



QUALITY PRESCHOOL FOR GHANA (QP4G) STUDY

ENDLINE CAREGIVER SURVEY



MANUAL FOR CAREGIVER PHONE INTERVIEWERS



MAY 2017

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1 GENERAL INTRODUCTION

1.1 About the Manual

The Endline manual for Caregiver Telephone Interviewers provides information on the data collection protocols and guideline for administering the Caregiver Survey. The protocols outlined in this manual are intended to ensure uniformity in the overall fieldwork and data collection processes and structures during the Endline Survey. It integrates both IPA research protocols and the QP4G guideline regarding the Caregiver Survey. Trainees who successfully complete the training will work as a team to conduct phone interviews with caregivers of KG children who participated in the child direct assessment in the QP4G schools. Well-trained Caregiver Telephone Interviewers are, therefore, essential to the success of the Caregiver Survey. The data will be collected and stored using Samsung tablets. Your participation as a trainee is expected to build your capacity in administering the Caregiver Survey through the telephone. Your attention to details and adherence to the protocols in this manual will help ensure that Innovations for Poverty Action (IPA), New York University and University of Pennsylvania have access to good data to measure the effectiveness of the parental awareness creation program. We hope you will take as much pride in your work as we take in our hard-working employees. Welcome to the Caregiver phone interviewers training for the Quality Preschool for Ghana (QP4G) Study! Welcome to IPA!

1.2 Introduction to IPA

Innovations for Poverty Action (IPA) is a US-based non-profit research organization dedicated to creating, evaluating and replicating innovative solutions to poverty and policy problems worldwide. IPA specializes in using the randomized controlled trial methodology to evaluate the impact of development programs. IPA works with development partners and academic researchers to design and rigorously evaluate approaches to solving development problems, and to refine these solutions and their applications together with decision-makers to ensure that the evidence created is used to improve opportunities for the world's poor. IPA works in a variety of fields, including microfinance, agriculture, education, and health.

1.3 Training Objectives

By the end of this training, participants will be able to:

- a. Understand the QP4G Study.

- b. Introduce enumerators to the purpose of the QP4G study.
- c. Introduce and train enumerators on the administration of the Caregiver Survey.
- d. Make sure enumerators feel fully comfortable and fluent in administering the Caregiver Survey through the phone.
- e. Make sure enumerators are aware of any challenges that may be encountered while conducting telephone surveys and how to competently handle them.
- f. State roles, responsibilities and expectations for their involvement in the survey.
- g. Carry out the survey in the field, following the correct protocols prescribed during the training.

1.4 Ground Rules for Training

The following rules are to be adhered to during the training:

- a. Attend all training sessions punctually. Attendance will be taken at the beginning of each day.
- b. Follow the instructions of the trainer.
- c. Guard the training materials and/or equipment given to you with utmost care.
- d. Switch mobile phones off, to silent or vibration modes.
- e. You are expected to fully participate in all training sessions. Be attentive and take everything you are learning seriously; your participation is key.
- f. Do not eat when training is in session.
- g. Respect one another.
- h. Ask questions when you are not clear on something.

1.5 Assessing Learning and Performance

Trainees' learning and performance will be evaluated regularly during training. This is important to gauge the progress of the trainees; provide performance feedback to both the trainers and the trainees; as well as help in determining the best candidates for the fieldwork. A number of methods will be used in this training to support and assess learning and to evaluate performance. These are outlined below.

- a. **Quiz:** The quiz helps to review content. There will only one quiz, of which the actual scores will be used as part of the training evaluation.
- b. **Observations:** The behavior and attitude of trainees throughout the training period will be observed and this will form part of their performance evaluation. The observations will include:
 - a. **Practice interview:** During the training, the data that are collected by each trainee will be reviewed by the training team. This will be done using the data on the practice interviews. Each trainee's name will be part of the database of the interview; thus, it will be possible to view and assess each individual's data.
 - b. **Exercises:** A number of exercises will be done during the training. These exercises will focus on the mechanics of interviewing primary caregivers. The performance of the trainees will be evaluated through these exercises.

1.6 Administrative Issues

To ensure the full attention of all trainees during this training workshop, some questions or issues need to be addressed so that everyone can concentrate more easily.

- a. **Training schedule:** The training will be conducted from 15th to 17th May 2017 at the Jack and Jill School, Ridge. All training start at 9 am and close at 5 pm each day.
- b. **Fieldwork schedule:** The Caregiver Survey will be conducted in a central calling center (IPA Office) from Monday to Friday during normal school hours. The survey period is from 22nd May 2017 to 30th June 2017.
- c. **Employment details:** For issues relating to your job at IPA, please note that:
 - a. Your participation in this training is not a definite job offer but provides the basis for determining whether you are qualified for this project. An employment contract will be offered to you only after successfully passing performance assessments during this training. Details of your employment will be provided in your contract if hired.
 - b. You are required to have the following before working with IPA.
 - Health insurance: You are required to have a valid National Health Insurance card. Present a photocopy of your NHIS card for evidence.
 - An active bank account: If you are hired, IPA will pay you by bank transfer into your account. Make sure your account is active. No field staff will be

paid through the accounts of another person! You are, therefore, required to provide your bank account details to project management by the end of this training.

- d. **Workmen's compensation:** Every short-term staff will be automatically enrolled in the workmen's compensation insurance cover during the period of engagement with the project.

2 BASICS OF THE QUALITY PRESCHOOL FOR GHANA STUDY

2.1 The Context of the QP4G Study

Recent years has seen a marked increase in both the demand for and the supply of early childhood education services in Ghana. An exploratory study conducted by IPA in 2013 in the Ashaiman neighborhood revealed two key findings: (a) the quality of classroom instruction in preschools was generally low and developmentally inappropriate, and (b) parents' subjective assessment of preschool quality focused on developmentally inappropriate instruction and on classroom materials and infrastructure. Low quality of classroom instructions in preschools in Ghana has mostly been attributed to the fact that most preschool teachers are untrained or inexperienced, as well as a lack of/inadequate in-service training for preschool teachers. In fact, the results of the scoping study revealed that 69% of teachers have no training in education or childhood development. Moreover, even though governmental systems exist to provide feedback to teachers, such systems are rarely used. Parents' subjective assessment of preschool is visible in their evaluation of quality in terms of material infrastructure and perceived "serious lessons" through repetition of letters and numbers. Collectively, the low quality of preschool classroom instruction has led to inadequate preparation of children to be ready for progression into the primary school system.

2.2 The QP4G Project

In order to address the above policy concerns, IPA, in partnership with researchers from New York University in the United States, seek to improve the quality of kindergarten education through teachers and parents. Specifically, the Project involves

- a. An 8-day in-service teacher training delivered by the National Nursery Teacher Training Center with monitoring and feedback visits;

- b. A 3-part video and discussion intervention delivered to parents through school Parent-Teacher Association meetings focused on early childhood development and learning;
- c. Evaluating the effectiveness of (a) improving the supply of teacher training, and (b) improving the supply and changing the demand for parental intervention.

2.3 Objectives of the QP4G Study

The primary objectives of the evaluation part of the QP4G Study are to:

- a. test the efficacy of a low-cost in-service kindergarten teacher training intervention on the teacher and child outcomes.
- b. test the efficacy of a low-cost parental awareness intervention on changing the parental perceptions and expectations of high-quality kindergarten education.
- c. test the added value of combining a scalable (low-cost) parental awareness intervention with teacher in-service training.

2.4 Main Features of the QP4G Study

The QP4G Study has the following main features:

- a. It is the only such study to be conducted in Ghana by IPA in partnership with researchers from NYU.
- b. It includes standardized instruments (KG Teacher Survey, Classroom Observation, Child Direct Assessment, and Caregiver Survey).
- c. Data will be collected using a Samsung tablet on the SurveyCTO platform.
- d. It includes innovative field protocols (tracking, monitoring, etc.) to support high-quality data collection.
- e. The instruments are designed to be aligned with global Early Childhood Development indicators.

