

EARLY CHILDHOOD EDUCATION AND DEVELOPMENT PROJECT (ENDLINE SURVEY)

CONFIDENTIAL

Child Questionnaire

Section: ID, IK, Child Growth Test

VILLAGE ID
RESPONDENT ID

Respondent for this questionnaire is: (1) the main caregiver (person who most often spending time with) of the child and (2) 1 year old panel child

COV0 Name of Child	<input type="text"/>
COV00 Child ART No.	<input type="text"/>
COV000 Child Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/> (Date/Month/Year)

ENUMERATOR, EDITOR DAN SUPERVISOR

	a. Enumerator	b. Editor	c. Supervisor
COV1 Name and Code of fieldworker	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>

VISIT RESULT

	a. First Visit	b. Second Visit	c. Third Visit
COV2 Date	<input type="text"/> / <input type="text"/> / 2013	<input type="text"/> / <input type="text"/> / 2013	<input type="text"/> / <input type="text"/> / 2013
COV3 Start/Finish	<input type="text"/> : <input type="text"/> / <input type="text"/> : <input type="text"/>	<input type="text"/> : <input type="text"/> / <input type="text"/> : <input type="text"/>	<input type="text"/> : <input type="text"/> / <input type="text"/> : <input type="text"/>
COV4 Visit Result	1. Finished 2. Partially finished, <input type="text"/>	1. Finished 2. Partially finished, <input type="text"/>	1. Finished 2. Partially finished, <input type="text"/>

CHECKING RESULT

COV5 Supervision by Supervisor	COV6 Checking by Supervisor	COV7 Checking by Editor
a. Observed 1. Yes 3. No b. Verified 1. Yes 3. No	1. Checked, no mistakes 2. Checked and corrected 3. Not checked, <input type="text"/>	1. Data entered, no mistake 2. Data entered and corrected 3. Data entered, no correction, <input type="text"/> 4. Data not entered and manually edited, <input type="text"/> 5. Data not entered and not edited, <input type="text"/>

ID. CAREGIVER'S IDENTITY

ID1	Name of Child Caregiver	<hr/>			
ID2	INTERVIEWER CHECKS : IS THE CAREGIVER INCLUDED AS A MEMBER OF THIS HOUSEHOLD (MHH)	1. YES 3. NO → QUESTION ID4			
ID3	ART SEQUENCE NO.	<input type="text"/> <input type="text"/> <input type="text"/> → QUESTION ID7			
ID4	Sex	1. Male 3. Female			
ID5	Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (date/month/year)			
ID6	Last level of education	1. Did not/never go to school 5. Senior High school/eqv 2. Did not finish elementary school 6. Diploma 1/2/3 3. Elementary school/eqv 7. Diploma 4/Bachelor 4. Junior High school/eqv 8. Master's/PhD			
ID6a	Highest level of education	1. 1 6. 6 11. 11 16. 16 (PhD) 2. 2 7. 7 12. 12 96. NOT APPLICABLE 3. 3 8. 8 13. 13 (Diploma 1/2/3) 98. DONT KNOW 4. 4 9. 9 14. 14 (Bachelor) 5. 5 10. 10 15. 15 (Master)			
ID7	Relationship of caregiver to child	1. Mother 5. Uncle 9. Neighbor 2. Father 6. Aunt 10. Other relatives 3. Grandmother 7. Older Sibling 4. Grandfather 8. Maid			

CHILD GROWTH TEST

INTERVIEWER'S DIRECTION

HOW TO START THE TEST

BASICALLY THE EVALUATION OF CHILD'S SKILL IN DOING THE TEST HAS TO BE OBSERVED DIRECTLY BY THE INTERVIEWER, BUT IF THE CHILD DOES NOT WANT TO DO THE TEST, THEN THE EVALUATION CAN BE CONDUCTED BASED ON INFORMATION FROM THE CAREGIVER

