λ 1		Delivery_Dang3
66	Did mother list 3 or more danger signs on the list?		Yes No	A. 1 B. 0		Delivery_Dangs
00	on the list:	J D.	INU	J D. U		l l

No.	Questions	Coding	Value	Ski	ODK Label
				ps	
	During your last delivery, how much was	A. Transportation costs	A. Transport		Delivery_cost
	spent on the following items:	B. Food	B. Food		
		C. Health care services	C. HCS_68		
67	[Ask about each item. Mark all costs	D. Medicines	D. Medicines		
07	that are remembered]	E. Midwife/TBA	E. TBA/MWF		
		F. Other	F. OTH_68		
		G. Don't know/Doesn't	G. DNR_68		
		remember any costs			
67a	Transportation costs	Number	Number		Transport
67b	Food	Number	Number		Food
67c	Healthcare services	Number	Number		HCS_68
67d	Medicines	Number	Number		Medicines
67e	Midwife/TBA	Number	Number		TBA_MW
67f	Other expenses	Number	Number		OTH_68
	Did Linda Mama (NHIF) cover any costs	A. Yes	A. 1		Linda_mama
CO	of your delivery?	B. No	B. 0		
68		C. Don't know/Doesn't	C. 999		
		remember			

MODULE 5: PUERPERIUM CONTROL AND ATTENTION TO NEWBORN

No.	Questions	Coding	Value	Skips	ODK Label
69	After your last delivery, did someone evaluate your health?	A. Yes B. No→ C. Doesn't remember	A. 1 B. 0 C. 999	#72 #72	PPC

No.	Questions	Coding	Value	Skips	ODK Label
70	How long after the last delivery did you have your first health examination?	 A. Within the first 2 days (<48 hours) B. After the first 2 days (>48 hours) C. Doesn't remember 	A. First_2D B. After_2D C. 999		PPC_48
71	Who conducted your postpartum examination? [Do not read the options, Probe to find out everyone who completed the exam. Mark the most qualified]	A. Doctor B. Nurse C. Nurse assistant/Aid D. Trained community midwife E. Health promotor/Educator F. TBA G. Untrained midwife H. Community Health Worker I. Family member/Relative, neighbor, or friend J. Clinician K. Don't know/doesn't remember L. Other (specify)	A. Doc_71 B. Nurse_71 C. NAid_71 D. CMWF_71 E. Promoter F. TBA G. UMWF_7 1 H. Communit y_health_ worker I. RNF_71 J. clinician K. 999 L. Other_71		PPC_Provider
71a.	Kindly specify who conducted your postpartum examination	Text	Text		PPE_other

No.	Questions	Coding	Value	Skips	ODK Label
72	What problems or danger signs during the first 42 days after birth would make you seek urgent care with a health personnel? [Do not read the list. Probe; anything else? Mark all responses mentioned]	A. Excessive vaginal hemorrhaging B. Fast/difficult breathing C. Fever D. Strong abdominal pain E. Strong headache/blurry vision F. Seizures G. Fainting H. Foul-smelling vaginal discharge I. Cramps J. Dangerous behavior towards the baby and/or self K. Other (specify) L. Does not know	A. Hemorr_72 B. Rap_RR_72 C. Fever_72 D. SAB_72 E. Poun_HA_72 F. Seizure G. FAIN_72 H. BV_72 I. Cramps J. Psych_72 K. OTH_72 L. 999		PP_danger
72b.	What other danger signs did the mother mention will make her seek urgent care?	Text	Text		other_ppc_dang er
73	Did mother list 3 or more danger signs on the list?	A. Yes B. No	A. 1 B. 0		PP_danger3

A. Seizures/convulsions B. Fever C. Does not breastfeed/not eating right D. Fast/Difficult breathing E. The baby is too cold F. The baby is too small and/or the baby was born prematurely What are some signs that indicate a newborn is sick? [Do not read the list. Probe; anything else? Mark all responses mentioned] A. Seizure_74 B. Fever_74 C. DNBE_74 D. RapRR_74 E. BCold_74 F. BSmall_74 G. Yellow_74 H. Inf_ABD_74 I. Unconscious J. RBB_74 K. Lethargic L. Blue_74 M. Swollen abdomen I. Unconscious J. Reddish belly button with pus or foul smell K. Lethargic L. Cyanosis – purple/blue skin M. Umbilical cord infection N. Chest indrawing O. Other (specify) P. Does not know

No.	Questions	Coding	Value	Skips	ODK Label
74b.	Other specify - What other danger sign did the mother mention as an indicator for newborn illness?	Text	Text		Other_newborn_danger
75	Did mother list 3 or more danger signs on the list?	A. Yes B. No	A. 1 B. 0		NB_Danger3
76	After your last birth, did you have any complication or discomfort during postpartum?	A. Yes B. No X. Doesn't remember	A. 1 B. 0 C. 999	#79 #79	PP_Comp

No.	Questions	Coding	Value	Skips	ODK Label
77	What was the postpartum complication? [Do not read the list of complications. Mark all that are applicable]	A. Hemorrhaging B. Hypertension (Preeclampsia/eclampsia)/High blood pressure C. Infection/fever D. Fainting E. Severe headache F. Doesn't remember G. Scar pain after CS H. Severe abdominal pain I. Other (specify)	A. Hemorr_77 B. HTN_77 C. Infx_77 D. Faint_77 E. headache F. 999 G. cs_scar_pain H. sbd I. OTH_77		PP_Comp_type
77b.	What other complication did you have?	Text	Text		other_ppc_comp

No.	Questions	Coding	Value	Skips	ODK Label
78	Where did you receive treatment for your post-partum complication?	A. Nyagoto health center B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub- county E. Level 3 in sub-county F. Level 3 out of sub- county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Other L. Home M. Doesn't remember	A. Nyago to_78 B. Maran i_78 C. L2ISC_ 78 D. L2OSC -78 E. L3ISC_ 78 F. L3OSC _78 G. L4ISC_ 78 H. L4OSC _78 I. L5_78 J. PHF_7 8 K. OTH_ 78 L. HOME _78 M. 999		PP_Comp_tx
78b.	Other (specify) – Where did you receive treatment for your post-partum complication?	Text	Text	#78	Other_specify_7
79	Would you like to get pregnant in the next year?	A. Yes B. No C. N/A is pregnant now->	A. 1 B. 0 C. 999	#81	FP_Need

		A. No method	Α.	NON_	FP_Meth
		B. Norplant/subcutaneous implants	В.	80 IMPLN T	
		C. Shot/DepoProvera	D.	DEPO PILL IUD	
		D. Pills/Birth control pills	F.	DIAPH	
		E. Copper T/Intrauterine device (IUD)		COND FGSCT	
		F. Diaphragm		BTL VAS	
	Currently, what do you do to prevent pregnancy? [Mark one option only—the most used!]	G. Condom		LAM NATU	
80		H. Foam/gel/spermicide/cream/t ablet		R ABST PULLO	
		I. Surgical sterilization		UT OTH 8	
		J. Male surgical sterilization/ Vasectomy	0.	0	
		K. Lactational Amenorrhea Method (LAM)			
		L. Rhythm/Calendar/mucus plug/ Basal temperature/collar			
		M. Abstinence			
		N. Interrupted coitus/withdrawal			

No.	Questions	Coding	Value	Skips	ODK Label
		O. Other			
	Other (specify) – Currently what do you do to prevent pregnancy?	Text	Text		Other_specify_8 0

MODULE 6: MATERNAL LACTATION, NUTRITION AND MICRONUTRIENTS

No.	Questions	Coding	Value	Skip s	ODK Label
81	Have you ever breast fed [child name]?	A. Yes B. No → C. Doesn't remember	A. 1 B. 0 C. 999	#86 #86	Breastfed
82	Yesterday during the day or night did [child name] drink breastmilk?	A. Yes B. No	A. 1 B. 0		Yest_BF
83	Now I would like you to remember back when your baby was very young – even when s/he was a newborn. Please tell me how old the baby was when you first gave him/her any liquids other than breast milk – like water, juice, cow's milk or goat milk. [Do not categorize medicine as any other liquid apart from breast milk]	A. 6 months or older B. 0-5 months C. Hasn't given other liquids D. Doesn't remember	A. >6MNTHS B. 0- 5MNTHS C. NONE_83 D. 999		First_Liquid

