

IDS 2021: BASELINE SURVEY

Training Comment	QUESTION	ANSWER
	INTERVIEW INFORMATION	
	<p>SURVEYOR INSTRUCTION: <i>Only interview females who:</i> 1. are 18 and 40 years old 2. can speak English or Dagbani. 3. EITHER</p> <ul style="list-style-type: none"> - <i>are pregnant and are due before May 31st, 2021</i> <p align="center">OR</p> <ul style="list-style-type: none"> - <i>had a baby after March 1st, 2020 who lives with the respondent</i> 	
	Date and Time	
	Select district	
	Select clinic	
	Is this a static or a mobile (outreach post) clinic?	0 static clinic 1 mobile clinic
	Enter Surveyor ID	
	SURVEYOR: Show Surveyor Name	
	<p>SURVEYOR: This is woman number ___ who I talk to today <i>Is this the first woman you talk to? If yes, enter 1. Is this the second woman? If yes enter 2. Is this the third woman? If yes enter 3. etc.</i></p>	<p align="center">___ integer</p>
	<p>SURVEYOR: This is the woman's ID: \${womid}. Please write it down on your paper tracking sheet. You will need to use it when filling out the Online Tracking Survey.</p>	
	G.1 Respondent's first name SURVEYOR: Make sure you write all in caps. Do Not include accents.	
	G.2 Respondent's last name SURVEYOR: Ask about the name that the respondent uses for her official documents (ID cards etc.). Ask if you can see her NHIS, voter ID or Ghana card if she does not know. SURVEYOR: Make sure you write all in caps. Do Not include accents.	
	G.3 Can you confirm your popular name/nickname is [info_nickname] ?	
	<p>SURVEYOR: Please confirm all of the following to confirm the respondent is eligible for IDS</p>	
	The respondent is 18-40 years old	0. No 1. Yes
	The respondent speaks English and/or Dagbani	0. No 1. Yes
	The respondent: <ul style="list-style-type: none"> - is pregnant and is due before May 31, 2021. <p align="center">OR</p> <ul style="list-style-type: none"> - has a baby living with her and born after March 1,2020. 	0. No 1. Yes
	<p>[IF ANSWERED NO TO ANY OF THE QUESTIONS ABOVE]</p>	

	<p><i>SURVEYOR: The respondent is not eligible for this study. Please ensure you are only interviewing women who either are pregnant and due before May 31st, 2021 or had a baby after March 1st, 2020 who lives with the respondent.</i></p> <p><i>READ: You are unfortunately ineligible for this study. Thank you for your willingness to participate, we appreciate your time.</i> → END SURVEY</p>	
	<p>[IF ANSWERED YES TO ALL QUESTIONS ABOVE]</p> <p><i>SURVEYOR: The respondent is eligible, please proceed to the COVID-19 SYMPTOMS PRE-SCREEN</i></p>	
	<p><i>READ: Before we continue with the interview, I would like to ask you a few questions related to COVID-19 and how you have been feeling in the past 40 and 14 days.</i></p>	
	<p>Are you currently pregnant?</p>	<p>0. No 1. Yes</p>
	<p>COV1 In the past 40 days, have you tested positive for COVID-19?</p>	<p>0. No 1. Yes</p>
	<p>COV2 Are you currently under investigation for COVID-19 and not yet aware if you tested positive or negative?</p>	<p>0. No 1. Yes</p>
	<p>COV3 In the past 14 days, have you lived with, visited, or cared for someone who has tested positive for COVID-19 in the past 40 days?</p>	<p>0. No 1. Yes</p>
	<p>COV4 In the past 14 days, were you or a member of your household advised to self-isolate or asked to quarantine for COVID-19 by government officials or healthcare providers?</p>	<p>0. No 1. Yes</p>
	<p><i>READ: In the past 14 days, have you experienced any of the following symptoms:</i></p>	
	<p>COV 5 Fever or chills</p>	<p>0. No 1. Yes</p>
	<p>COV 6 Unusual mild or moderate difficulty breathing or shortness of breath <i>SURVEYOR: if the respondent has a pre-existing condition, such as asthma, that regularly causes difficulty breathing, select no, unless the respondent has had more difficulty recently than usual.</i></p>	<p>0. No 1. Yes</p>
	<p>COV 6 New or worsening cough</p>	<p>0. No 1. Yes</p>
	<p>COV7 <i>[IF PREGNANT]</i> - Sustained loss of smell or taste. <i>[IF NOT PREGNANT]</i> - Sustained loss of smell, taste, or appetite</p>	<p>0. No 1. Yes</p>
	<p>COV 8 Sore throat</p>	<p>0. No 1. Yes</p>
	<p>[IF ANSWERED NO TO ALL SYMPTOM QUESTIONS] <i>SURVEYOR: move to consent</i></p>	
	<p>[IF ANSWERED YES TO ANY OF THE SYMPTOM QUESTIONS]</p>	