EACH SKILL TO BE TESTED HAS BEEN GROUPED ACCORDING TO THE ASPECT TO BE OBSERVED AND ACCORDING TO THE CHILD'S AGE GROUP AND THE SEQUENCE HAS REFLECTED THE STAGES OF CHILD'S GROWTH. THEREFORE, FOR EACH ASPECT TO BE OBSERVED START WITH RECORDING THE RESULT OF SKILL TEST NUMBER ONE (1) FOR EACH AGE GROUP ACCORDING TO THE CHILD'S AGE

IF DURING THE TEST THE CHILD ACCIDENTALLY SHOWED THAT HE/SHE COULD PERFORM HIGHER/MORE ADVANCED SKILL, THEN GIVE SCORES TO THE CHILD FOR EARLIER TEST/QUESTIONS, AS IT IS ASSUMED THAT THE CHILD WOULD BE ABLE TO DO THE SAID SKILL. FOR EXAMPLE, A ONE YEAR OLD CHILD COULD WALK BY HIM/HERSELF, THEN AUTOMATICALLY THE CHILD IS CONSIDERED TO BE CAPABLE IN DOING TESTS PRECEEDING WALKING

WHEN TEST SHOULD BE ENDED

IF THE CHILD IS UNABLE/DID THE SKILL WRONGLY, FOLLOW THE QUESTION FLOW (SKIP PATTERN) IN THE QUESTIONNAIRE TO FINISH THE SKILL TEST FOR EACH ASPECT.

HOW TO RECORD TEST RESULT

FIRST RECORD THE INFORMATION SOURCE, SO IN THE "SOURCE" COLUMN CIRCLE "1. OBSERVATION" IF THE TEST RESULT IS OBTAINED THROUGH SKILL TEST AND CIRCLE "3. REPORT" IF THE TEST RESULT IS OBTAINED THROUGH REPORT OF CHILD CAREGIVER.

THEN IN THE "RESULT" COLUMN, CIRCLE

1. YES, ABLE IF THE CHILD CAN DO THE SKILL ACCORDING TO THE PROCEDURE
3. UNABLE, IF THE CHILD COULD NOT DO THE SKILL OR DID THE SKILL WRONGLY
8. DON'T KNOW, IF THE CHILD DID NOT WANT TO DO THE SKILL AND CAREGIVER IS UNABLE TO GIVE INFORMATION WHETHER THE CHILD CAN DO THE SKILL. THIS OPTION IS ONLY APPLICABLE IF THE ANSWER IN SOURCE COLUMN IS (2) REPORT
9. NOT RESPONDING, IF THE CHILD DID NOT WANT TO DO THE SKILL. THIS OPTION IS ONLY APPLICABLE IF THE ANSWER IN SOURCE COLUMN IS (1) OBSERVATION.

SOME OF THE QUESTIONS/TESTS (FOR EXAMPLE, DRAWING CIRCLE, HUMAN/PERSON, HOUSE, ETC) HAVE DIFFERENT EVALUATION CATEGORY. FOR SUCH QUESTIONS/TEST, INTERVIEWER MUST ALSO CONDUCT EVALUATION ON THE TEST RESULT AND RECORD THE RESULT IN THE "SCORE" COLOUMN.

WRITE ADDITIONAL INFORMATIONS THAT EXPLAINS THE RESULT OF SKILL TEST IN THE "NOTE" COLUMN

TEST INTRODUCTION (INTERVIEWER MUST READ THIS INTRODUCTION TO THE RESPONDENT)

"THE QUESTIONS THAT WE WILL GIVE WILL SHOW THE GROWTH STAGES OF THE CHILD IN GENERAL. SO, NOT ALL QUESTIONS/ TESTS THAT WE GIVE ARE ABLE TO BE CONDUCTED BY THE CHILD, THERE MAY BE SOME QUESTIONS/TESTS UNABLE TO BE DONE BY THE CHILD. THIS IS NORMAL, SINCE THE GROWTH LEVEL DIFFERS WITH EACH CHILD. THUS, THERE IS NO RIGHT OR WRONG ANSWER. THE MOST IMPORTANT THING IS THAT YOU GIVE HONEST ANSWERS.

