

IMPACT EVALUATION OF EARLY YEARS PRESCHOOL PROGRAM
END LINE EVALUATION
Household Questionnaire

Introduction

Thank you for your time. My name is _____, and I work for Data International Ltd. and we are evaluating early childhood programming. The goal of this evaluation is to improve the education that is being provided to children like yours. Your answers to the following questions will help us greatly in reaching this purpose. This interview is voluntary. You do not need to answer any questions that you do not wish to answer, and you can stop answering questions any time without penalty. All of your answers are confidential. Again, thank you for your time.

Identification:

Date of Interview	
Assessor's name	
Child ID	

PART 1: General Family Information

1. What is your child's name?	
2. What is your full name?	
3. How are you related to the child?	<input type="checkbox"/> Mother (1) <input type="checkbox"/> Father (2) <input type="checkbox"/> Grandparent (3) <input type="checkbox"/> Older brother/sister (4) <input type="checkbox"/> Other caregiver (5) Specify (3oth): _____

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PART 2: Home Environment / Parenting Practices

4. Does your child read books other than text books? 1=Yes ; 0=No ; 99=Don't know

I am interested in learning about the things that your child plays with when s/he is at home. Does s/he play with:			
	1=Yes	0=No	99=Don't know
5. Does your child have any drawing or writing materials?			
6. Does child have any puzzles (even a two piece puzzle counts)?			
7. Does your child have any two or three piece toys that require hand-eye coordination?			
8. Does child have toys that teach about colors, sizes or shapes?			
9. Does child have toys or games that help teach about numbers/counting?			

In the past week, did you or any other family member older than 15 years engage in these activities with <<insert child's name>>? Note: ask "Who?" if the answer is "yes". – tick as many as appropriate	0=No 1=Yes, by Mother 2= Yes, by Father 3= Yes, by Caregiver
10. Read books or look at picture books with child?	
11. Tell stories to the child?	
12. Sing songs to or with the child, including lullabies?	
13. Take the child outside the home? For example, to the market, visit relatives.	
14. Play with the child any simple games?	
15. Name objects or draw things to or with the child?	
16. Show or teach your child something new, like teach a new word, or teach how to do something?	
17. Teach alphabet or encourage to learn letters to the child?	
18. Play a counting game or teach numbers to the child?	
19. Hug or show affection to your child?	
20. Spank your child for misbehaving?	
21. Hit your child for misbehaving?	
22. Criticize or yell at your child?	

I would like to know about how your child spends his/her day.	
23. On a regular day, how many hours does the mother spend time talking, walking, and/or playing with the child?	
24. On a regular day, how many hours does the father spend time talking, walking, and/or playing with the child?	
25. On a regular day, how many hours the child spend in the care of another child who is less than 10 years old?	
26. On a regular day, how many hours does the child spend alone?	

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Part 3: Health Status

27. In general, would you say that your child's health is?

Very good	1
Good	2
Moderate	3
Bad	4
Very bad	5
Unsure	88
Refused	99

28. In the last 6 months, has [child name] received deworming?

Yes	1
No	2
Unsure	88
Refused	99

29. In the past 2 weeks, has [child name] had diarrhea, defined as loose stools more than 3 times per day?

Yes	1
No	2
Unsure	88
Refused	99

30. In the past 2 weeks, has [child name] had cough or difficulty breathing?

Yes	1
No	2
Unsure	88
Refused	99

31. If yes above, did this illness require [child name] medical care from a clinic, hospital, doctor's chamber?

Yes	1
No	2
Unsure	88
Refused	99

32. In the past 2 weeks, has [child name] had an illness other than cough, difficulty breathing that required medical care from a clinic, hospital, doctor's chamber?

Yes	1
No	2
Unsure	88
Refused	99

33. When was the last time that [study child name] was weighed for growth monitoring?

Less than 1 month ago	1
1-3 months ago	2
3-6 months ago	3
6-12 months ago	4
Longer than 12 months ago or never weighed	5
Unsure	88
Refused	99

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Part 4: Child's Education

34. Did you enroll your child in any preschool program last year (in 2018)?

Yes → continue to Q35	1
No → continue to Q45	2

35. Which type of preschool program?

Public preschool	1
Private preschool	2
BRAC preschool	3
Madrasa/Islamic preschool	4
Other preschool (please specify _____)	8
Unsure	88
Refused	99

36. What was the main reason you selected this preschool?

Close to home	1
Safe commuting	2
Low or no cost	3
Convenient hours of operation	4
Good quality of education	5
Would teach my child Islamic values	6
Influence of community leaders	7
Other (specify)	8
Unsure	88
Refused	99

37. Did you enroll your child in any school this year (in 2019)?

Yes → continue to Q38	1
No → continue to Q59	2

38. If yes, which type of school?

Government school	1
Private school	2
BRAC school	3
Madrasa/Islamic school	4
Other school (please specify _____)	8
Unsure	88
Refused	99

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39. If yes, what level of schooling has your child attended in 2019?

Preschool (typically for 3- and 4-year-old children)	1
Preprimary (typically for 5-year-old children)	2
Grade 1	3
Grade 2	4
Other (please specify ____)	8
Unsure	88
Refused	99

I would now like to read you some statements about your child's school, and I want you to tell me whether you think each is not at all true, a little bit true, mostly true, or very true in your opinion. All the answers you provide will be kept confidential. This means that no one at your child's school will know what you tell me here.

40. The school was a good place for my child to be.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

41. The school did a good job preparing children for their futures.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

42. Going to school exposed my child to harmful people or ideas.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

43. The school met my child's academic needs.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

44. The school met my child's social and behavioral needs.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

45. Doing well in school will improve my child's chances of having a good life when he/she grows up.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

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46. This school kept me informed about my child's performance and behavior.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

47. I like the teacher(s) at the school.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

48. I feel comfortable talking with my child's teacher.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

49. The school is a welcoming place for families like mine.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

50. The school is a safe place for my child.

Not at all true	1
A little bit true	2
Mostly true	3
Very true	4

I would like to ask you about how much your family paid for your child's education in 2019. Please do include money contributed by family members who may not live in your home. Do not include money spent on education for any other children. Your best estimates are fine.

Item	Taka
51. Direct payments to school (school fees)	
52. Other activity fees	
53. School uniforms	
54. School supplies such as a backpack, notebooks, pencils, and so on	
55. Snacks or meals your child must bring to school	
56. Transportation to bring your child to school	
56. Private tutoring	
58. Other costs	

59. Why didn't you send your child to school in 2019?

He/she was too young	1
He/she was ill	2
He/she had a disability	3
My family didn't like the school(s) in my area	4
There were not enough spaces in the school(s) in my area	5
Other (Specify)	8
Unsure	88
Refused	99

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I would like to ask you about how much your family paid for your child's pre-school education last year, in 2018. Please do include money contributed by family members who may not live in your home. Do not include money spent on education for any other children. Your best estimates are fine.

Item	Taka
60. Direct payments to school (school fees)	
61. Other activity fees	
62. School uniforms	
63. School supplies such as a backpack, notebooks, pencils, and so on	
64. Snacks or meals your child must bring to school	
65. Transportation to bring your child to school	
66. Private tutoring	
67. Other costs	

Closing

Thank you for taking the time to speak with me today.

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