	<p>SURVEYOR: The respondent has at least one COVID-19 symptom. Please contact your supervisor right away for further instruction → END SURVEY</p>	
	<p>A. CONSENT AND INTRODUCTION</p>	
	<p>READ: Hello. My name is \${surveyor_name}. I am a field officer from INNOVATIONS FOR POVERTY ACTION (IPA). I am talking with you today to conduct a research study.</p>	
	<p><i>In this research study, we are interested in learning more about how children learn and how to improve child education and child health. We hope this research will inform child education and health programs, which may benefit this community and society. You were selected because you are visiting the \${clinic_name} for antenatal or postnatal care. We will be surveying women between ages 18-40 visiting health facilities for antenatal and postnatal care for this study.</i></p>	
	<p><i>If you participate, we will administer a questionnaire to you. These questions are confidential, which means we will not tell anyone what you tell us. The questionnaires will cover household details, childcare, child health, and child education. We will not tell your family members, neighbors, or anyone else, so please answer as honestly as you can. If you don't want to answer a question, that is ok, but please answer if you can because it will help us a lot. To assure the accuracy of the survey data collection, we would like to record sections of this conversation. The recording will not be connected with your personal information and nobody outside the research team will have access to the recording. The recording will only be used by the research team to check accuracy. We will not record without your permission. If you do grant permission for this recording, you have the right to revoke recording permission at any time. This survey should take about 30 minutes to complete. We will ask to survey you again in-person sometime between August and September 2021.</i></p>	
	<p><i>All your responses will be anonymous / held in confidence. Only the researchers involved in this study and those responsible for research oversight will have access to the information you provide which identifies you or your child. Your responses will be numbered and the code linking the number with your names will be in a data file that can only be accessed through a secret password Researchers will keep your information secret/ confidential to the extent possible and allowable by the law. This project will be completed by December 2025 All records will be stored in a secure workspace until one year after that date. The records will then be destroyed</i></p>	
	<p><i>The risks to participating in this study are inconvenience and loss of time. There are no direct benefits to you. You will be offered a calendar as a thank you for participating in this study.</i></p>	
	<p><i>These surveys are voluntary. If you do not agree to participate or decide to end the survey later, there will be no penalty. Even if you agree to participate in the study, you won't have to answer all the questions in the surveys if you don't want to. Also, even if you agree to participate in the study now, no one from IPA will be allowed to ask you additional questions in the future without asking for your consent again. As per the laid down national safety protocols during this COVID period, you will be required to wear a nose mask throughout the period of the questionnaire administration. If you decide to participate, we can provide you with a new nose mask you may keep after the interview.</i></p>	
	<p><i>You can ask any questions that you have about the study now. If you later have a question about the study that you didn't think of now, you can contact: Innovations for Poverty Action 054-432-2614 (ask for Stephanie Adjovu, the senior research associate).</i></p>	
	<p>A.1. READ: If you think I have answered all your doubts and questions about this study and have received a satisfactory answer, please let me know with a verbal yes or</p>	<p>0. No → GO TO A4 THEN END SURVEY 1. Yes</p>