IF IN THE INTERVIEW PROCESS THERE ARE QUESTIONS THAT YOU DON'T UNDERSTAND, PLEASE TELL US AND WE WILL TRY TO EXPLAIN IT AGAIN. IF YOU REALLY DON'T KNOW THE ANSWER, JUST TELL US "I DON'T KNOW". AND IF THERE ARE ANY QUESTIONS THAT YOU ARE UNWILLING TO ANSWER, PLEASE TELL US TO MOVE ON TO THE NEXT QUESTIONS. WE WOULD LIKE TO THANK YOU BEFOREHAND FOR YOUR COOPERATION."

A0a. INTERVIEWER CHECK : DATE/MONTH/YEAR OF BIRTH [CHILD'S NAME]	<div> <div> <div></div> <div></div> <div></div> </div> <div>/</div> <div> <div></div> <div></div> <div></div> </div> <div>/</div> <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> </div> <div> Date Month Year </div>
A0b. INTERVIEWER CHECK AR03 : [CHILD'S NAME] SEX	<div> <div>1.</div> <div>MALE</div> <div>3.</div> <div>FEMALE</div> </div>

MK. Physical Development Aspect (Gross Motor)

BMK1	BMK2	BMK3	BMK4	BMK5
GROSS MOTOR	PROCEDURE/TEST TOOL	SOURCE	RESULT	NOTE
1. Walking up the stairs like an adult, taking alternate steps with one foot on each step and without holding on to the rail	TOOL: Stairs, toys (anything/free) PROCEDURE: Put a toy in the middle of the stairs and ask child to walk up the stairs and fetch the toy. INDICATOR: Successful if child can walk up the stairs using both legs alternately by stepping with one foot on each step and without holding on to the rail/wall/to an adult. Do not score if the child does not use both legs alternately and stepping with one foot on each step or if he/she holds on to the rail/wall/an adult.	1. Observation 3. Report	1. Yes, able to 3. Unable 8. Don't know	
3. Jump up with one leg three times	PROCEDURE: Ask child to lift one of his foot and jump up three times on one leg INDICATOR: Successful if child can jump at least three times without holding on to anything	1. Observation 3. Report	1. Yes, able to 3. Unable 8. Don't know	

MH. Physical Development Aspect (Soft Motor)

BMH1	BMH2	BMH3	BMH4	BMH5	BMH6
SOFT MOTOR	PROCEDURE/TEST TOOL	SOURCE	RESULT	SCORE	NOTE
1. Showing tendency to use a specific hand	TOOL: Toys PROCEDURE: Put toys in front of the child, in the middle, and ask him/her to reach for the toys INDICATOR: Successful if the child reach the toys by using the same hand for at least 3 times out of 4 occassion	1. Observation 3. Report	1. Yes, able to 3. Unable 8. Don't know		

BMH1	BMH2	BMH3	BMH4	BMH5	BMH6
SOFT MOTOR	PROCEDURE/TEST TOOL	SOURCE	RESULT	SCORE	NOTE
4. Drawing a human/figure	<p>TOOL: paper, pencil</p> <p>PROCEDURE:</p> <p>Behind this questionnaire is a blank space. Give the paper and pencil/crayong to child and ask child to draw a human/figure (do not tell which body part to be drawn). Collect paper with drawings made by child</p>	1. Observation	<p>1. Yes, able to</p> <p>9. Doesn't respond</p>	<p>Total score</p> <p> </p>	Fill-in score for human/figure drawing in a table on page 16-17
5. Drawing a house	<p>TOOL: paper, pencil</p> <p>PROCEDURE:</p> <p>Behind this questionnaire is a blank space. Give the paper and pencil/crayong to child and ask child to draw a house (do not tell which part should be drawn). Collect paper with drawings made by child</p>	1. Observation	<p>1. Yes, able to</p> <p>9. Doesn't respond</p>	<p>Total score</p> <p> </p>	Fill-in score for house drawing in a table on page 18