84	Please tell me how old the baby was when you first gave him/her semisolid foods (like soup, porridge)	A. 6 months or older B. 0-5 months C. Hasn't given solid food D. Doesn't remember	A. >6MNT HS_84 B. 0- 5MNTH S_84 C. NONE_ 84 D. 999		First_solid
85	Age of [child name] Note: this question was asked earlier in the interview. This is asked here to direct the interview to the appropriate questions	A. 0-5 months	A. 0- 5MNTHS_85 B. 6- 11MNTHS_8 5 C. 999	#95	Child_AgeMonth

COMPLEMENTARY FEEDING

No.	Questions	Coding	Value	Skips	ODK Label
86	I am going to read some foods and yesterday Yesterday during the day or night did [child name] eat or drink grains, roots		A. 1	ME] ate or	drank these anytime Yest_Tubers_001
	or tubers such as - corn, rice, ugali, noodles, oats, oatmeal, bread, pasta, hot cereal, cornmeal, barley, potato, yucca, taro root, cassava	A. Yes B. No C. Doesn't remember	B. 0 C. 999		
	[Mark yes if at least one root/tuber product was taken]				

87	Yesterday during the day or night did [child name] eat or drink dairy products such as - Milk (canned, powdered, or fresh animal's milk) - cottage cheese, cream, cheese, yogurt [Mark yes if at least one dairy product was taken]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_Dairy
88	Yesterday during the day or night did [child name] eat any foods made from legumes or nuts such as beans, lentils, peas, peanuts, ground nuts or soy? [Mark yes if at least one bean/nut product was taken]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_Nut
89	Yesterday during the day or night did [child name] eat any fruits or vegetables rich in Vitamin A such as D. Something with tomatoes or tomato paste E. Yellow fruits (e.g. mango, papaya) F. Food that is orange or yellow inside like pumpkin, yellow sweet potato, carrots, squash, chayote [Mark yes if at least one fruit/vegetable high in Vit A was taken]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_VitA

90	Yesterday during the day or night did [child name] eat any other fruits or vegetables? G. Examples: Leafy greens (radish leaves, tassel flower, peppermint, cilantro) H. Apple, avocado, banana, peach [Mark yes if at least one fruit/vegetable was taken]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_FruitVeg
91	Yesterday during the day or night did [child name] eat any flesh foods? Meats like fish, chicken, beef, lamb, goat [Mark yes if at least one meat was taken]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_Meat
92	Yesterday during the day or night did [child name] eat any eggs? [Mark yes if at least food with eggs was taken]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_Egg
93	Yesterday during the day or night did [child name] eat food with iodized salt? [Verify that salt has been iodized by looking at container]	A. Yes B. No C. Doesn't remember	A. 1 B. 0 C. 999	Yest_Salt

			Number	Yest_Eat
	How many times did [child name] eat			
	yesterday during the day and night?	A. times		
	[Solid foods or semi-solid food only. Do	(If the answer is 7 or		
94	not include breastmilk or any liquids]	more, enter '7')		
	[We want to know how many times	(999= Does not		
	the child ate until satisfied. Not	know)		
	including small snacks or one or two			
	mouthfuls of food.]			

MODULE 7: WATER AND SANITATION

No	Questions	Coding	Skips	Value	ODK Label
95	Does your house have a specific place to wash your hands?	A. Yes B. No→	#97	A. 1 B. 0	HW_Location
96	[Ask to be shown the place dedicated for handwashing] Find out if the following three things are present: - Water (container or tap) - Soap, ashes, or other cleaning product - Container (bucket/basin/leak tin)	A. Yes, all three components are present B. No, only some or none of the components were present		A. 1 B. 0	HW_Components

	Does the handwashing station contain ALL 3 types of items (water, cleaning product, and container)?				
97	What do you wash your hands with?	A. With water and soap/ashes/other cleaning products B. Water only	#99 #99 #99	A. wth_wtr_ot hr B. wtr_onl C. other D. dnt_wash	Mother_HW
97b	Kindly specify the other handwashing method				Other_specify_97
98	When do you normally wash your hands? [Do not read the options, just count all the moments mentioned.]	 Before food preparation Before feeding the children After using the toilet or latrine After changing diapers or cleaning a child's bottom Before eating 		A. Bfr_food_pr ep B. Bfr_feed_ba by C. Aftr_latrine D. Aft_chng_di ape E. Bfr_eat	Mother_HWPractic e Hw knowledge
		of the listed times? A. Yes		A. 1	Hw_knowledge

		B. No		B. 0	
99	Do you perform water treatment/purification so that water is safe to drink?	A. Yes B. No→	#102	A. 1 B. 0	Water_tx
100	What do you usually do to treat the water? [Mark more than one method only if they use together (for example, filtering through cloth and chlorine]	A. Let settle (have sediments collect at the bottom) B. Filter through cloth C. Boil D. Chlorine E. Filter (ceramic filter, sand, composite) F. Solar disinfection G. Other (Specify) X. Don't know		A. Let_settle B. Filter_cloth C. Boil D. Chlorine E. Filter_crea mic F. Solar_dis G. Other H. 999	Water_tx_meth
	Other (specify) – What else do you usually do to treat the water?	Text		Text	Other_specify_100
101	When was the last time you treated the water with that method?	A. Today B. Yesterday C. 2 to 6 days ago D. 7 days to a month ago E. One month or more X. Do not remember		A. Today B. Yester C. 2_6 dy D. 7d_month E. Month_abo ve X. 999	Water_tx_freq
102	How do you store your drinking water?	A. In a container (bucket, bottle, pot, jar, barrel, etc.), B. Rooftop tank/reservoir → C. There is no water stored →	#106 #106	A. Container B. Rooftop C. Not_stored	Water_store

103	Can I see the containers where	A. Yes		A. 1	Water_View
103	drinking water is stored?	B. No→	#106	B. 0	
104	[Observe and indicate what type of containers exist]	A. With narrow mouth (≤3 cm) B. With wide mouth		A. Narrow B. Wide	Water_Cont
		C. Both types		C. both	
	[Observe and indicate]	A. They all are		A. All_are	Water_cont_cov
105	Are the containers covered?	B. Some are C. None are		B. Some_are C. None_are	
	What does the household have for feces disposal?	A. Nothing/Open defecation		A. OD	Latrine
	[Ask to be shown the place dedicated feces disposal]	B. Pit latrine without slab or open pit C. Pit latrine with slab		B. Open_pitlat rin	
106	[Observe and indicate]	D. Ventilated improved pit latrine E. Flush or pour flush		C. Pit_lat D. VIP_1	
		toilet connected to sewer system, septic tank or pit latrine F. Other		E. Flush_sept	
		(specify)		F. Other	

	Kindly specify what your household uses for feces disposal	Text	Text	Other_feces_dispos
107	The last time [child name] pooped, how and where did you discard the poop? [If the answer is "cleaned it with water," ask specifically where the dirty water was discarded] [If the answer is "disposed of the poop" ask specifically where the poop was discarded.]	 A. Threw away the poop in the toilet or latrine B. Threw away the poop in a trash can or dumpster C. Threw away the poop outside in the yard away from house D. Threw away the poop outside in the yard near house E. Buried the poop F. Nothing. Left the poop where it was 	A. Threw_toila tri B. Threw_tras h C. Threw_yard D. Threw_near hous E. Buried	al Feces_Disp
		G . Cleaned with water then discarded dirty water into the toilet or latrine	F. Left_samepl ace	
		H. Cleaned with water then discarded dirty water into a sink connected to a sewage system	G. clean_toilat ri	

	I. Cleaned with water then discarded dirty water outside	Н.	Clean_sewa ge	
	J. Other (Specify)	ı	Clean_outsi	
		1.	de	
		J. X. 999	Other	
Other (specify) - The last time [child name] pooped, how and where did you discard the poop?	Text	Text		Other_specify_The _last_tim

MODULE 8: VACCINATION

No.	Questions	Coding	Skips	value	ODK Label
108	In the next section, we will need your MNCH booklet. Is it available?	A. Yes B. No	114	A. 1 B. 0	MNCH_Book
109	How old is the child?	A. 0-5 months- B. 6-11 months C. 12-17 months D. 18-23 months	#111 #112 #113	A. 0_5 B. 6_11 C. 12_18 D. 18_24	Age_Vacc