3 CONDUCTING THE CAREGIVER PHONE INTERVIEW

3.1 Contacting the Caregiver

The interviewer is expected to conduct phone interviews with primary caregivers. For the purpose of the QP4G Study, a Primary Caregiver is the person who is primarily responsible for a child's care, education and could best talk about his/her educational experiences in

school and at home. It may be the child's parent, a family member, guardian, or another individual. To contact the primary caregiver, a number of procedures need to be followed.

3.1.1 Interviewer assignments

Every interviewer will be giving daily assignments. The interviewer will be given three forms: Interviewer Assignment Sheet (IAS), Call Record and Screener, and Proxy Identification Form (PIF). The interviewer is expected to work with all these forms. The IAS has information on all caregivers listed in a school, i.e., it provides a school level information on all caregivers within a school. It has details on the school, caregiver and sampled KG children. It forms the basis for the use of all other forms in this survey. Each caregiver on the IAS should be contacted using the Call Record and Screener. After completing the interview with the caregiver, indicate the final interview result against the primary caregiver's name. Considering the fact that these forms contain a PII, they must be protected from any third party access.

3.1.2 Contact attempt procedure

A number of procedures have been developed to guide interviewers in contacting the caregiver for an interview. This involves recording every contact or call attempts, any pertinent respondent comments (e.g., the best time to reach him or her or reasons for reluctance to participate), and the results of each contact attempt. These procedures are captured in one form – Call Record and Screener. This form has three parts – the subject information, call records and interview outcome. The subject information section has personally identifying information (PII) about the interviewer, school, child, and caregiver. Information on the school, KG child and caregiver will be prefilled. Complete all other fields in this section. The interview outcome should be completed. In this section, take information on the particular contact to which the GHC 5 top-up should be sent. Also, provide information on whether [and which network] the number is ported.

3.1.2.1 The Call Record

The Call Record provides the personal details and calls records on each caregiver listed on the IAS. It is an individual level form. One Call Record must be completed for every caregiver listed on the IAS. The Call Record provides call records on each of the caregivers listed on the IAS, whether a response was gotten or not. The Call Record is used to record the results of all phone call attempts that you make in attempting to contact a caregiver. The Call Record is a

means of (a) recording information about the status of each caregiver on the IAS; (b) passing along any helpful information (e.g., a contact name to ask for, best times to call) to the next interviewer to call the number; (c) linking the interviewer to the interview, for feedback and supervision if needed; (d) marking the outcome of each telephone number (including completed interviews, refusals, etc.). The Call Record is needed for three reasons. First, there are too many telephone numbers to remember what happened on previous tries. Second, it allows the Field Manager to decide the next action for each number (e.g., call back, or remove from the sample pool) and finally, it helps ensure that each number is called back an adequate number of times, maximizing validity. The Call Record has two parts:

3.1.2.1.1 Non-active call records

The non-active call records capture the details of the call attempt for non-active telephone contacts. Non-active telephone numbers are contacts not working, not/never available, rings but no answer, with answering machine or voice, and busy signal. You are required to make several attempts for at least ten (10) days in getting through inactive numbers. Each line of the call attempt should be completed at the end of the particular day of trying to reach the contact. The fields to be completed are:

- a. Date: Enter the day and month you make the call (e.g., 3/15).
- b. Time: Enter the time of day that you make the call (e.g., 13:15). Use the 24-hour clock to record the time for each call attempt.
- c. Comments: Record any additional information which helps to describe what happened during the attempted telephone contact. The information should be sufficient to permit another interviewer to continue with the assignment. Try to limit your comments to the space provided on this line.
- d. Disposition code: This column indicates the interim outcome of each attempt in reaching the primary caregiver. These set of codes should be finalized once the interview with the caregiver has been completed (see Table 3).

3.1.2.1.2 Active call records and the Caregiver Screener

The active call records capture details on call attempts for which a response was gotten. Once a response was gotten, it is important to screen the person on the phone to determine his/her eligibility before administering the interview. The population we are trying to survey is

parents/guardians of sampled KG children in the selected QP4G schools. However, not all parents/guardians of selected KG children would be in a better position to adequately respond to the questions on the selected KG children. In order to focus on the particular caregiver, the Caregiver Screener is designed to eliminate potential respondents who do not meet these criteria, as captured in the definition of the primary caregiver. The Caregiver Screener has been integrated with the Active Call Records. This means that you can only screen contacts for which a response was given. After establishing the eligibility of the person on the phone as a primary caregiver, the Interviewer has four (4) attempts to contact him/her for an interview. It is essential that you make an entry in this section after every attempt at conducting the interview for the caregiver. Each call attempt requires the interviewer to enter the following information:

- a. Interviewer ID
- b. Date and time in which the call attempt was made.
- c. Callback appointment date and time, if required: If an appointment has been made for an interview with the primary caregiver and/or proxy on a particular date, the date and approximate time of the appointment should be recorded in this column. This column is only used when a specific appointment has been made to conduct the interview on a future date.
- d. New contact number: Use this column to record new contact numbers that have been obtained during your attempt to contact the primary caregiver.
- e. Name and contact number of the primary caregiver if different from what was provided on the IAS. This will occur if the screener questions rule out respondent for survey eligibility.
- f. Administer the consent to the primary caregiver once his/her eligibility has been determined.
- g. Indicate the number of children a caregiver is responsible for in the school and providing the details for all such children.

3.1.2.2 The Call Result

The Call Result records the outcome of every call attempt you make in contacting the primary caregiver. That is, every attempt you make to contact and interview a potential caregiver must

be recorded using the disposition codes. There are two types of disposition codes: interim and final. Together, these codes indicate the disposition of the contact after every call attempt.

3.1.2.2.1 Interim disposition codes

Interim disposition codes should be used when further calls will be needed (see Table 1). Interim disposition codes are numbers. The interim disposition codes will be used for Section B of the Call Record and Screener form. In Section C, the interim result code of callback or callback to complete will be used only if applicable. If for some reason, you do not complete an interview, you should book a convenient time to call the respondent to complete the interview. As much as possible, callbacks should be avoided. Make sure you keep to an arrange time religiously.

Table 1. Disposition Codes for the Caregiver Survey

Call Disposition	Use Code	Action Required
Interim Result Codes		
Live sample		
No answer	01	Try these telephone numbers again as many times as possible.
Answering machine or voice mail	02	
Busy signal	03	
Callback, or call back to complete (CBC) i.e., this is when the respondent or someone else at the number schedule a specific time for you to call back	04	
Caregiver/proxy not available - you contact a person other than the caregiver and says caregiver is not available, or caregiver does not presently have time to do the interview.	05	
Proxy needed: When you contact the caregiver but he/she needs the proxy to participate in the interview and a proxy is not presently available.	06	
Refusals		
Hung up before/during introduction or screener questions; started interview but hung up before completing.	07	Try some of these telephone numbers again.
Has no time – refusal	08	
Doesn't do telephone surveys	09	
Never call i.e., respondent was very upset to receive a call; remove from future lists	10	
Unreachable/Not Locatable		
Non-working number	11	These numbers cannot be used.
Never available	12	
Ineligible		
Ineligible i.e., screener questions rule out respondent for survey eligibility	13	Exclude from the survey.