KB. Language Skills Development Aspect

BKB1	BKB2	BKB3	BKB4	BKB5
LINGUISTIC SKILL	PROCEDURE/TEST TOOL	SOURCE	SCORE	NOTE
3. Shows his/her body parts when asked	<p>PROCEDURE:</p> <p>Mention 25 body parts listed on page 19. For example: eyes, nose, arms, legs, mouth, ears, hair, etc. Ask child to point the body part mentioned.</p> <p>INDICATOR:</p> <p>Assign score for each body part correctly recognized by child (as requested)</p>	1. Observation	<p>Total score</p> <p> </p>	Fill-in score for each body part mentioned in a table on page 19

CS. CARD SORTING GAME

INTERVIEWER INSTRUCTION :

- A. FIRST GAME IS PLAYING COLOUR USING CARD SET 1 THAT CONSISTS OF: TARGET CARD (1 BLUE CAT & 1 RED MOTORCYCLE) AND PLAYING CARDS (7 RED CAT & 7 BLUE MOTORCYCLE). SECOND GAME IS PLAYING SHAPE/PICTURE STILL USING CARD SET 1.
- B. THIRD GAME IS PLAYING COMBINATION USING CARD SET 2 THAT CONSISTS OF: TARGET CARD (1 BLUE CAT & 1 RED MOTORCYCLE) AND PLAYING CARDS (4 RED CAT, 3 BLUE MOTORCYCLE, 4 RED CAT WITH BORDER AND 3 BLUE MOTORCYCLE WITH BORDER). BORDER CARDS MEANS PLAYING COLOUR WHILE NO BORDER CARDS MEANS PLAYING SHAPE/PICTURE
- C. NUMBER OF CARDS THAT PLAYED DURING EACH COLOUR AND SHAPE GAME ARE 6 CARDS. DURING THE GAME, CARDS THAT PLAYED BY THE CHILDREN MUST PLACED CLOSED ON THE FLOOR

BCS1	BCS2	BCS3	BCS4
GAMES	PROCEDURE/TEST TOOL	RESULT	NOTE
1. Color Game	TOOLS, PROCEDURE AND INDICATOR FOR THIS TASK CAN BE SEEN IN THE MANUAL	1. a. Correct: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b. Incorrect: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
		6. NO RESPOND	
2. Shape/Picture Game		1. a. Correct: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b. Incorrect: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
		6. NO RESPOND	
INTERVIEWER'S NOTE: IF MISTAKES IN COLOR GAMES ARE MORE THAN 1 OR NO RESPOND FROM THE CHILD, THEN THE GAME SHOULD NOT BE CONTINUED.			
3. Combination of color and shape/picture		1. a. Correct: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> b. Incorrect: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
		6. NO RESPOND	

TEST CONCLUDED

SCORE FOR FIGURE/HUMAN DRAWING

PGO0	PGO1	PGO2
No.	Bagian Tubuh	Nilai
1	Head	0. No 1. Drawn
2	Neck	0. No 1. Drawn
3	Eyes	0. No 1. Drawn
4	Nose	0. No 1. Yes, incomplete/extra 2. Yes, complete
5	Mouth	0. No 1. Drawn
6	Teeth	0. No 1. Drawn
7	Ears	0. No 1. Drawn
8	Hair	0. No 1. Yes, incomplete/extra 2. Yes, complete
9	Body	0. No 1. Drawn
10	Belly button	0. No 1. Drawn
11	Arms	0. No 1. Drawn
12	Hands	0. No 1. Yes, incomplete/extra 2. Yes, complete
13	Fingers	0. No 1. Yes, incomplete/extra 2. Yes, complete