	<p><i>no if you consent to participate in the study. Your participation in this study is completely voluntary. We are very grateful if you participate.</i></p> <p>Do you agree to participate in the study?</p>	
	<p>A.2. Can you please sign on this tablet please to prove you have agreed to participate? SURVEYOR: Please make the respondent sign on the tablet.</p>	_____
	<p>A.3 Do you agree for the session to be recorded? If you do not, we will not record the audio but go ahead with the survey. Again, we want to reiterate that all information is held in confidence.</p>	<p>0. No 1. Yes</p>
	<p>A.4 Can you please let us know the reason for your refusal? [→ GO TO SURVEY END]</p>	<p>1 Too busy 2 Too sick 3 Wants her parents/husband to be present 4 Does not know the information we ask 5 Does not trust studies like those 6 Does not trust researcher 7 Had bad experience with similar studies in the past. 8 Too scared about future consequences -555 Other (Specify) -999 Refuse to Answer</p>
	B. Thorough Eligibility Check	
<p>Include biological OR adopted children.</p>	<p>B.1 Do you have children? SURVEYOR: this question only refers to children who are still alive and are either the biological or the adopted children OF THE RESPONDENT (not of another co-wife or family member)</p>	<p>0. No → SKIP B.5 1. Yes</p>
	<p>[IF HAS CHILDREN]</p> <p>B.2 What is the date of birth of your youngest child? SURVEYOR: If the respondent does not know, ask if you can see the child's official documents/maternity folder she brought to the clinic.</p>	<p>DD/MM/YY</p>
	<p>B.3 Does your youngest child live with you?</p>	<p>0. No 1. Yes</p>
	<p>[IF CHILD BORN AFTER MARCH 1ST, 2020 AND CHILD LIVES WITH RESPONDENT]</p> <p>B.4 What is the name of your youngest child?</p>	<p>_____ name</p>
	<p>[IF PREGNANT]</p> <p>B.5 When is your due date? SURVEYOR: If the respondent does not know, ask if you can see her official documents/maternity folder she brought to the clinic.</p>	<p>MM/YY</p>
	<p>[IF (youngest child is born before March 1st, 2020 OR youngest child does not live at home) AND (woman is not pregnant OR is pregnant and due after May 31st, 2021)]</p> <p>SURVEYOR: The interviewee is not eligible for this study. Please ensure you are only interviewing women who either</p>	

	<p><i>are pregnant and due before May 31st, 2021 OR have had a baby born after March 1st, 2020 and who lives with the respondent</i></p> <p>READ: You are unfortunately ineligible for this study. Thank you for your willingness to participate, we appreciate your time.</p> <p>→ GO TO SURVEY END</p>	
	C. Demographic and Household Info	
	READ: We would like to start by asking you some questions about you and your household.	
Make sure you enter the respondent's current age in completed years, not the age she will be. This is the age she turned on her last birthday.	<p>C.1a What is your age? SURVEYOR: Remind the respondent to give an age in completed years. If the respondent does not know, ask to see her NHIS card, ID voter or Ghana card or official document. You can skip this question by entering -111 to enter the date of birth instead next question if the respondent knows it.</p>	<p>_____ years -999 Refuse to answer -111 skip to write year of birth</p>
	<p>[IF DOES NOT KNOW AGE IN YEARS] C.1b Year of birth SURVEYOR: If the respondent does not know, ask to see her NHIS card, ID voter or Ghana card or official document.</p>	<p>YYYY -999 Refuse to answer</p>
Only record the highest formation completed . If the respondent dropped half-way through a formation, that formation is not considered completed.	C.2 What is your highest level of education completed?	<p>1 None 2 Primary 3 Middle/JSS 4 Voc/Comm 5 "O" level 6 SSS 7 "A" level 8 Training college 9 Technical/professional 10 Tertiary 11 Koranic -555 Other (please specify) -999 Refuse to answer -888 Don't know</p>
	C.3 What is your main occupation?	<p>0 Has no occupation 1 Legislator, senior officials and managers 2 Professionals 3 Technicians and associate professionals 4 Clerks 5 Craft and related trade workers 6 Plant and machine operators and assemblers 7 Elementary occupations 8 Armed forces and other security personnel 9 Homemaker 10 In school 11 Self-employed farmer 12 Forestry work</p>