Call Disposition	Use Code	Action Required
Final Result Codes		
Complete interview	CI	No need for further calls to be made.
Incomplete	IC	
Refused interview	RN	
Caregiver/proxy not locatable	NL	
Caregiver not available	NA	

3.1.2.2.2 Final disposition codes

Final disposition codes are letters and should be used when no further calls will be made. Final disposition codes will be used for all call outcomes in section C, except callback or callback to complete. This should also be repeated in the “Final Interview Code” in the Subject Information section of the Call Record and Screener. The following final interview codes apply:

- a. Complete interview: Use code “CI” when the SurveyCTO Caregiver Survey Form has been completed.
- b. Incomplete interview: Use code “IC” when the caregiver breaks off before the SurveyCTO Caregiver Survey interview is complete and the interview is never completed at a later time or on a later date. Reasons for being unable to complete the interview include (a) unable to recontact the caregiver (caregiver never home, no answer, etc.) and (b) caregiver refuses to complete interview when you recontact him/her.
- c. Refused interview: Use code “RN” when the caregiver refuses to be interviewed. This code should only be used when all means of attempting to convince the caregiver to participate at the present time or at a later time have failed. Possible reasons for refusals are: caregiver too busy; not interested, interview sounds too long/is taking too long, must break-off to take care of other business, caregiver does not think IPA/interviewer is legitimate/mistrust, and confidentiality/too personal.
- d. Caregiver/proxy not locatable: Use code “NL” when you are not able to locate the caregiver or the proxy. This situation will occur when:
 - a. Several calls have been made for at least 10 days but there was never any answer or the caregiver was never in.

- b. the telephone number for the caregiver on the IAS was wrong/non-working and all tracing attempts to get a new telephone number have failed.
- e. Caregiver not available: Use code "NA" if the caregiver is away on a vacation or business trip, or is in the hospital, and will not return home or not be available before the survey end date. This situation forms part of the unusable numbers.

3.1.3 Tracing contacts

Contact tracing refers to all phone call attempts to contact the primary caregiver through a third party's phone number. There are two kinds of contact tracing – interviewer tracing and in-depth tracing.

3.1.3.1 Interviewer tracing

Interviewer "tracing" consists of the telephone calls that an interviewer make, other than to the caregiver's telephone, in attempting to locate the primary caregiver. Tracing is required when you are unable to contact the primary caregiver using the telephone number listed on the IAS. This situation will occur when:

- a. the telephone number listed on the IAS is incorrect and the person who answers the phone at this number does not know the correct telephone number for the caregiver;
- b. you have attempted to contact the caregiver at least ten times at various times during the survey period and you repeatedly received no answer.

When tracing a primary caregiver,

- a. try calling the contact people listed on the IAS. Verify whether the number you have for the caregiver is correct or, if the caregiver has moved, ask whether they could give you the new telephone number.
- b. Document all of your tracing attempts in the appropriate Call Record and Screener section. Provide details on the date, time, comment, disposition code, appointment details, and interviewer ID. If you are given a new telephone number for the caregiver, record this number in the active call record and screener section. Do not change the caregiver's telephone number on the IAS/CRS until you have called the number and verified that it is correct.
- c. If you cannot find a correct telephone number for the caregiver, submit the CRS to the Field Manager for more in-depth tracing.

Soliciting information from contacts: When you telephone a contact person, identify yourself and briefly describe the purpose of your call. If the contact doesn't know the caregiver's telephone number, record whatever information you do receive.

Soliciting information from contacts

"Hello. My name is _____ I am trying to reach Mr/Ms _____ for a survey that is being conducted by IPA on how best to provide support to young children to learn at school. Mr/Ms. _____ has already participated in this survey and he/she gave us your name and telephone number in case we were unable to reach him/her directly to contact you. I have been trying to reach Mr/Ms _____ but (explain why you have been unsuccessful]. Can you tell me his/her correct telephone number?"

3.1.3.2 In-depth tracing

In-depth tracing is done by the Field Manager for locating hard to find primary caregivers. In-depth tracing will arise when the caregiver's telephone number on the IAS is wrong and the interviewer is unable to determine the correct number. The Field Manager should use the School Survey Tracking Form and previous Call Records and Screener as well as contact the Senior Research Associate, where necessary, for more thorough tracing, especially for the old caregivers.

3.1.4 Proxy interviews

A proxy is a person who acts as the respondent in place of the caregiver. The proxy and caregiver should work together, if possible, to respond to the interview questions. A proxy should only be used when the caregiver has some physical or mental disability, or is too busy and cannot participate during the survey period or speaks a language that prevents him/her from responding to the interview questions over the telephone. Whenever an interview is conducted with the aid of a proxy, a Proxy Identification Form (PIF) must be completed.

3.2 Interviewing the Caregiver

This section details the protocols for beginning, conducting and ending the interview with the caregiver after a response was gotten and the caregiver agreed to participate in the study.

3.2.1 Language of interview

The language of the interview indicates the particular language in which the primary caregiver was interviewed at baseline. For instance, if the previous interview was conducted in Twi/Fante, it will be indicated in the language field of the Call Record and Screener. Begin speaking in Twi/Fante when someone answers the telephone. If this language is not understood by the person who answers, confirm the particular language in which the caregiver is most comfortable speaking. This equally applies to the caregivers who were not interviewed at baseline.

3.2.2 Introduction and obtaining informed consent

When the telephone is answered, ask to speak with the potential primary caregiver. Use the caregiver's full name as it appears on the IAS and the Call Record and Screener. After establishing the eligibility of the caregiver for the survey, read the consent statement to the (potential) respondent in a manner that is understandable so that s/he can make an informed decision. Read the informed consent statement verbatim.

Consent Form Statement – Caregiver Survey

Hello! My name is _____ and I am calling from Innovations for Poverty Action (IPA), Dzorwulu, Accra. I am part of the research team that is conducting a study on the Quality Preschool for Ghana.

I would like to invite you to participate in a survey as [Child's name] attends [School]. We obtained your contact from [Head's name], the head teacher of [School]. You may remember that someone from an NGO called IPA talked to you in August/September 2016 about your child's education. If you could spare some time, I would like to ask you a few questions about your background; living conditions; involvement in school activities, child discipline and perception about early childhood development. This should only take about 30 minutes.

This survey is being conducted by researchers at IPA and New York University in the United States. These institutions, together with the Ghana Education Service and the National Nursery Teacher Training Centre are researching on how to provide kindergarten teachers with effective training and support so they can best teach young children to learn. Our research team would like your input in achieving this objective.

The information you share with us will contribute to the improvement of kindergarten education in the region. Your participation in this study is voluntary. You do not have to participate if you do not want to and there is no known risk to you if you choose to participate. Please rest assured that our conversation will remain fully confidential – any responses you give will not harm you, your child or the school your child attends. We will not share this information with the head teacher, proprietor or school teachers. You may refuse to answer any of the questions and you may end the interview at any time; however, your decision will not in any way affect you or your child.

To thank you for your participation in this survey, at the end we will give you 5 Ghana Cedis of airtime for your mobile phone. We really appreciate you taking the time to speak with us today.

If you have any questions, comments, or concerns about taking part in this survey, then please let me know. If you have additional questions, you may also contact the IPA Field Manager, Henry Atimone at [0243888818] and Senior Research Associate, Edward Tsinigo at [0203899660] to ask questions you may have about this research.

Do you have any questions that I can answer?

Do you agree to participate in this survey?

1. Yes

2. No END SURVEY.

3.2.3 General interviewing techniques

The interviewer's demeanor toward the respondent should be friendly, polite, and empathetic, while at the same time maintaining a professional distance.

Interviewers MUST speak in a quiet tone of voice and avoid profanity and other inappropriate comments while in the calling room, as respondents will be able to hear background noise while they are completing their interview.

To ensure the success of the interviews, the interviewer must:

- a. Build rapport with the respondent: At the beginning of an interview, you and the respondent are strangers to each other. The respondent's first impression of you will influence his/her willingness to cooperate with the survey. You must always establish rapport with the respondent. Establishing a rapport is a continuing process – from the time you meet the respondent, through the interview process to the end/afterward of the interview. To foster rapport, the respondent should:
 - o Make a good first impression: Open the interview with a smile, greeting such as “good morning”, and then proceed. Introduce yourself, IPA and explain the purpose of the survey. The introductory sentences at the beginning of each questionnaire should be read exactly as they appear in the questionnaire.
 - o Always have a positive approach: Never adopt an apologetic manner, and do not use phrases such as, “Are you too busy?” Such questions invite refusal before you

start. Rather, tell the respondent, "I would like to ask you a few questions" or "I would like to talk with you."