PGO0	PGO1	PGO2
No.	Bagian Tubuh	Nilai
14	Thigh	0. No 1. Drawn
15	Covered thigh	0. No 1. Drawn
16	Legs	0. No 1. Drawn
17	Toes	0. No 1. Yes, incomplete/extra 2. Yes, complete
18	Other, _____	0. No 1. Drawn
19	Other, _____	0. No 1. Drawn
20	Other, _____	0. No 1. Drawn
21	Other, _____	0. No 1. Drawn
22	Gambar bisa dikenali sebagai orang	0. No 1. Yes
23	Gambar berbentuk stick figure	0. YES 1. NO 6. NOT APPLICABLE 8. CAN'T IDENTIFIED THE PICTURE
24	Sebagian besar anggota tubuh tersambung	0. No 1. Yes
25	Ada detil tambahan di gambar	0. No 1. Yes, a little 2. Yes, many
26	Apakah gambar orang tampak tersenyum	0. No 1. Yes 8. Difficult to judge

Tally all opted option except "6" and "8"	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
---	--

SCORE FOR HOUSE DRAWING

PGR0	PGR1		PGR2
No.	House Parts	Note	Tally/Score
1	Wall	How many?	<input type="text"/>
2	Roof	How many?	<input type="text"/>
3	Window	How many?	<input type="text"/>
4	Door	How many?	<input type="text"/>
5	People on the window	How many?	<input type="text"/>
6	People in front of door	How many?	<input type="text"/>
7	Sun	How many?	<input type="text"/>
8	Cloud	How many?	<input type="text"/>

Total Score

PGR0	PGR1		PGR2
No.	House Parts	Note	Tally/Score
9	Tree/plant	How many?	<input type="text"/>
10	Other	How many?	<input type="text"/>
11	Drawing is recognizable as a house	Yes = 1 No = 0	<input type="text"/>
12	Most house section are correctly arranged	Yes = 1 No = 0	<input type="text"/>
13	Other additional drawing	Yes, many = 2 Yes, a few = 1 No = 0	<input type="text"/>
14	Does the picture depict a happy house?	Yes = 1 No = 0 Difficult to judge = 98	<input type="text"/>
15	Does the picture drawn three dimensionally?	1. Yes 3. No	<input type="text"/>

SCORE FOR MENTIONING BODY PARTS

PAT0	PAT1	PAT2
No.	Body parts mentioned	Note for scoring Correct = 1 Wrong = 0 No respond = 6
1	Head	<input type="text"/>
2	Hair	<input type="text"/>
3	Eyes	<input type="text"/>
4	Nose	<input type="text"/>
5	Mouth	<input type="text"/>
6	Teeth	<input type="text"/>
7	Cheek	<input type="text"/>

PAT0	PAT1	PAT2
No.	Body parts mentioned	Note for scoring Correct = 1 Wrong = 0 No respond = 6
8	Chin	<input type="text"/>
9	Ears	<input type="text"/>
10	Neck	<input type="text"/>
11	Shoulder	<input type="text"/>
12	Back	<input type="text"/>
13	Chest	<input type="text"/>
14	Belly	<input type="text"/>

PAT0	PAT1	PAT2
No.	Body parts mentioned	Note for scoring Correct = 1 Wrong = 0 No respond = 6
15	Waist	<input type="text"/>
16	Hands	<input type="text"/>
17	Arm	<input type="text"/>
18	Elbow	<input type="text"/>
19	Fingers	<input type="text"/>
20	Thumb	<input type="text"/>
21	Thigh	<input type="text"/>

PAT0	PAT1	PAT2
No.	Body parts mentioned	Note for scoring Correct = 1 Wrong = 0 No respond = 6
22	Leg	<input type="text"/>
23	Knee	<input type="text"/>
24	Heel	<input type="text"/>
25	Toes	<input type="text"/>

Total Score

INTERVIEWER'S NOTE

[illegible]