		BCG (at birth)	Yes	Go to	Та	_6_Vacc
		OPV1/Polio 1 st Dose – 6 weeks	103	114	b	_0_4466
		OPV2/Polio 2 nd Dose – 10 weeks			c	
		OPV3/Polio 3 rd Dose– 14 weeks			d	
	Which of the following has	IPV - 14 weeks			e	
	[child name] received	Penta 1 st Dose – 6 weeks			f	
	according to the MNCH	Penta 2 nd Dose – 10 weeks			g	
110	booklet?	Penta 3 rd Dose– 14 weeks			h	
		Pneumococcal 1st Dose – 6 weeks			i	
	[for children <6 months]	Pneumococcal 2nd Dose– 10 weeks			j	
		Pneumococcal 3rd Dose – 14 weeks			k	
		Rotavirus 1 st Dose – 6 weeks			1	
		Rotavirus 2 nd Dose – 10 weeks			m	
		None of the above			n	
		None of the above			999	
			Yes	Go to		12_Vacc
		BCG at birth		114	a	
		OPVo			b	
		OPV1/Polio 1st Dose – 6 weeks			C	
		OPV2/Polio 2 nd Dose – 10 weeks			d	
	Which of the following has	OPV3/Polio 3 rd Dose– 14 weeks			e	
	[child name] received	IPV - 14 weeks			Ť	
	according to the MNCH	Penta 1 st Dose – 6 weeks			g	
	booklet?	Penta 2 nd Dose – 10 weeks			h	
111		Penta 3 rd Dose– 14 weeks				
	[for children 6 months- 11	Pneumococcal 1st Dose – 6 weeks			J	
	months – mark all that	Pneumococcal 2nd Dose– 10 weeks			k	
	apply]	Pneumococcal 3rd Dose – 14 weeks				
		Rotavirus 1 st Dose – 6 weeks			m n	
		Rotavirus 2 nd Dose – 10 weeks			"	
		Measles vaccine - 6 months (in event			0	
		of outbreak)				
		Measles - 9 months			р	
		Vitamin A - 6 months			6	

		None of the above			Q	
112	Which of the following has [child name] received according to the MCH booklet? [for children 12-17 months]	BCG at birth OPVo OPV1/Polio 1st Dose – 6 weeks OPV2/Polio 2nd Dose – 10 weeks OPV3/Polio 3rd Dose – 14 weeks IPV - 14 weeks Penta 1st Dose – 6 weeks Penta 2nd Dose – 10 weeks Penta 3rd Dose – 14 weeks Pneumococcal 1st Dose – 6 weeks Pneumococcal 2nd Dose – 10 weeks Pneumococcal 3rd Dose – 14 weeks Rotavirus 1st Dose – 6 weeks Rotavirus 2nd Dose – 10 weeks Measles vaccine – 6 months (in event of outbreak) Measles - 9 months Vitamin A - 6 months Vitamin A - 12 months Albendazole - 12 months None of the Above	Yes	Go to 114	999 a b c d e f g h i j k l m n o p q r s 999	18_Vacc
113	Which of the following has [child name] received according to the MCH booklet?	BCG at birth OPVo OPV1/Polio 1 st Dose – 6 weeks	Yes	Go to 114	a b c	24_Vacc

			1	
	OPV2/Polio 2 nd Dose – 10 weeks		d	
[for children 18-23 months]	OPV3/Polio 3 rd Dose– 14 weeks		е	
	IPV - 14 weeks		f	
	Penta 1 st Dose – 6 weeks		g	
	Penta 2 nd Dose – 10 weeks		h	
	Penta 3 rd Dose– 14 weeks		i	
	Pneumococcal 1st Dose – 6 weeks		j	
	Pneumococcal 2nd Dose– 10 weeks		k	
	Pneumococcal 3rd Dose – 14 weeks		1	
	Rotavirus 1st Dose – 6 weeks		m	
	Rotavirus 2 nd Dose – 10 weeks		n	
	Measles vaccine - 6 months (in event			
	of outbreak)		0	
	Measles - 9 months			
	Measles vaccine - 18 months		р	
	Vitamin A - 6 months		q	
	Vitamin A - 12 months		r	
	Vitamin A - 18 months		S	
	Albendazole - 12 months	 	t	
	Albendazole - 18 months		u	
	None of the above		V	
	Notice of the above		W	
			999	

MODULE 9: CHILD ILLNESS

No.	Questions	Coding	Skips	value	ODK LABEL
	Now before we move to the	A. Yes		A. 1	III_recent
	next session I would want to	B. No→		B. 0	
114	know if your child was ill		END		
114	recently, has your [child				
	name] been ill in the past				
	two weeks?				

		<u> </u>			
	Has [child name] had watery	Yes		A. 1	Diarr_Recent
115	diarrhea or bloody diarrhea	No		B. 0	
	in the last two weeks?	,	#121		
115	Did for	A. Yes		A. 1	
115 b.	Did you seek assistance for	B. No		B. 0	
D.	[child name] diarrhea?	C. Doesn't remember/don't know		C. 999	
			#118		Diarr_Assist
		A. Nyagoto health center		Nyagoto_116	
		B. Marani health center		Marani_116	
		C. Level 2 in sub-county		L2ISC_116	
		D. Level 2 out of sub-county		L2OSC_116	
	Where did you seek	E. Level 3 in sub-county		L3ISC_116	
	assistance?	F. Level 3 out of sub-county		L3OSC_116	
	assistance.	G. Level 4 in sub-county		L4ISC_116	
116	[Mark all responses	H. Level 4 out of subcounty		L4OSC_116 L5_116	
	mentioned]	I. Level 5		PHF_116	
	-	J. Private Health Facility		Trad_herb	
		K. Traditional healer/Local herbalist		Rel frien	
		L. Relative/Friend		Chv	
		M. Community health worker		Pha_otc	
		N. Pharmacy/shop/kiosk		OTH_116	
		O. Other (specify)			
116	Where specifically did you	C. Other (specify)			Other_specify
b.	seek assistance?				116
		A. Same day		Same_day	Diarr_Tx_Time
	How soon after the diarrhea	B. The next day		Next_day	
117	symptoms appeared did you	C. Two days later		2day_later	
	seek assistance?	D. More than two days later		More_2day	
		E. Don't know/don't remember		999	
		L. Don't know/ don't remember			

118	When [child name] was ill with diarrhea, what was given to them to treat the diarrhea? [Probe: Anything else?] [Mark all that are mentioned. Show sample of ORS packet]	 A. Nothing B. ORS pack C. Zinc pack/pills D. ORS and zinc (co-pack) E. Liquids/fluids available at home (e.g. juice) F. Pill or syrup with zinc G. Pill or syrup without zinc H. Injection I. Intravenous (IV) solution J. Home remedy/herbs with lots of water K. Home remedy/herbs without lots of water L. Other specify 		Nothing Ors_pack Zinc_pack Ors_zinc Home_liquids Syrup_withzinc Syrup_outzinc Inject Iv_soln Homerem_water Homerem_outwat other	
118 b.	Kindly specify what other was given to baby (child name) to treat the diarrhea				Other_specify _118
119	When [child name] had diarrhea, did you give them less, the same, or more liquids (including mother's milk) than you usually do?	 A. Less than usual B. Same as usual C. More than usual D. I did not give any liquids X. Don't know 		Less_usual Same_usual More_usual No_liquid 999	Diarr_Liq
120	When [child name] had diarrhea, did you give them less, the same, or more food than usual?	A. Less than usual B. Same as usual C. More than usual D. I did not give any foods X. Don't know		Less_usual Same_usual More_usual No_food Dnt_knw	Diarr_feed
121	Has your child had cough or pneumonia in the last two weeks?	A. Yes B. No→	#126	A. 1 B. 0	Pneu_recent
122	When [child name] had a cough, did they have any difficulty breathing or were	A. Yes B. No X. Don't know	#124 #124	A. 1 B. 0 C. 999	Pneu_confirm

	they breathing faster than					
	normal?					
123	What did you treat the cough with fast/difficult breathing with? [Probe: Anything else?] [Mark all that are mentioned]	 A. Nothing B. Antibiotic C. Cough syrup D. Pain killer/Panadol/Aspirin E. Home remedies/traditional herbs or medicines F. Other Specify Z. Don't know 		B. C. D. E.	Nothing Antibiotic Cough_syr up Pain_killer Homerem _herbs Other	Pneu_Tx
	,			Z. 999		
123 b	What other did you use to treat the cough?					
	Did you seek assistance?	A. Yes B. No C. Don't know/Doesn't remember		A. B. C.		Pneu_tx_othe r
124	Where did you seek assistance? [Mark all responses mentioned]	A. Nyagoto health center B. Marani health center C. Level 2 in sub-county D. Level 2 out of sub-county E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other	#126	B. C. D. E. F. G. H. J. K.	Nyagoto_ 124 Marani_12 4 L2ISC_124 L2OSC_12 4 L3ISC_124 L3OSC_12 4 L4ISC_124 L4OSC_12 4 L5ISC_124 PHF_124 Trad_herb Rel_frien Chv	Pneu_assist