- a. Answer any questions from the respondent frankly: The respondent may ask questions about the survey or why s/he was selected. Be direct, pleasant, and consistent with your answers and kind of information you provide to all respondents.
- b. Obtain informed consent: Respondents have the right to refuse participation in the survey. Before conducting an interview, it is essential to obtain their informed consent. Never begin an interview without obtaining their consent!
- c. Stress confidentiality:
 - o Keep confidential all identifying respondent contact information as well as the respondent's answers to survey questions.
 - o Always stress the confidentiality of the information you obtain from the respondent.
 - Explain to the respondent that the information you collect will remain strictly confidential and that no individual names will be used for any purposes, and that all information will be grouped together and depersonalized when writing the report.
 - Use a language understandable by the respondent to get this message across.
- d. Administer the questionnaire:
 - o Ask standardized questions
 - Be completely familiar with the questionnaire to administer it efficiently and with self-confidence. Ensure that the respondent understands the response options.
 - Read each question exactly as written and slowly. Even small changes in wording can alter the meaning of a question.
 - Ask all questions exactly in the order in which they are presented in the questionnaire.

- Ask all the questions, even if the respondent answers two questions at once. You can explain that you must ask each question individually, or say “Just so that I am sure...” or “Just to refresh my memory...”, and then ask the question.
- Minimize social desirability response bias. Social desirability response bias is a potential problem in surveys and refers to the tendency for respondents to present a favorable image of themselves to the interviewers. Sensitive questions such as child discipline may lead respondents to adjust their answers so as to appear culturally and socially acceptable. The Child Discipline Module hinges on strong cultural and social expectations and could elicit “socially acceptable answers” rather than correct and honest answers. It is important that the interviewer adopts a non-judgemental attitude and not display any personal attitudes, such as cultural or religious values, and the like.
- Follow questionnaire format and conventions
 - Pay attention to entering responses to open-ended and/or close-ended questions.
 - Follow interviewing conventions such as selecting correct fill choices (e.g., child’s name, school name, etc.) as well as recognizing and not reading aloud interviewer instructions. Texts written in lowercase (small) letters SHOULD be read directly to the respondent.
- Seek clarifications
 - Use approved and prepared stock definition or dictionary for specific words or phrases when respondents ask for clarification.
 - Otherwise, repeat the questions verbatim when respondents ask for clarification.
- Probing
 - If a respondent’s answer is inadequate, employ unbiased techniques to encourage answers that are more complete, appropriate and thoughtful.

- Probes must be neutral; that is, they must avoid “sending a message” about what is a good or bad response.
- Probe don't know responses and open-ended questions. Don't know responses to survey questions are ambiguous because the same words are used by respondents to mean different things - ignorance, indecision, or uncertainty about the meaning of the question asked. Probe Don't know answers at least once before the answer is considered final.
- Consider using any of the following to probe:
 - A pause to encourage the person to fill the silence or a direct request for further information;
 - Verbal probes chosen from a stock list of phrases such as “Could you explain what you mean by that?” or “Can you tell me anything else about?”
- Feedback
 - Provide the respondents with culturally appropriate feedback when they are doing well in order to encourage them to listen carefully and to give thoughtful answers.
 - This feedback may be in the form of a non-verbal smile or nod (when doing face-to-face) or a short encouraging phrase.
 - Verbal feedback should be selected from a prepared list of stock phrases such as “That’s a useful information”, “thank you/thanks”, “I see”, “that is certainly useful/helpful information”, or “Thank you, that’s helpful” to ensure that the feedback is not evaluative of the content of the answer. Do not use the word “okay” for feedback because it could be construed as agreement with or approval of the respondent’s answer.
- Recording answers
 - Listen carefully to the respondent’s responses to the interview. This can help you in ensuring a smooth interview flow; showing respect for the respondent, and picking up any inconsistencies in the information provided by the respondent.

- Record answers immediately and correctly when the respondent gives you the responses.
 - i. For questions that have fixed alternatives, get the respondent to choose one of the fixed alternatives; do not infer which alternative is closest to what the respondent actually says.
 - ii. If the question requires a narrative response, record the answer in as near verbatim form as possible.
- Follow skip patterns carefully for “yes” or “no” options. Strictly follow the specific instructions for each section/question.
- Don’t ever make up answers to any question. It will be discovered during the auditing process. This will always result in immediate dismissal.
- End the interview
 - Thank the respondent for her/his cooperation and giving you time to interview her/him.
 - Obtain information on caregivers’ contacts for incentive payment and inform the respondent about the incentive (i.e., top-up) transfer process.
 - Reassure the respondent that all information provided will be held in the strictest confidence.

3.2.4 Dealing with refusals – refusal conversions

The QP4G Study seeks to work towards a 100% response rate. Therefore, the surveyor must make every attempt to get potential respondents who are initially not interested in the survey to complete the survey. There are a number of refusal conversions or strategies.

- a. Ask the screener questions. It may be that the respondent is not even eligible to complete the survey. If it turns out that they are eligible, give conversion another shot; you got them to stay on the phone for three questions and even more.
- b. Don’t talk too fast. Avoid talking too fast. You will appear more confident and legitimate if you are able to clearly explain the purpose of the survey to the potential respondent.

- c. Emphasize the duration. Stress that the survey will only take a few minutes of their time and that you will go as quickly as possible.
- d. Stress that the survey is important. Use strong language. For example, “This is a very important survey designed to directly impact the quality of parental involvement in children’s education in Ghana, and it should only take about 30 minutes to complete. Is now a good time for you?”
- e. Offer to call back. It may very well happen that you have just reached the potential respondent at a bad time. Make it clear that it is so important that you get their opinions that you would be happy to call back whenever is best for them.
- f. Call back hang-ups. The worst-case scenario has already happened - somebody refused the survey. Calling back makes it possible to give them more information about the survey that they might not have understood and they will then complete an interview.
- g. Don’t let a refusal (or two!) get you down. It happens to the best interviewers. Some people just do not do surveys, and it may be beyond your control. You should talk to your team leader about how you could have handled the situation differently. The most important thing is that you are putting your best effort into converting refusals.

3.2.5 Converting refusals into completions

Interviewers are expected to use non-coercive persuasion techniques and practice counter replies to common statements of reluctance. Tailor your initial interactions with respondents by

- a. Learning the classes of concerns (“themes”) that respondents might have.
- b. Classifying the respondent’s wording into the appropriate theme and
- c. Addressing the concern, using their own words.

Following is a sample of common concerns or themes from respondents and the specific language you can use to help them understand the importance and value of completing the survey.

- a. Hangs up before hearing the reason for the survey. Call back!
 - o “I’m calling in regard to a very important study we’re doing that will have a direct impact on the quality of parental involvement in children’s education. I

was wondering if this would be a good time to go through the survey with you. It only takes about 30 minutes." Or

- "I'm sorry, I realize I've called at a bad time, but we are conducting a very important study that will have a direct impact on the quality of parental support and involvement that parents provide young children to learn at school and at home and I'd like to have a chance to get your opinions. When would be the best time to call you back?" (Be sure to use assertive language such as, "When can I call you back?" instead of "Can I call you back?").

b. Hangs up after hearing the reason for the survey. Call back! Assume it was accidental. Say:

- "I think we got disconnected. I was in the middle of explaining this very important study we're conducting about how to improve the quality of parental involvement and support for young children (including your child) to learn. The survey only takes about 30 minutes - is now a good time?"
- "I want to make sure you understand that this is a very important study that will have a direct impact on improving the quality of parental involvement and support for young children. It's very important that we get your opinions, and if now is not a good time, I'd be happy to call you back whenever is most convenient for you."
- "I realize I may have called at a bad time, but I was hoping to speak to the person in your household who is responsible for making decisions about your child's education and what your child does after school. When might be the best time to call back for him or her?"

c. I'm not interested. Say: "The results of this survey will have a direct impact on the quality of parental involvement and support for young children in kindergarten schools in Ghana. This is your best chance to make sure your opinions are taken into consideration. It only takes about 30 minutes and if this is a bad time I'd be happy to call back whenever is most convenient for you."

d. I don't have time for this. Say: "The survey only takes about 30 minutes and I can assure you that your responses will have a direct impact on the quality of parental involvement and support for young children and your perception about early

childhood education in Ghana. If now is not a good time, when would be the best time to call you back?"