		13 Fisherman/fishmonger 14 Self-employed trader 15 Employed shop attendant 16 Service workers -555 Other (please specify) -999 Refuse to answer -888 Don't know
	C.4 Can you read in English or Dagbani?	0. No, cannot read in English nor Dagbani 1. Yes, English only 2. Yes, Dagbani only 3. Yes, both -999 Refuse to answer
	C.5 What ethnic group do you belong to?	1 Asante 2 Gonja 3 Bimoba 4 Dagomba 5 Nankani and Gurense 6. Kokomba 7. Other Ghanaian tribe 8. Other African tribe -999 Refuse to answer
	C.6 What is the main language spoken at home?	1.English 2. Asante 3. Akaupem 4. Fanti 5. Ewe 6. Dagbani 7. Likpakpa 8. Wali/Dagari 9. Frafra/Gruni 10. Dangme 11. Hausa -555. Other, specify _____ -999 Refuse to answer
	C.7 What is your marital status?	0. Never married and not cohabiting 1. Betrothed 2. Cohabiting 3. Married 4. Separated 5. Divorced 6. Widowed -999. Refuse to answer
	[IF BETHROED, COHABITING or MARRIED] C.7.b Does your partner/husband currently have other wives/partners?	1 Yes 0 No -999 Refuse to Answer
	[IF BETHROED, COHABITING or MARRIED] C.8 How many days a month do you and your husband/partner live under the same roof	-999 Refuse to answer _____ Number of days

	<p>C.9 How many people, other than you (and your husband/partner), live in your household?</p> <p>By that I mean all people, including children, who live under this “roof” or within the same house at least 30 days in the past year, and when they are together, they share food from a common source, and contribute to and/or share in a common resource pool.</p> <p><i>SURVEYOR: Do not include the respondent and her husband/partner in the total of adults living in the household.</i></p>	<p>_____ adults (aged 50 years old or more) _____ adults (aged 16 years old or to 50 years old) _____ children under 5 years old _____ children 5 to 15 years old -999 Refuse to answer</p>
	<p>[IF BETHROED, COHABITING or MARRIED] C.10 What is your partner/husband's highest level of education completed?</p>	<p>0 None 2 Primary 3 Middle/JSS 4 Voc/Comm 5 "O" level 6 SSS 7 "A" level 8 Training college 9 Technical/professional 10 Tertiary 11 Koranic -555 Other (please specify) -888 Refuse to answer -999 Don't know</p>
	<p>[IF BETHROED, COHABITING or MARRIED] C.11 What is your husband/partner's main occupation?</p>	<p>0 Has no occupation 1 Legislator, senior officials and managers 2 Professionals 3 Technicians and associate professionals 4 Clerks 5 Craft and related trade workers 6 Plant and machine operators and assemblers 7 Elementary occupations 8 Armed forces and other security personnel 9 Homemaker 10 In school 11 Self-employed farmer 12 Forestry work 13 Fisherman/fishmonger 14 Self-employed trader 15 Employed shop attendant 16 Service worker -555 Other (please specify) -999 Refuse to answer -888 Don't know</p>
<p>- Make sure you prompt the respondent and ask about her government benefits, remittances and sale of assets in the past 30 days.</p>	<p>C.12 What was your personal income in the last 30 days? Please also include government benefits, remittances and sales of assets.</p>	<p>_____ GH¢</p>