		P. Doesn't remember		Ο.	Pha_otc OTH_124 999	
	Other (specify) – Where else did you seek assistance?	Text		Text		Other_specify _124
125	How soon after the cough/pneumonia symptoms appeared did you seek assistance?	A. Same dayB. The next dayC. Two days laterD. More than two days laterZ. Don't know/don't remember		В. С.	same_day next_day 2day_later more_2da y	Pneu_Tx_Tim e
126	Has [child name] had fever with chills like malaria in the last two weeks?	A. Yes B. No→	#131	A. B.		Malaria_recen t
127	Was [child name] diagnosed with malaria by a health worker?	A. Yes B. No →	#129	A. B.		Malaria_Confi rm
128	When [child name] was ill with malaria, what was given to treat the fever/malaria	B. Medication other than ACT C. Home remedies/traditional herbs or medicines D. Nothing E. Don't know/don't remember		B. C.	Al_act Diff_med Homere m_herbs Nothing	Malaria_Tx
128 b.	Did you seek assistance?	A. Yes B. No C. Doesn't remember/Don't know		A. B. C.	1 0 999	
129	Where did you seek assistance?	A. Nyagoto health center	#131	A.	Nyagoto_ 129	Malaria_Assist

B. Marani health center B. Marani_12 9	
mentioned] D. Level 2 out of sub-county E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Mindly specify the other C. L2ISC_129 D. L2OSC_12 9 E. L3ISC_129 F. L3OSC_12 9 F. L3OSC_12 9 H. L4OSC_12 9 H. L4OSC_12 H. L4OSC_12 F. L3OSC_12 9 H. L4OSC_12 H. L4OSC_12 F. L3OSC_12 9 H. LAOSC_12 H. L4OSC_12 F. L3OSC_12 9 H. L4OSC_12 H. L4OSC_12 F. L3OSC_12 9 H. L4OSC_12 H. L4OSC_12 F. L3OSC_12 9 H. L4OSC_12 O. L4ISC_129 F. L3OSC_12 9 H. L4OSC_12 F. L3OSC_12 F. L3OSC_1	
E. Level 3 in sub-county F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other E. Level 3 G. L4ISC_129 F. L30SC_12 9 G. L4ISC_129 H. L4OSC_12 9 I. L5_129 H. L4OSC_12 9 I. L5_129 H. L4OSC_12 V. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 F. DNR_129 Other_spec	
F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 5 J. Private Health Facility K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other F. L30SC_12 9 G. L4ISC_129 H. L40SC_12 9 H. L40SC_12 9 H. L40SC_12 9 K. Traditional healer/Local herbalist U. Relative/Friend U. L5_129 J. PHF_129 K. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Kindly specify the other Text Other_spec	
F. Level 3 out of sub-county G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker M. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other F. L30SC_12 G. L4ISC_129 H. L4OSC_12 9 H. L4OSC_12 9 K. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Kindly specify the other Kindly specify the other F. L30SC_12 9 K. L4OSC_12 9 H. L4OSC_12	
G. Level 4 in sub-county H. Level 4 out of subcounty I. Level 5 J. Private Health Facility K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other K. L3OSC_12 9 G. L4ISC_129 H. L4OSC_12 9 H	
I. Level 5 J. Private Health Facility K. Traditional healer/Local herbalist J. Relative/Friend J. PHF_129 M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other K. Lausch 129 H. L4OSC_12 9 H. L4OSC_12 9 H. L5_129 H. L5_129 L. Rel_frien M. Chy M. Trad_herb L. Rel_frien M. Chy N. Pha_otc O. OTH_129 P. DNR_129 Kindly specify the other Text Other_spec	
J. Private Health Facility K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other K. Traditional healer/Local herbalist J. L40SC_12 9 H. L40SC_12 9 J. PHF_129 L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Text Other_specify the other	
K. Traditional healer/Local herbalist L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other K. Traditional healer/Local herbalist 9 L. L5_129 J. PHF_129 K. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Text Other_spec	
L. Relative/Friend M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other Kindly specify the other Kindly specify the other L. L5_129 J. PHF_129 K. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Text Other_specify the other	
M. Community health worker N. Pharmacy/shop/kiosk O. Other P. Doesn't remember Kindly specify the other M. Community health worker J. PHF_129 K. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Text Text Other_spec	
N. Pharmacy/shop/kiosk O. Other P. Doesn't remember K. Trad_herb L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Kindly specify the other Text Other_spec	
O. Other P. Doesn't remember L. Rel_frien M. Chv N. Pha_otc O. OTH_129 P. DNR_129 Kindly specify the other Text Other_spec	
P. Doesn't remember	
N. Pha_otc O. OTH_129 P. DNR_129 Kindly specify the other Text Text Other_specified	
O. OTH_129	
P. DNR_129	
Kindly specify the other Text Text Other_spec	
	ifv
place you sought assistance129	,
for baby [child name]	
A. Same day A. Same_day Malaria_Tx	_Ti
How soon after the fever B. The next day B. Next day me	
with chills/malaria C. Two days later C. 2day_later	
D. More_2day	
E. Don't know/don't remember	
A. Yes A. 1 Other_Rece	nt
Has [child name] another B. No B. No B. O	
131 illness in the past two weeks?	
C. Don't know/don't remember	
Other_Type	
132 What was the illness?	

	Did you seek assistance for the illness?	A. Yes B. No C. Doesn't remember		A. 1 B. 0 C. 9	0 999	other_type_as sis
133	Where did you seek assistance? [Mark all responses mentioned]	A. Nowhere/Did not seek assistance B. Nyagoto health center C. Marani health center D. Level 2 in sub-county E. Level 2 out of sub-county F. Level 3 in sub-county G. Level 3 out of sub-county H. Level 4 in sub-county I. Level 4 out of subcounty J. Level 5 K. Private Health Facility L. Traditional healer/Local herbalist M. Relative/Friend N. Community health worker O. Pharmacy/shop/kiosk P. Other (specify) Q. Doesn't remember	END	B. M. 11 C. M. 3 D. L. 3 F. L. 3 H. L. 3 J. L. 4 M. F. L. 7 M. F. O. F.	Pha_otc OTH_133	Other_Assist
133 b.	Other (specify) – Kindly specify where you sought assistance for the other illness	Text		Text		Other_assis_p lace
134	How soon after symptoms appeared did you seek assistance?	A. Same day B. The next day C. Two days later		B. 1	Same_day Next_day 2day_later	Other_Tx_Tim e

D. More than two days later		D. More_2da	
E. Don't know/don't remember		У	Thank the
		E. 999	mother
 ·	· · ·		for her

collaboration!