- e. I don't like answering questions over the phone. Say: "I understand your concern, but we're actually just looking for general opinions. Why don't I try reading you a few questions and we'll see how it goes? Of course, if there are any questions you don't want to answer, just let me know."

4 THE CAREGIVER SURVEY INSTRUMENT

4.1 Overview of the Caregiver Survey

The Caregiver Survey is targeting 3600 caregivers who have kids in the 240 sampled schools. This survey will be conducted over the telephone using a mobile phone to interview and a tab to record responses. The survey will be conducted from a central location. This survey is aimed at collecting data on key variables about the primary caregiver of the kindergarten child. The Caregiver Survey should only be administered to the primary caregiver of the selected kindergarten children. The Caregiver Survey collects general information about the background of the caregiver; household living conditions; food availability and sufficiency; parental involvement with child's education; parental perception about early childhood development; school fees payment; and the mobility and tracking updates on children/caregivers.

4.2 Questionnaire Format and Convention

Some basic features of the Caregiver Survey are:

- a. Cover page: The cover page contains information on the interviewer, school, caregiver and KG child(ren) for the particular caregiver. Information on the KG child, school and caregiver will be prefilled.
- b. Modules: The survey has several modules. The modules are not meant to be asked or spoken aloud during the interview. However, the surveyor must introduce each section to the respondent.
- c. Questions: Each question comes with a question number. The responses are either text, requires specific values (such as dates, percentages, etc.), or are completed by checking one of the possible response options.

- d. Instructions for the interviewer: Instruction for interviewer is in CAPITAL letters or bolder. Interviewer instructions should NOT be read to the respondent. Texts written in lowercase (small) letters SHOULD be read directly to the respondent.
- e. Skip patterns: A skip pattern is when certain questions are not asked because they are not relevant to that respondent, based on a previous response. A skip pattern may be directed to a question, multiple questions, and the rest of a section or a whole section. Skip instructions are automated in SurveyCTO but are usually shown in the far-right column in the paper version. When using the paper version, carefully observe the skip patterns.
- f. Numeric/quantity questions: The nature of responses to questions requiring numeric responses depends on the number of digit number. Depending on the number of response(s) required for the numeric questions, SurveyCTO allows for the maximum number of digits permissible. For example, the question “How many days per week does [child name] attend school in an average week? You cannot enter more than two digits for this question. For numerical responses requiring digits with leading zeros, the program automatically ignores such leading zeros except for phone numbers.
- g. One response: Some questions require a single response to a question. Tick the box corresponding to the appropriate answer and continues to the next question if there are no skip patterns.
- h. Multiple responses: Multiple responses are those questions that require the selection of more than one response option. They often come with the instruction mark all that apply.
- i. Likert-type questions: Likert-type questions require that the surveyor record the responses to two or more similar questions at the same time. The response options to all the questions/statement are the same.

4.3 Interviewer Instructions for the Caregiver Survey

The following instructions should be adhered to when administering the Caregiver Survey.

4.3.1 Section A: Identification

Apart from the prefilled information on the school, KG child(ren) and caregivers, the interviewer must complete all other required information in the identification section.

4.3.2 Section C: Background characteristics

This section collects background information of the caregiver. C01 and C02 are screening questions. C01 asks whether the respondent is the primary caregiver for the child. If the respondent responded in the affirmative, option '1' is selected and the interviewer continues with the rest of the survey. Note that the primary caregiver is the target respondent for the caregiver survey. This means s/he is the only respondent the caregiver survey MUST be administered to.

C03 asks about how the primary caregiver is related to the head of the household.

- a. Biological father/mother: A male/female who has sired/procreated (biological father) or conceived/given birth (biological mother) rather than adopted the child and whose genes are therefore transmitted to the child.
- b. Adoptive father/mother: The male/female who has taken the child into his/her own family by legal process to raise as his/her own child.
- c. Stepfather/mother: The male/female other than the child's father/mother who is married to THE CHILD'S mother/father.
- d. Grandfather/mother: The male/female parent of the child's biological or adoptive mother or father.
- e. Foster father/mother: The male/female with whom the child is placed temporarily, usually through a social service agency and/or a court.
- f. Aunt: The sister of the child's biological or adoptive mother or father or the wife of the child's uncle.
- g. Uncle: The brother of the child's biological or adoptive mother or father or the husband of the child's aunt.
- h. Cousin: A child of the focal child's uncle, aunt, or cousin.
- i. Sister: The biological (full, half), adoptive, step, and foster sister of the child.
- j. Brother: The biological (full, half), adoptive, step, and foster brother of the child.
- k. Other relative: Refers to relationships [of the child] that aren't specifically listed, such as a great grandmother, niece, or nephew.

- I. Non-relative: Refers to the relationship between two people when there is no family relationship through blood, marriage, adoption, or partnership (i.e., living together as married).

C04 asks for the number of years and months that the respondent has been the caregiver of the child. The number of months should be less than 12 months.

C05 asks about the age of the caregiver. Age should be in completed years; the age as of the child's most recent birthday.

4.3.3 Section D. Poverty Status Module

The purpose of this section is to provide information on ownership of certain items, which are used as an approximate measure of the socio-economic status of the household. In asking these questions, you have to remain neutral and not to show any reactions to any of the answers given.

D01. How many members does the household have including yourself? This question asks about the number of people who are members of the household. Do not prompt. A household is defined as a person or group of persons:

- a. who are related or unrelated;
- b. who live together in the same dwelling unit;
- c. who acknowledge one adult male or female as the head of household;
- d. who share the same living arrangements; and
- e. who are considered as one unit.

The following examples are, therefore, given as guidelines:

- a. In general, a household consists of a man, his wife, his children, and some other relatives or a house-help who may be living with them.
- b. Treat as one household the case in which a man lives with more than one wife and their children in the same residence and eats successively with each wife in turns.
- c. If a man does not live in the same residence as his wife or wives, then the man and his wife/wives must be considered as separate households. Any children and others must be included in the household in whose residence they sleep. Thus, if a man and his wife live in different residences.

D02. Are all household members ages 5 to 17 currently in school? This question refers to full-time education in an educational institution such as nursery, kindergarten, primary, middle, JSS, vocational, commercial, technical, agricultural, SHS, teacher-training college, university, or similar types of schools where a person spends or has spent at least four hours a day receiving general education in which the emphasis is not on vocational skills nor trade/apprenticeship training. It excludes night schools, trade schools such as catering schools, motor-driving schools, adult literacy schools, etc. It also excludes on-the-job training establishments like commercial-bank training school and Labor College.”

D03: Can the male head/spouse read a phrase/sentence in English? This question asks about the literacy status of the male head/spouse in the household. Ask the respondent whether the male head can read English. The male head/spouse is defined as:

- a. The household head, if the head is male. The household head is the person acknowledged as such by members of the household. The person who assumes responsibility for decision-making (i.e., the authority figure) in the household. The person could be male or female. There should only be one head of the household. In the absence of the head of the household, another person can assume decision-making responsibility (the acting head of household);
- b. The spouse/partner/companion of the household head, if the head is female;
- c. Non-existent, if the head is female and if she does not have a spouse/partner/companion who is also a member of the household.