"Please provide comments on any health concerns that require follow up (e.g. child is very malnourished) or any comments on things that might
have affected the responses recorded (e.g. husband stepped in and answered many of the questions)"
Comments:

Appendix Section C: Tabulation Plans

Tabulation Plan Section 1:

Indicator	Numerator	Denominator	Formula	Answer
Health facility deliveries	"data-mod4_birth_newborncare- before_we_move_to_the_next_sec"= facility_deliv [column BJ, KPC48]	"data-HouseID-village" is not blank [column I<>"]	$\frac{\textit{Health Facility Delivery}}{\textit{KPC48b} = A} \times 100$ $Total Number of Women Surveyed (N)$	66/100 = 66% $\sqrt{(.66)(0.34) \div 100}$ Z= 1.96 for 95% CI CI= 56.8% LL, 75.2% UL
Pregnancy Complications	"data-Preg_Wom_Care-Preg_comp"= 1	"data-Preg_Wom_Care- Preg_comp"= 1	Women who experienced complications during pregnancy who received medical attention from a health professional at a health facility $\frac{\mathit{KPC38} = \mathit{A}\mathit{AND}\left[\mathit{KPC41} = \mathit{A},\mathit{B},\mathit{C},\mathit{D},\mathit{E},\mathit{F},\mathit{G},\mathit{H},\mathit{I},\mathit{J}}\right]}{\left[\mathit{KPC38} = \mathit{A}\right]}$	18/18 = 100%
	AND	1	[APUSS = A] Total number of surveyed women who reported experiencing complications during pregnancy	
	"data-Preg_Wom_Care- Preg_comp_loc" = Nyagoto_41 or Marani_41 or L2ISC_41 or L3ISC_41 or L3ISC_41 or L4ISC_41 or L4ISC_41 or L4ISC_41 or L4OSC_41 or L5_41 or Private Health Facility [Column AV, KPC38,	[Column AV, KPC38]		
Delivery	Column AZ, KPC 41] "data-mod4_birth_newborncare-	"data-	Women who experienced complications during delivery who received medical attention from a health professional at a health facility	6/6 = 100%
Complications	Birth_comp" = BWC AND "data-Preg_Wom_Care- Preg_comp_loc" = Nyagoto_45 or Marani_45 or L2ISC_45 or L2OSC_45 or L3OSC_45 or L3OSC_45 or	mod4_birth_newborncare- Birth_comp" = BWC [Column BB, KPC42]	$\frac{KPC42 = A AND [KPC45 = A,B,C,D,E,F,G,H,I,J]}{[KPC42 = A]} \times 100$ Total number of surveyed women who reported experiencing complications during delivery	
	L4ISC_45 or L4OSC_45 or L5_45 or PHF_45 or			
Doctoortum	Column BE, KPC45]	data-mod5_PPC-PP_Comp	Women who experienced complications during postpartum who received medical attention from a health professional at a health facility	
Postpartum Complications	data-mod5_PPC-PP_Comp = 1 AND	data-mods_PPC-PP_Comp = 1	When who experience templications at any postpar tank who receives meant attention f for a nearth projection at a nearth f and f and f and f and f and f and f are f and f and f are f and f and f are f are f and f are f	Without OTH = 9/12 = 75% CI= 47%% LL, 102%% UL
	"data-mod5_PPC-PP_Comp_tx" = Nyagoto_78 or Marani_78 or 12/SC_78 or 12/SC_78 or 13/SC_78 or 13/SC_78 or 13/SC_78 or	[Column CY, KPC76]		

L4OSC_78 or L5_78 or PHF_78 or		
[Column CY, KPC76, Column DB, KPC78]		

Tabulation Plan Section 2:

L_sec" = facility_deliv AND "data- mod4_birth_newborncare- respectful_delivery-HFD_Fam" = 1 AND "data- mod4_birth_newborncare- respectful_delivery-HFD_Fam" = 1 AND "data- mod4_birth_newborncare- respectful_delivery-HFD_Fam" HFD_Respect" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Privacy" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Privacy" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Position" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_fosition" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_fosition" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_rid_food" = 1 AND (column BK, KPC48c)	Indicator	Numerator	Denominator	Formula
I COIUMN BL. KPC49	Culturally appropriate	mod4_birth_newborncare- before_we_move_to_the_nex t_sec" = facility_deliv AND "data- mod4_birth_newborncare- respectful_delivery-HFD_Fam" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Respect" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Privacy" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Position" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_Position" = 1 AND "data- mod4_birth_newborncare- respectful_delivery- HFD_trd_food" = 1 AND	mod4_birth_newborncare- before_we_move_to_the_nex t_sec" = facility_deliv	Women providing combination of Signifying Factors of Culturally Appropria KPC48b = A[KPC48c = A] AND [KPC49 = A] AND [KPC50 = A] AND [KPC51 = A] AND Total Number of Women Surveyed Who Gave Birth in a Health Facility KPC48b = A × 100

	Column BN, KPC 51 Column BO, KPC 52]		
Danger Sign Recognition - Preg	"data-Preg_Wom_Care- Preg_Dang3" =1 [Column AU, KPC37]	"data-HouseID-village" is not blank	$\frac{\textit{Women providing combination of Three Danger Signs in Pregnancy}}{\textit{KPC37} = A} \times 100}{\textit{Total Number of Women Surveyed (N)}} \times 100$
Danger Sign Recognition – Delivery	"data- mod4_birth_newborncare- Delivery_Dang3" = 1	[column I<>""] "data-HouseID-village" is not blank	$\frac{\textit{Women providing combination of Three Danger Signs in Delivery}}{\frac{\textit{KPC66} = A}{\textit{Total Number of Women Surveyed (N)}}} \times 100$
Danger Sign Recognition – Post partum	"data-mod5_PPC- PP_danger3" = 1	[column I<>""] "data-HouseID-village" is not blank	$\frac{\textit{Women providing combination of Three Danger Signs in Postpartum for Herself}}{\textit{KPC73} = A}$ $\frac{\textit{Total Number of Women Surveyed (N)}}{\times 100}$
Danger Sign Recognition – Newborn	[Column CU, KPC73] "data-mod5_PPC- NB_Danger3" = 1	[column I<>""] "data-HouseID-village" is not blank	$\frac{\textit{Women providing combination of Three Danger Signs in newborns}}{\textit{KPC75} = A} \times 100$ $Total Number of Women Surveyed (N)$
Birth plan/ Emergency transportation-	[Column CX, KPC75] "data-Preg_Wom_Care- Birthplan_Comp" Contains	[column I<>""] "data-HouseID-village" is not blank	Women providing combination of Birth Plan Components $\frac{KPC33 = A \text{ AND } B \text{ AND } C \text{ AND } D \text{ AND } E}{Total \text{ Number of Women Surveyed (N)}} \times 100$
household	Facility_Deliv AND Transport AND Money AND Person_Acc AND	[column I<>""]	
Breakdown by	Person_Home [Column AO, KPC 33] Percentage of women that	"data-HouseID-village" is not	Women providing combination of Birth Plan Components
aspect: Birth plan/ Emergency	had each birth plan aspect	blank	$\frac{KPC33 = A}{Total \ Number \ of \ Women \ Surveyed \ (N)} \times 100$

transportation- household	"data-Preg_Wom_Care- Birthplan_Comp"= Facility_Deliv	[column I<>""]	$\frac{\textit{Women providing combination of Birth Plan Components}}{\textit{KPC33} = B} \times 100$ $Total Number of Women Surveyed (N)$
	"data-Preg_Wom_Care- Birthplan_Comp"= Transport		Women providing combination of Birth Plan Components $\frac{KPC33 = C}{Total \ Number \ of \ Women \ Surveyed \ (N)} \times 100$
	"data-Preg_Wom_Care- Birthplan_Comp"= Money		Total Number of Women Surveyed (N)
	"data-Preg_Wom_Care- Birthplan_Comp"= Person_Acc		Women providing combination of Birth Plan Components $\frac{KPC33 = E}{Total \ Number \ of \ Women \ Surveyed \ (N)} \times 100$
	"data-Preg_Wom_Care- Birthplan_Comp"= Person_Home		$\frac{\textit{Women providing combination of Birth Plan Components}}{\textit{KPC33} = F} \times 100$ $Total Number of Women Surveyed (N)$
	[Column AO, KPC 33]		
Average age of first pregnancy of mothers with child under 24	SUM of "data- Mother_Obstetric- Mother_First_Preg"	data-Mother_Obstetric- Mother_Num_LB = 1	Average Age of Women with children U2 whose First Pregnancy was with that children U2 whose First Pregnancy was with the U2 whose First Pregnancy was w
months of age	OF THOSE WITH data-Mother_Obstetric- Mother_Num_LB = 1	[Column AD, KPC24]	Total Number of Women Surveyed who had their first Pregnancy in the last year
	[Column AI, KPC27, Column AD24, KPC27]		
Antenatal care: 4+ prenatal checks	"data-Preg_Wom_Care- anc_mnch" = 4+anc	"data-HouseID-village" is not blank	Women who had at least 4 ANC Checks $\frac{KPC29 = B}{Total \ Number \ of \ Women \ Surveyed \ (N)} \times 100$
	[Column AK, KPC29]	[column l<>""]	
Male partner involvement in maternal/newb	"data-Preg_Wom_Care- ANC_Partner_Att = 1	"data-HouseID-village" is not blank	Women whose partner accompanied them to at least 1 ANC $\frac{KPC30 = A}{Total \ Number \ of \ Women \ Surveyed \ (N)} \times 100$
orn care	[Column AL, KPC30]	[column l<>""]	

Essential	"data-	"data-HouseID-village" is not	Newborns Recieved Immediate Care Provisions
newborn actions	mod4_birth_newborncare-	blank	$[KPC \ 56 = A] \ AND \ [KPC57 = A \ or \ B] \ AND \ [KPC58 = A] \ AND \ [KPC59 = A] \ AND \ [KPC60 \ AND \ [KPC61 = A] \ AND \ [KPC63 = A]$
(ENAs)	ENC_CordCare" = Meds_57		Total Number of Women Surveyed (N)
(2.0.0)	AND	[column I<>""]	Total Lamber of Westerbarreyea (11)
	"data-	[column v]	
	mod4_birth_newborncare-		
	ENC_Dry" = DWCB_58 OR SKIN_2_SKIN		
	AND		
	"data- mod4_birth_newborncare-		
	ENC_IBF" = STAT		
	AND		
	"data-		
	mod4_birth_newborncare-		
	ENC_Weigh" = 1		
	AND		
	"data-		
	mod4_birth_newborncare-		
	ENC_Measure" = 1		
	AND		
	"data-		
	mod4_birth_newborncare-		
	ENC_BCG" = 1		
	AND		
	"data-		
	mod4_birth_newborncare-		
	ENC_OPVO" = 1		
	[Column BT, KPC56		
	Column BV, KPC57		
	Column BX, KPC58		
	Column BY, KPC59		
	Column BZ, KPC60		
	Column CA, KPC61 Column CC, KPC63]		
	Columnice, KPC65]		

Post-partum Care	"data-mod5_PPC-PPC_48" = First_2D AND "data-mod5_PPC- PPC_provider" = doc_71, OR nurse_71, OR clinician	"data-HouseID-village" is not blank [column I<>""]	$\frac{[\mathit{KPC70} = \mathit{A}] \; \mathit{AND} \; [\mathit{KPC71} = \mathit{A}, \mathit{B}, \mathit{or} \; \mathit{J}]}{[\mathit{KPC70} = \mathit{A}] \; \mathit{Number of Women Surveyed (N)}}$ $\times \; 100$
Family Planning	[Column CP, KPC70 Column CQ, KPC71] "data-mod5_PPC-FP_Need" =	"data-mod5 PPC-FP Need" =	Women Who are Using a Modern Form of Contraception
Tanning Transling	O AND	0	$\frac{KPC79 = B \text{ AND } KPC80 = B, C, D, E, F, G, H, I, or J}{KPC79 = B} \times 100$ Number of women who don't want preg in next year
	"data-mod5_PPC-FP_Meth" = IMPLNT, or DEPO, or PILL, or IUD, or DIAPH, or FGSCT, or BTL, or VAS	[Column DC, KPC79]	
	[Column DC, KPC79, Column DD, KPC80]		
Maternal handwashing behavior	"data-mod7_watsan- Mother_HW" = wth_wtr_othr	"data-HouseID-village" is not blank	Women who report that they washed their hands with soap and water in at least 4 critical moments $\frac{[\mathit{KPC97} = \mathit{A}]\ \mathit{AND}\ [\mathit{KPC98} = \mathit{A}]}{\mathit{Total}\ \mathit{Number}\ \mathit{of}\ \mathit{Women}\ \mathit{Surveyed}\ (\mathit{N})} \times 100$
	"data-mod7_watsan- HW_knowledge" =1 [Column DU, KPC97 Column DX, KPC98]	[column I<>""]	Total Number of Women Surveyed (N)
Proper point- of-use (POU) water treatment	"data-mod7_watsan- Water_tx_freq" = Today , or yester	"data-HouseID-village" is not blank	Women interviewed who stated that their household is using effective water treatment within the last two days [KPC101 = A or B] AND [KPC100 = C, D, E, or F] Total Number of Women Surveyed (N)
a cument	AND	[column l<>""]	× 100
	"data-mod7_watsan- Water_tx_meth" = boil , or		

	chlorine, or filter_creamic, or solar_dis		
	[Column EA, KPC101 Column DZ, KPC100]		
Proper water storage	"data-mod7_watsan- Water_store" = rooftop	"data-HouseID-village" is not blank	Women interviewed who stated that their household stores all of their potable water as verified by interviewer $[KPC102 = B] OR [KPC102 = A] AND [KPC104 = A] AND [KPC105 = A]$ Total Number of Women Surveyed (N)
	("data-mod7_watsan-Water_store"= container AND "data-mod7_watsan-Water_Cont" = narrow AND "data-mod7_watsan-Water_cont_cov" = all_are") [Column EB, KPC102 Column ED, KPC104 Column EE, KPC105]	[column I<>""]	× 100
Improved Latrine	"data-mod7_watsan- Latrine"= pit_lat , or VIP_1 , or flush_sept		Women who report that their household is an ODF Household $\frac{[KPC106 = C, D, OR E]}{Total \ Number \ of \ Women \ Surveyed \ (N)}$
Open Defecation Free (ODF) Household	"data-mod7_watsan-Latrine"= pit_lat, or VIP_1, or flush_sept AND	"data-HouseID-village" is not blank [column I<>""]	Women who report that their household is and ODF Household $\frac{[\mathit{KPC}106 = \mathit{C}, \mathit{D}, \mathit{OR}\; \mathit{E}]\; \mathit{AND}\; \mathit{KPC}96 = \mathit{A}}{\mathit{Total}\; \mathit{Number}\; \mathit{of}\; \mathit{Women}\; \mathit{Surveyed}\; (\mathit{N})} \times 100$
	"data-mod7_watsan- HW_Components" = 1 [Column EF, KPC106 Column DT, KPC96]		

Proper treatment of diarrhea – increased feeding and fluids given to	"data-mod9_childillness- Diarr_Recent" = 1 AND	"data-mod9_childillness- Diarr_Recent" = 1	Women who report that their child had a diarrhea episode in the past 2 weeks and received increased feeding and increased liquids $\frac{\mathit{KPC}115 = \mathit{YES} \; \mathit{AND} \; [\mathit{KPC}120 = \mathit{C}]}{\mathit{KPC}115 = \mathit{YES}}$ $\mathit{Total Number of Children with Diarrhea Episode}$
child	"data-mod9_childillness- Diarr_Liq"= more_usual	[Column EP, KPC115]	
	AND		
	"data-mod9_childillness- diarr_feed" more_usual		
	[Column EW, KPC119 Column EX, KPC120]		
Handwashing station with cleaning	"data-mod7_watsan- HW_Components" = 1	"data-HouseID-village" is not blank	Women who report that their household has a handwashng station with water, cleaning product, and container $\frac{[\mathit{KPC96} = A]}{KPC96} \times 100$
product, water and recipient	[Column DT, KPC96]	[column I<>""]	Total Number of Women Surveyed (N)
Prevention of PPH	"data- mod4_birth_newborncare- before_we_move_to_the_nex t_sec" = facility_deliv	"data- mod4_birth_newborncare- before_we_move_to_the_nex t_sec" = facility_deliv	Women with HFD who report receiving an injection or pill to prevent hemorrhage $\frac{\mathit{KPC48b} = 1 \mathit{AND} [\mathit{KPC53} = \mathit{A}]}{\mathit{KPC48b} = 1}$ $\mathit{Women with a health facility delivery} \times 100$
	"data- mod4_birth_newborncare- AMSTL_Bleed" =1	[Column BJ, KPC48c]	
	[Column BJ, KPC48c, Column BQ, KPC53]		