D04: What is the main construction material used for the outer wall of your house/dwelling? This question asks about the predominant material that the outer walls of the dwelling are composed of. If there is more than one kind of material making up the outer walls, record the main wall material (the material that covers the largest amount of wall space).

D05. What type of toilet facility is usually used by the household? This question asks about the particular toilet facility being used by the household: Note that this question is not asking about the type of toilet facility the household possess but rather the type they mostly use.

- a. No toilet facility refers to when there is no toilet facility of any kind for the use of the household. It includes the free-range method of excreta wrapped and thrown with garbage, the ‘cat’ method of burying excreta in dirt, defecation in the bush, field, or

ditch, and defecation into surface water (drainage channel, beach, river, stream, or sea).

- b. A pit latrine uses a hole in the ground for excreta collection and may have a squatting slab, platform, or seat that is firmly supported on all sides, easy to clean and raised above the surrounding ground level to prevent surface water from entering the pit.
- c. Bucket/pan refers to the use of a bucket or other container for the retention of faeces (and sometimes urine and anal cleaning material), which is periodically removed for treatment or disposal.
- d. A private toilet is one that is used exclusively by the interviewed household and is not shared with members of any other households. In contrast, a public toilet is one that is shared by the household with members of other households and/or for a fee.
- e. KVIP stands for Kumasi Ventilated Improved Pit. A KVIP is a pit latrine with a ventilation system through a pipe extending above the latrine roof. The open end of the vent pipe is covered with gauze mesh or fly-proof netting and the inside of the superstructure is kept dark
- f. A water closet (WC) is a flush toilet uses a cistern or holding tank for flushing water and has a water seal, which is a U-shaped pipe, below the seat or squatting pan that prevents the passage of flies and odors.

D06. What is the main fuel used by the household for cooking? This question asks about the main fuel used by the household for cooking and not fuel for heating or lighting. If the household uses more than one fuel for cooking, find out which type of fuel is used most often. Tick the box corresponding to the appropriate answer.

D07. Does any household member own a working box iron or electric iron? This question asks about the sole ownership of a working box iron or electric iron by the primary respondent's household. An electric iron that is not currently in use due to a lack of electricity may still be counted as working if the respondent answers the scorecard question in the affirmative. Working box irons or electric irons that are used partly or exclusively in a business run by the household are to be counted. However, a working box irons or electric irons that are jointly owned by members of more than one household are NOT to be counted as owned by the household being interviewed. Tick the box corresponding to the appropriate answer.

D08. Does any household member own a working television, video player, VCD/DVD/MP3/MP4 player/iPod, or satellite dish? This question asks about whether any household member owns a working television, video player, VCD/DVD/MP3/MP4 player/iPod, or satellite dish. For any of these items to be counted, it should be working. Working televisions, video players, VCD/DVD/MP3/MP4 player/iPods, or satellite dishes that are used partly or exclusively in a business run by the household are to be counted. However, working televisions, video players, VCD/DVD/MP3/MP4 player/iPods, or satellite dishes that are jointly owned by members of more than one household are not to be counted as owned by the household being interviewed. Tick the box corresponding to the appropriate answer.

D09. How many working mobile phones are owned by members of the household? This question asks about the number of working mobile phones owned by members of the household. A mobile phone that is not currently in use due to a lack of battery power, subscription or units may still be counted as working. Working mobile phones that are used partly or exclusively in a business run by the household are to be counted. However, working mobile phones that are jointly owned by members of more than one household are NOT to be counted as owned by the household being interviewed. Tick the box corresponding to the appropriate answer.

D10. Does any household member own a working bicycle, motorcycle, or car? This question asks about whether any household member owns a working bicycle, motorcycle or car. A motorcycle or car that is NOT currently in use due to a lack of fuel may still be counted. Working bicycles, motorcycles, or cars that are used partly or exclusively in a business run by the household are to be counted. However, working bicycles, motorcycles, or cars that are jointly owned by members of more than one household are NOT to be counted as owned by the household being interviewed. Tick the box corresponding to the appropriate answer.

D11 – D13. These questions ask the primary caregiver to give his/her wage/salary and total household income in a normal workday. The interviewer should begin by reading the introductory text. The interviewer should say: “Now I am going to ask you about your personal income and the total household income. Income is important in analyzing how parents support their children with the necessary facilities and materials to learn both at school and at home. For example, this information helps us to learn whether households in

one income group provide different types of educational support or services to aid their children to learn than do others.”

D11. How much income do you earn from wages and/or salaries in a normal workday? This question asks about the income the primary caregiver earn from wages or salaries in a normal workday. Do not prompt. If the caregiver provides the monthly income or wage, find out how many days he/she works in the month and divide the monthly income or wage by that number. For most people working in a formal setting, the total monthly salary should be divided by 21 days.

D12. Now I am going to ask you about the total household income for all the persons in your household. Please remember that by (“total household income”), I mean your income plus the income of all the other household members 18+ for a normal month. Can you tell me, on the average, the total income for your household from all sources such as wages, salaries, sales of products, Social Security or retirement benefits, and help from relatives? Do not prompt the caregiver on this question. If the primary caregiver does not know, enter **-888** and ask him/her D13, which provides prompts.

4.3.4 Section E: Food Security (Household Hunger Scale)

E01: In the past 4 weeks (30 days), was there ever no food to eat of any kind in your house because of a lack of resources to get food? This question asks about a situation in which there is no food of any kind to eat in the house because was not available to household members through usual means (e.g., through purchase or barter, gifts, from the garden or field, from storage structures). If the respondent’s response is “YES”, ticks 1 and continues to E02. Otherwise, skip to E03.

- a. The word “food” means all foods, i.e., anything that is edible, not just the staple starch. Staple starch includes food such as cassava, plantain, millet, sorghum, yam, maize, beans, bread, rice, maize, etc.
- b. No food to eat of any kind means that the food was not available in the household and could not be accessed by the household’s usual means (e.g., through purchase, from the garden or field, from storage, gifts).
- c. The house refers to the physical structure (dwellings) where the household or people resides (i.e., the house itself and any storage structures). A dwelling includes all types

of structures and may consist of a room inside a house, a group of houses, a multi-storied house, or a hut or group of huts.

- d. Lack of resources refers to the lack of money to buy food or the inability to produce or barter for food.

E02: How often did this happen in the past 4 weeks (30 days)? This question asks about how often a reported condition occurred during the previous 4 weeks or 30 days in the household. Read out the options and tick the box corresponding to the appropriate answer.

E03: In the past 4 weeks (30 days), did you or any household member go to sleep at night hungry because there was not enough food? This question asks whether the respondent or other household members felt hungry at bedtime because they did not have enough food to eat during the day and evening. If the respondent's response is "YES", ticks 1 and continues to E04. Otherwise, skip to E05. To be "hungry" is to have a compelling need or desire for food, to have a painful sensation, or to be in a state of weakness caused by the need for food. A hungry person is not necessarily one who has not eaten at all; food eaten may not have been enough to fill the belly.

E04: How often did this happen in the past 4 weeks/30 days]? This question asks about how often a reported condition occurred during the previous 4 weeks or 30 days in the household. Read out the options and tick the box corresponding to the appropriate answer.

E05: In the past 4 weeks (30 days), did you or any household member go a whole day and night without eating anything at all because there was not enough food? This question asks whether any household member did not eat from the time they awoke in the morning to the time they awoke the following morning because there was not enough food. A person who chooses not to eat for a whole day for reasons other than lack of food (for example, if fasting or on a diet) should NOT respond "Yes" to this question. If the respondent's response is "YES", ticks 1 and continues to E06. Otherwise, skip to E07.