Tabulation Plan Section 3:

Indicator	Numerator	Denominator	Formula	
Exclusive breastfeedin g (EBF) during first 6 months	"data- mod6_mat_lact_nut -First_Liquid" = >6MNTHS	"data- mod6_mat_lact_nut -Child_AgeMonth" = 6-11MNTHS_85 OR 12-24MNTHS_85	Women who report first feeding and first liquid after 6 months KPC83=A AND KPC84=A AND [KPC85=B OR C] [KPC85=B OR C] Children between 6-24 Months	× 100
	"data- mod6_mat_lact_nut -First_Solid" = >6MNTHS_84 AND	[Column DI, KPC85]		
	"data- mod6_mat_lact_nut -Child_AgeMonth" = 6-11MNTHS_85 OR 12-24MNTHS_85			
	[Column DG, KPC83, Column DH, KPC84, Column DI, KPC85]			
Exclusive breastfeedin g (EBF) during previous day	"data- mod6_mat_lact_nut -Yes_BF" = 1 AND	"data- mod6_mat_lact_nut -Child_AgeMonth" = 0-5MNTHS_85	Women who practiced EBF during the previous day $\frac{[\mathit{KPC}82=A]\ \mathit{AND}\ \mathit{KPC}85=A}}{[\mathit{KPC}85=A]} \times 100$ Children between 0–6 Months	

	"data- mod6_mat_lact_nut -Child_AgeMonth" = 0-5MNTHS_85 [Column DF, KPC82, Column DI, KPC85]	[Column DI, KPC85]		
Proper feces disposal _ Curamericas version	"data- mod7_watsan- Feces_Disp" = threw_toilatri OR clean_toilatri OR clean_sewage [Column EH, KPC107]	"data-HouseID- village" is not blank [column I<>""]	Women who report that they safely disposed of their child'sfeces the last time they passed stool [KPC107=A,G,or H] Total Number of Women Surveyed (N)	× 100
Proper feces disposal _ USAID version	"data- mod7_watsan- Latrine" = flush_sept OR VIP_1 OR pit_lat AND	"data-HouseID- village" is not blank [column I<>""]	Women who report that they safely disposed of their child'sfeces the last time they passed stool [KPC106=C,D,or E] AND [KPC107=A or G] Total Number of Women Surveyed (N)	× 100

	"data- mod7_watsan- Feces_Disp" = threw_toilatri OR clean_toilatri OR [Column EF, KPC106] Column EH, KPC107]			
Proper treatment for diarrhea- ORS - USAID	"data- mod9_childillness- Diarr_Tx" = ors_pack OR ors_zinc AND "data- mod9_childillness- Diarr_Recent" = 1 [Column EU, KPC118, Column EP, KPC115]	"data- mod9_childillness- Diarr_Recent" = 1 [Column EP, KPC115]	Women who report that their child had a diarrhea episode in the past 2 weeks and were given ORS or Zinc ([KPC118=B OR C]) AND KPC115=YES KPC115=YES Total Number of Children with Diarrhea Episode 100	×

Proper treatment for diarrhea- ORS – Curamericas version	"data- mod9_childillness- Diarr_Tx" = ors_pack OR zinc_pack OR ors_zinc OR home_liquids OR syrup_withzinc OR IV_soln OR homerem_water AND "data- mod9_childillness- Diarr_Recent" = 1 [Column EU, KPC118, Column EP, KPC115]	"data- mod9_childillness- Diarr_Recent" = 1 [Column EP, KPC115]	Women who report that their child had a diarrhea episode in the pass were given some form of rehydration [KPC118=B,C,D,E,F,OR J]AND KPC115=YES KPC115=YES Total Number of Children with Diarrhea Episode 100	st 2 weeks and
Immunizatio n of young children – 6- 11 months	"data- mod8_vaccination- _12_Vacc" Contains ALL: A through N AND Q	"data- mod8_vaccination- Age_Vacc" = 6_11 [Column EJ, KPC109]	Women who report that their 6–11 month old child had received all required vaccinations per MCH records [KPC111=A,B,C,D,E,F,G,H,I,J,K,L,M,N,and Q] AND KPC109=B KPC109=B Total Number of Women Surveyed with child 6–11 months old	× 100

	"data- mod8_vaccination- Age_Vacc" = 6_11 [Column EL, KPC111, Column EJ, KPC109]		
Immunizatio n of young children – 12-17 months	"data- mod8_vaccination18_Vacc" Contains ALL: A through N, AND P [Column EM, KPC112]	"data- mod8_vaccination- Age_Vacc" = 12_18 [Column EJ, KPC109]	Women who report that their 12–17 month old child had received all required vaccinations per MCH records [KPC112=A,B,C,D,E,F,G,H,I,J,K,L,M,N,and P] AND KPC109=C KPC109=C Total Number of Women Surveyed with child 12–17 months old
Immunizatio n of young children –18 months	"data- mod8_vaccination24_Vacc" Contains ALL: A through N, AND P AND "data- mod8_vaccination- Age_Vacc" = 18_24	"data- mod8_vaccination- Age_Vacc" = 18_24 [Column EJ, KPC109]	Women who report that their 18–24 mo old child had received all required vaccinations per MCH records [KPC113=A,B,C,D,E,F,G,H,I,J,K,L,M,N,and P] AND KPC109=D KPC109=D Total Number of Women Surveyed with child 18–24 months old

	[Column EN, KPC113, Column EJ, KPC109]		
Immunizatio n of young children – Fully vaccinated	"data- mod8_vaccination24_Vacc" Contains ALL: A through N, P AND Q AND "data-Identification- Child_Age" Number is ≥ 18 [Column EN, KPC113, Column Q, KPC10]	"data-Identification-Child_Age" Number is ≥ 18 [Column Q, KPC10]	Women who report that their 18+mo old child had received all required vaccinations per MCH records [KPC113=A,B,C,D,E,F,G,H,I,J,K,L,M,N,P AND Q] AND KPC10≥18 KPC10≥18 Total Number of Women Surveyed with child 18 months old or older 100
Timely treatment of malaria with ACT	"data- mod9_childillness- Malaria_Tx" = al_act AND	"data- mod9_childillness- Malaria_Confirm" = 1	Women who report that their child had a malaria diagnosis in the past 2 weeks and were given ACT within 48 hours after fever began [KPC128=A] AND [KPC130=A or B] AND KPC127=YES KPC127=YES Total Number of women who report that their child had a malaria diagnosis in the past 2 weeks 100
	"data- mod9_childillness- Malaria_Tx_Time" = Same_day OR	[Column FG, KPC127]	

	Next_day			
	AND			
	"data- mod9_childillness- Malaria_Confirm" = 1			
	[Column FH, KPC 128 Column FL, KPC 130 Column FG, KPC127]			
	"data- mod9_childillness- Pneu_recent" = 1	"data- mod9_childillness- Pneu_recent" = 1	Women who report that their child had chest related cough and difficulty or fast breathing in the past 2 weeks and were taken to an approproate health provider within 48 hours or presenting symptoms [KPC121=A] AND [KPC122=A] AND [KPC124=A,B,C,D,E,F,G,H,I or J] AND [KPC125=A,B,or C]	
	AND	AND	[KPC121=A] AND [KPC122=A] Women who report that their child had chest related cough	× 100
Proper/timel	"data-	"data-	and difficulty or fast breathing	
y care-	mod9_childillness-	mod9_childillness-		
seeking for pneumonia	Pneu_confirm" = 1	Pneu_confirm" = 1		
	AND			
	"data- mod9_childillness- Pneu_assist_place" =			
	Nyagoto_124 OR			

	Marani_124 OR		
	L2ISC_124 OR		
	L2OSC_124 OR		
	L3ISC_124 OR		
	L30SC_124 OR		
	L4ISC_124 OR		
	L4OSC_124 OR		
	L5ISC_124 OR		
	PHP_124 OR		
	AND		
	"data-		
	mod9_childillness-		
	Pneu_Tx_Time" =		
	same_day		
	next_day		
	[6 5V KD0424		
	[Column EY, KPC121		
	Column EZ, KPC122		
	Column FD, KPC124		
	Column FE, KPC125] "data-	"data-	Women with children 12–17 months who report that their child had been
	mod8_vaccination-	mod8_vaccination-	dewormed in the past 6 months
	_18_Vacc"	Age_Vacc"	$\frac{[KPC112\ CONTAINS\ 'S']\ AND\ KPC109=C}{KPC109=C} \times 100$
CI ''	CONTAINS S	= 12_18	Total Number of Women Surveyed with child between 12 months
Child deworming –	CONTAINS	_ 12_10	and 17 months old
12 months -	AND	[Column EJ,	
17 months		KPC109]	
	"data-	5100]	
	mod8 vaccination-		
	Age_Vacc"		