E06: How often did this happen in the past 4 weeks (30 days)? This question asks about how often a reported condition occurred during the previous 4 weeks or 30 days in the household. Read out the options and tick the box corresponding to the appropriate answer.

4.3.5 Section F. Parental Involvement with Children's Education Module

The questions in this section are used to obtain information about the extent to which households provide a supportive and stimulating learning environment to facilitate the learning of children. The module also includes a mix of questions to obtain information on various aspects of development (physical, social, emotional, language, and cognitive development).

FO1. In the past 3 days, did you or any household member over 15 years of age engage in any of the following activities with (name):

- a. read books or looked at picture books with (name)?
- b. told stories to (name)?
- c. sang songs to (name) or with (name), including lullabies?
- d. took (name) outside the home, compound, yard or enclosure? For example, to the market, to events, visit relatives? This question asks whether the child is taken out by either the mother, father or any other adult member of the household. Note that by "events" we don't mean places the child is taken to on a regular basis (e.g. church services, schools etc.). However, if the child attends church events like a musical concert or special events in the church, they are considered.
- e. played with (name)?
- f. named, counted, or drew things to or with (name)?

Read each item shown above. If 'No', select no and move to the next item on the list. If 'Yes', ask: "who engaged in this activity with (name)". For each activity, circle the code for every person who engaged in the activity with the child before proceeding to the next item. If someone other than the biological mother or father engaged in the activity with the child, select either another adult relative or other non-relative. This applies if the respondent is the primary caretaker of the child or a foster parent and has engaged in any of these activities.

FO2. How many children's books or picture books do you have for (name)? This question asks specifically about children's books or picture books for the child. This includes e-books for children but excludes schoolbooks, as well as other books for adults that are present in the household.

FO5. I am interested in learning about the things that (name) plays with when he/she is at home. Does he/she play with:

- a. homemade toys (such as dolls, cars, or other toys made at home)?
- b. toys from a shop or manufactured toys?
- c. household objects (such as bowls or pots) or objects found outside (such as sticks, rocks, animal shells or leaves)?
- d. Objects found outside (such as sticks, rocks, animal shells or leaves)?
- e. Any puzzles (even a two-piece puzzle counts)?

This question is used to learn about different types of playthings used by the child. We want to know if the child has objects to play with, and what these are, even if they do not include store-bought toys. We are interested in learning about other objects that are used as playthings, such as ordinary household objects and natural materials.

Extra care should be taken to ask this question and record the responses. Experience has shown that respondents find it very easy to give the same answer to a list of different playthings. Often, they will answer 'Yes' to all items, whether or not it is true, perhaps because they think this is the 'correct' response or one that will please the interviewer. Do not pause after reading the first part of the question and continue by saying "DOES HE/SHE PLAY WITH" and start asking whether the child plays with playthings from each of the categories listed. Ask: "DOES HE/SHE PLAY WITH HOMEMADE TOYS (SUCH AS DOLLS, CARS, OR OTHER TOYS MADE AT HOME)?" and so on.

If the respondent answers 'Yes' to any of these prompted categories, then probe to learn specifically what the child plays with to ascertain the response. For example, probe by saying "What does he/she specifically play with?" or "Can you please give an example?" If you ascertain that the child uses playthings that would fall into each of the prompted categories, circle '1'. Read each category aloud and circle the code corresponding to the response before proceeding to the next category.

4.3.6 Section I. Child Discipline Module

The purpose of this module is to obtain information on the disciplinary methods used with children age 3 - 12 years by adults living in the same household. The module aims to elicit a range of disciplinary practices, from non-violent approaches to psychological aggression to

moderate and severe forms of physical punishment. The questions included are specially designed to measure some common ways in which parents discipline their children. These questions are not intended to cover ALL practices that parents use to discipline children but do cover some of the more common methods. It is important that you ask each question in a neutral way – do not let your voice reflect approval or disapproval of the various discipline methods mentioned.

11. Adults use certain ways to teach children the right behavior or to address a behavior problem. I will read various methods that are used. Please tell me if you or anyone else in your household has used this method with (name) in the past month.

First, start with the introductory sentence and then ask the questions [A] to [K]. It is important to mention that we are interested in knowing only about what may have occurred during the past month – the one month preceding the survey and only in relation to this child. When asking the questions, remind the respondent, from time to time, that you are asking about the last one month, and that you are interested if she/he or anyone else in the household has used this method with the child.

All methods can be used alone or in combination with other disciplinary measures. It is important to remember that we are trying to capture disciplinary methods used by all adult household members, not just the respondent. If the selected child was away from the household/household members during the past month, then you will need to select not applicable in all sub-questions from [A] to [K].

- A. Took away privileges, forbade something (name) liked or did not allow him/her to leave the house. ‘Privileges’ means a right or a benefit that is not available to everyone or not granted on a regular basis. If you must explain what this question means, first try by asking each prompting question separately. If you need to give examples, try to phrase these questions appropriately for the child’s age. “Did you (or someone else in the household) forbid (name) from leaving the house or from going outside for a time? Did you (or someone else in the household) prohibit (name) from doing something he/she usually does, such as playing with friends or watching TV?” For a young child, you might include such things as ‘forbidding him/her to have sweets’, etc.
- B. Explained why (name)’s behavior was wrong. When a child does something wrong, some parents/caretakers try to teach the child not to repeat the behavior by

explaining why they consider the behavior to be inappropriate. For example, a young child playing with matches may be told not to do so, because he or she could accidentally start a fire.

- C. Shook him/her. Some parents/caretakers may shake (pick the child up or take him/her by the shoulders or other part of the body) and shake the child back and forth more than once. This is a method some parents may use to punish a child for bad behavior, particularly with young children.
- D. Shouted, yelled at or screamed at him/her. Parents/caretakers may raise their voice when children do something they consider wrong or speak to them in a firm manner. This type of behaviors can be common among parents/caregivers and may not always qualify as abusive. This question is not intended to capture mild forms of verbal discipline but rather to capture a parent expressing anger or disapproval towards a child in a harsh manner.
- E. Gave him/her something else to do. This question is designed to capture another non-violent discipline technique, i.e. diverting the child's attention from the incorrect behavior. A parent/caretaker may try to distract the child from doing the unsuitable behavior by giving the child something else to do in its place. If the respondent does not understand, you may add a probe: "This means redirecting the child's attention towards something else."
- F. Spanked, hit or slapped him/her on the bottom with bare hand. Spanking a child on the bottom with a bare hand is a form of physical punishment used by some parents/caretakers.
- G. Hit him/her on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object. Hitting a child with a hard object is a more severe form of physical punishment used by some parents/caretakers. It is considered more severe than spanking because more force can be exerted on a hard object than a bare hand. Remember, you are asking if the method of punishment was used with this child during the last one month.
- H. Called him/her dumb, lazy, or another name like that. Some parents/caretakers may react to a child's perceived misbehaviors by using offensive or derogatory language.