= 12_18		
[Column EM,KPC 112 Column EJ, KPC109]		
"data- mod8_vaccination- _24_Vacc" Contains: U AND V	"data- mod8_vaccination- Age_Vacc" = 18_24	Women with children 18–24 months who report that their child had been dewormed in the past 6 months [KPC113 CONTAINS U AND V] AND KPC109=D KPC109=D Total Number of Women Surveyed with child between 18 and 24 months old 100
"data- mod8_vaccination- Age_Vacc" = 18_24 [Column EN, KPC113	[Column EJ, KPC109]	
"data- mod8_vaccination12_Vacc" Contains Q AND "data- mod8_vaccination- Age_Vacc"	"data- mod8_vaccination- Age_Vacc" = 6_11 [Column EJ, KPC109]	Women with children 6–11 months who report that their child had received Vitamin A Supplements in the past 6 months according to their health card [KPC111 CONTAINS Q] AND KPC109=B KPC109=B Number of Women Surveyed with child between 6 months and 11 months old 100
	[Column EM,KPC 112 Column EJ, KPC109] "data- mod8_vaccination24_Vacc" Contains: U AND V AND "data- mod8_vaccination- Age_Vacc" = 18_24 [Column EN, KPC113 Column EJ, KPC109] "data- mod8_vaccination12_Vacc" Contains Q AND "data- mod8_vaccination10_Vacc" Contains Q AND "data- mod8_vaccination10_Vacc" Contains Q	[Column EM,KPC 112 Column EJ, KPC109] "data- mod8_vaccination24_Vacc" Contains: U AND V AND "data- mod8_vaccination- Age_Vacc" = 18_24 [Column EN, KPC109] "data- mod8_vaccination- Age_Vacc" = 18_24 [Column EN, KPC113 Column EJ, KPC109] "data- mod8_vaccination12_Vacc" Contains Q AND [Column EJ, KPC109] "data- mod8_vaccination- Age_Vacc" = 6_11 AND [Column EJ, KPC109] "data- mod8_vaccination- Age_Vacc" [Column EJ, KPC109]

	[Column EL, KPC111 Column EJ, KPC109]		
	"data- mod8_vaccination- _18_Vacc" CONTAINS Q AND R	"data- mod8_vaccination- Age_Vacc" = 12_18	$\frac{\textit{Women with children 6-11 months who report that their child had received Vitamin A Supplements in the past 6 months according to their health card}{\textit{KPC112 CONTAINS Q AND R} \textit{KPC109=C}} \times \frac{\textit{KPC109=C}}{\textit{Number of Women Surveyed with child between 12 months and 17 months old}}}{100}$
Vitamin A – dose 2 – 12- 17 months	"data- mod8_vaccination- Age_Vacc" = 12_18 [Column EM,KPC	[Column EJ, KPC109]	
	112 Column EJ, KPC109]		
Vitamin A – dose 3 – 18- 24 months	"data- mod8_vaccination24_Vacc" Contains: R, S AND T	"data- mod8_vaccination- Age_Vacc" = 18_24 [Column EJ, KPC109]	Women with children 6–11 months who report that their child had received Vitamin A Supplements in the past 6 months according to their health card [KPC111 CONTAINS R,S,and T] AND KPC109=D KPC109=D Number of Women Surveyed with child between 18 months and 24 months old 100
	"data- mod8_vaccination- Age_Vacc"		

	= 18_24		
	[Column EN, KPC113 Column EJ, KPC109]		
	"data-Identification- Child_Age" ≥6	"data-Identification- Child_Age" ≥6	Dietary Diversity – breastfed children: Women interviewed with children between 6 and 23 months who provided sufficient dietary diversity within the past 24 hours
	AND	AND	KPC82=YES AND 6≤KPC10<24 AND Any Combination of Four or more Yes (A)Responses for the following:
	"data-Identification- Child_Age" <24	"data-Identification- Child_Age" <24	$ \frac{[\mathit{KPC}86=A] \ \mathit{OR} \ [\mathit{KPC}87=A] \ \mathit{OR} \ [\mathit{KPC}88=A] \ \mathit{OR} \ [\mathit{KPC}89=A] \ \mathit{OR} \ [\mathit{KPC}90=A] \ \mathit{OR} \ [\mathit{KPC}91=A] }{\mathit{OR} \ [\mathit{KPC}92=A]} } $
	AND COMBINATION OF 4 OR MORE OF	AND	Total Number of Women with breastfed children 6–24 months Surveyed
Minimum Dietary	THE FOLLOWING:	"data- mod6_mat_lact_nut	
Diversity (MDD) of	"data- mod6_mat_lact_nut	-Yes_BF" = 1	
breastfed children	-Yes_BF" = 1	[Column Q, KPC10 Column DF, KPC82]	
	AND		
	"data-comp_feed- Yest_Tubers_001"		
	=1		
	AND		
	"data-comp_feed- Yest_Dairy" = 1		

AND	
"data-comp_feed- Yest_Nut" = 1	
AND	
"data-comp_feed- Yest_VitA" = 1	
AND	
"data-comp_feed- Yest_FruitVeg" = Yes	
"data-comp_feed- Yest_Meat" = Yes	
AND	
"data-comp_feed- Yest_Egg" = Yes	
[Column DF, KPC82 Column DI, KPC85,	
Column DJ, KPC86, Column DK, KPC87, Column DL, KPC88,	

	Column DM, KPC89,		
	Column DN, KPC99,		
	Column DO, KPC91,		
	Column DP, KPC 92]	// L	
	"data-comp_feed-	"data-Identification-	Meal Frequency:
	Yest_Eat" ≥2	Child_Age" ≥6	
			Women interviewed with breastfed children between 6 and 23 months who provided sufficient feeding frequency within the past 24 hours
	AND	AND	$(KPC94 \ge 2 \text{ AND KPC } 82 = YES \text{ AND } 6 \le KPC10 < 9) +$
			(KPC94≥3 AND KPC 82=YES AND 9≤KPC10 <24)
	"data-	"data-Identification-	(6≤KPC10<24 AND KPC82=YES) Total Number of Women Surveyed with child between 6 and 24 months old
	mod6_mat_lact_nut	Child_Age" <24	Total Number of Women surveyed with child between 6 and 21 months of
	-Yes BF" = 1		
	_		
	AND	AND	
Minimum	"data-Identification-	"data-	
Meal	Child_Age" ≥6	mod6 mat lact nut	
Frequency		-Yes BF" = 1	
(MMF) –	AND	_	
breastfed			
children	"data-Identification-	[Column Q, KPC10	
	Child Age" <9	Column DF, KPC82]	
		33 2., 302]	
	[Column DR, KPC94,		
	Column DF, KPC82,		
	Column Q, KPC10]		
	Column Q, KF C10]		
	PLUS		
	FLUS		
	"data-comp feed-		
	Yest Eat" ≥3		
	IESI_EAL 23		

	AND		
	"data- mod6_mat_lact_nut -Yes_BF" = 1		
	AND		
	"data-Identification- Child_Age" ≥9		
	AND		
	"data-Identification-Child_Age" < 24		
	[Column DF, KPC82, Column DR, KPC94, Column Q, KPC10]		
		"data-Identification- Child_Age" ≥6	Mothers of breastfed children between 6-24 months who meet both MDD and MMF
Minimum Acceptable		AND	(6≤KPC10<24 AND KPC82=YES) Total Number of Women Surveyed with breastfed children between 6 and 24 months old
Diet – breastfed children 6-23 months		"data-Identification- Child_Age" <24	
		AND	

"dat mod -Yes	a- 6_mat_lact_nut _BF" = 1	
[Col Colu	umn Q, KPC10 mn DF, KPC82]	