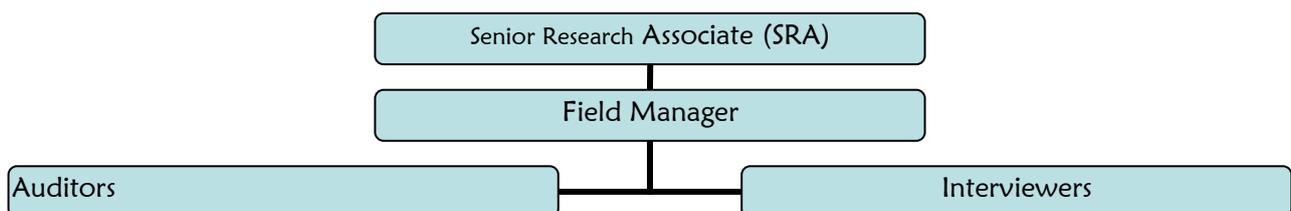
- I. Hit or slapped him/her on the face, head or ears. This asks if anyone in the household slapped the child on the head or in the face, or on one or both ears. As before, slapping or hitting refers to an action carried out with a bare hand. (All questions using these terms refer to use of a bare hand, unless another object is explicitly mentioned.)
 - J. Hit or slapped him/her on the hand, arm, or leg. This question is different from the previous question [I] because it asks whether the child was slapped or hit with a bare hand on the extremities – hand(s), arm(s) or leg(s).
 - K. Beat him/her up, that is hit him/her over and over as hard as one could. This item covers the harshest form of physical punishment.
12. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished? This question is designed to capture attitudes toward physical punishment and should be asked last, after asking about the child’s experience of the different disciplinary methods. The question asks the respondent for her/his own opinion of whether it is necessary to use physical punishment when teaching a child to behave properly. Do not be surprised if a respondent who has indicated that the child has experienced physical punishment says that she/he does not believe in such punishment. The respondent may not be the one who used that form of punishment with the child as she/he is reporting about methods used by any adult household member.

5 CONDUCTING THE PHONE INTERVIEW

5.1 Team Size and Composition

The success of the Caregiver Survey depends on many different people. The Caregiver Survey comprises 12 surveyors and 3 auditors. The selection of interviewers will be based on performance during the training. Figure 1 shows the structure of the survey team.

Figure 1. Structure of the Survey Team



5.2 Responsibilities of Team Members

The Interviewer is responsible mainly for administering the Caregiver Survey according to IPA data collection protocols. Specifically, s/he will:

- a. Make telephone contact with the caregivers on the IAS as assigned by the Field Manager and determine their eligibility for the caregiver interview;
- b. Attempt to find the correct telephone number of a caregiver if the number provided on the assignment sheet is wrong
- c. Maintain a clear and complete record of all contact attempts
- d. Conduct the caregiver interview with the caregiver or a proxy using the Caregiver Survey form on SurveyCTO and collect information about the proxy if one is used;
- e. Ensures that surveys are administered in an ethical, honest, and rigorous manner;
- f. Adheres to all other IPA survey protocols;
- g. Maintains confidentiality of data gathered;
- h. Performs other duties that may be assigned to him/her.

The Primary Auditor is required to:

- a. Audit at least 10% of the caregiver surveys conducted by the Phone Interviewers and as assigned by the SRA;
- b. Validate missing or loss sample claims by the Phone Interviewers.
- c. Ensures that surveys are administered in an ethical, honest, and rigorous manner;
- d. Adheres to all other IPA survey protocols;
- e. Maintains confidentiality of data gathered;
- f. Performs other duties that may be assigned to him/her.

The Secondary Auditor is required to:

- a. Send top-ups to primary caregivers who have completed the caregiver survey.
- b. Keep accurate records of all survey outcomes in an Excel tracking system.
- c. Maintains confidentiality of data gathered;
- d. Performs other duties that may be assigned to him/her.

5.3 Expectations from Survey Field Team Members

- The duration of the Caregiver Survey is six (6) working weeks i.e., 30 working days.
- You are expected to complete 10 phone interviews a day and 50 per week.
- The primary auditor will audit between 10% and 20% of the completed surveys.

5.4 Call Records Management

The management of the call records is the responsibility of the interviewer and the Field Manager. Each interviewer must manage the call records assigned to him/her. The Field Manager must manage the call records for all interviewers. The following presents a five-step process for using call records.

- a. Field Manager distributes a stack of IAS and corresponding call records to each interviewer, and interviewers call the number on the first call sheet.
- b. Interviewer records the outcome of the call: the date and time the number was tried, the disposition of the call (e.g., no answer, call back, completion, etc.), their interviewer ID, and any notes that might be helpful for the next caller.
- c. If a telephone number must be withdrawn from the sampling pool, the interviewer removes this call sheet from the stack of active numbers. Reasons a telephone number will need to be withdrawn:
 - a. Completion: Respondent completes an interview.
 - b. Refusal: Respondent refuses to complete an interview.
 - c. Ineligible: Respondent is not eligible for the survey.
 - d. Non-working number: Disconnected, wrong number, business number, etc.
- d. Field Manager manages live numbers on the call records and sorts them for the next interviewing rounds. At the end of the day, the Field Manager collects call records with live numbers and makes an appropriate determination on the next line of action. Live numbers are telephone numbers (i.e., those that have not yielded a terminating disposition, including completions, refusals, ineligible respondents, and unusable phone numbers). During the day, the Field Manager distributes call records for active numbers to interviewers, so that numbers are called back at the appropriate time. Live numbers are either an active number or called active numbers.

- a. Called active numbers are those that an attempt has been made to complete the interview, e.g., completions and refusals.
- b. Active numbers are those that require further attempts at reaching the caregiver. The Field Manager identifies active numbers from the call records so that numbers are called back at the appropriate time. Active numbers are those that require further calls to complete the interview. Make sure the right callbacks get to the right interviewer at the right time. Order of priority for callbacks:
 - Callbacks to complete: Respondent has expressed intent to complete an interview, and has given the interviewer a specific time to call them back to conduct the interview.
 - Scheduled callback: Respondent has given a better time to call back, but without expressing intent to complete the interview.
 - Callback: Active numbers will be re-tried after a pre-determined period of time. For example, if a number is tried and there is no answer or the line is busy, an interviewer should try the number in two hours, or (if there are less than two hours remaining for the day) at the beginning of the next day.
- e. Field Manager identifies non-active or “dead” sample and put them aside. The Field Manager also needs to keep track of any telephone number that has ended in a nonworking disposition.

5.5 Data Quality Control Systems

Data quality control systems involve the roles of the survey management and field team in minimizing errors in the fieldwork. Data quality for the Caregiver Survey depends greatly on strict adherence to the correct field protocols or procedures. Interviewers are expected to pay careful attention to correct data entry. Quality assurance during the Caregiver Survey will focus on:

- a. Initial data editing: The Interviewer is expected to edit the survey during and after the calls with each subject. Editing the survey involves checking the entries for logical inconsistencies, contradictions, or wrong entries. The Interviewer should thoroughly

check every form to make sure that the right responses have been entered and responses to open-ended questions are entered correctly in full sentences and not in abbreviations. This is necessary because even a small error can create much bigger problems after the data has been sent to the server and tabulations have been run. The Auditors and the FM will check the entries, especially the unique IDs, before sending the data to the server.

- b. High-Frequency Checks (HFCs): HFCs will be run every day using STATA commands. The RA shall be responsible for the HFCs. Issues from the HFCs will be communicated to the Interviewers as and when they are detected.
- c. Back Checking: During the Caregiver Survey, a minimum of 20% of the surveys will be backchecked. Two backcheck caregiver questionnaires will be designed and used. Each Interviewer's work will be backchecked. The auditing will be done by two auditors. The kind of action that will be taken if there are discrepancies will depend on the type of error or discrepancy. Errors will be classified as either consequential or inconsequential.
 - a. Consequential errors are errors that could potentially affect the quality of the estimates or data quality. They include errors associated with skip patterns, falsification of results/records, failure to interview a primary respondent or reporting that a respondent is missing to avoid interviewing such respondent. Action will be taken on a case by case basis.
 - b. Inconsequential errors are those that do not affect the survey estimates. They include typing errors that can be readily corrected. The surveyor's attention will be drawn to the errors.

5.6 Logistics for Phone Survey

Every surveyor must be resourced with survey supplies and materials (Table 2). You are responsible for all items that IPA provides you for the survey.

Table 2. Survey Supplies and Materials

Item	Number Required
Tablet, charger, and headpiece	2 per interviewer
Caregiver Survey manual	1 per interviewer
Interviewer Tracking Sheet	About 10 per interviewer
Caregiver Survey	1 per interviewer
Call Record and Screener	250 per interviewer
Proxy Identification Form	Available upon request