For self-employed individuals, their income is their profits, and not their revenues. Make sure you ask or calculate profits. To calculate profits, take the business revenues MINUS business costs.		
You should include all children born alive, even if they died after birth. Do not include miscarriages.	C.13 How many children have you ever given birth to? SUREVEYOR: include children who have died but do not include miscarriages. Do not include adopted children.	_____ children -999 Refuse to answer
	[IF SAID HAD CHILDREN IN THOUROUGH CHECK] C.14 How many children do you have? SURVEYOR: Include biological and adopted children.	
	[IF HAS CHILDREN] C.15 How many of your children live with you? SURVEYOR: Include biological and adopted children.	
Make sure you enter the respondent's age in completed years, not the age she was going to be. Also make sure you do not include miscarriages.	[IF HAS GIVEN BIRTH TO CHILDREN: C.13>0] C.16 How old were you when you had your first child? SUREVEYOR: Make sure to give an age in completed years. We are asking about the respondent's first biological child.	_____ years old -999 Refuse to answer
	D. Parenting Behaviour	
	READ: I will now ask you some questions about how you (intend to) feed your baby. There are no trick questions.	
	[IF PREGNANT] D.1 How do you intend to feed the baby you are pregnant with?	1. Breast milk 2. Formula 3. Combination of breast and formula 4. Combination of solid food and breast milk -555. Other, specify -999 Refuse to answer -888 Don't know
	[IF HAS CHILD BORN AFTER MARCH 1 ST .2020 AND CHILD LIVES WITH RESPONDENT] D.2 Think of your youngest child. How do you feed your baby? SURVEYOR: If respondent says no, you can prompt and ask if the respondent feeds her child with a mixture of breast milk and formula or solid food.	1. Breast milk 2. Formula 3. Combination of breast and formula 4. Combination of solid food and breast milk -555. Other, specify -999 Refuse to answer -888 Don't know

		0. No 1. Yes -999 Refuse to answer
	[IF BREASTFEEDS CHILD BORN AFTER MARCH 1 ST . 2020 AND CHILD LIVES WITH RESPONDENT] D.3 Is there anything you typically do when you are breastfeeding your child, with your child, with others or by yourself? <i>SURVEYOR: Select multiple</i>	1. Take a break from chores/ work and sit down to relax or talk with others 2. Care for, oversee, and talk to older children 3. Check my phone 4. Prepare food ex: peel vegetables etc. 5. Tell story to my child 6. Talk to my child 7. Sing to my child -555. Other, specify -999 Refuse to answer
<i>READ: I will now ask you again some questions about your interactions with your children. There are no trick questions. We just want to know how you interact with your children.</i>		
	[IF SAID HAD ALIVE CHILDREN] D.4 Do you currently have a child who is six years or younger?	0. No → SKIP TO BELIEF SECTION 1. Yes -999 Refuse to answer
	D.5 Do you have a child older than 30 days (1 month)?	0. No → SKIP TO D.11 1. Yes -999 Refuse to answer
This question refers to when the child was one month old , not to now. Make sure the respondent is referring to her behavior towards the child when the baby was one month old.	[IF HAS CHILD OLDER THAN 30 DAYS] D.6 Think about your youngest child who is older than 1 month. When that child was 1 month old, did you sometimes describe the objects around the house to the child while you were cleaning or organizing things?	0. No 1. Yes → SKIP TO D.8 2. Somewhat or Maybe -888. Don't remember -999 Refuse to answer
	D.7 Why not? <i>SURVEYOR: Select multiple and do not read options</i>	1. At 1-month, child too young to understand 2. I did not have time 3. Did not think about it 4. Others would view it as strange -555. Other, specify -999 Refuse to answer
	D.8 Do you have a child older than 3 months?	0. No → SKIP TO D.11 1. Yes -999 Refuse to answer
This question refers to when the child was 3 months old , not to now. Make sure the respondent is referring to her	[IF HAS CHILD OLDER THAN 3 MONTHS] D.9 Think about one of your youngest children who is older than 3 months. When the child was 3 months old, did you sometimes describe to the child the things you could see along the way as you walked with the child? For example,	0. No 1. Yes → SKIP TO D.11 2. Somewhat or Maybe -888. Don't remember -999 Refuse to answer

<p>behavior towards the child when the baby was one month old.</p>	<p>you might point at a tree and saying “oh look at this big tree, it creates such a nice shade”.</p>	
	<p>D.10 Why not? SURVEYOR: Select multiple and do not read options</p>	<p>1. Child too young to understand 2. I did not have time 3. Did not think about it 4. Others would view it as strange -555. Other, specify _____ -999 Refuse to answer</p>
	<p>[ALL RESPONDENTS WITH A CHILD AGED 6 YEARS OR LESS] D.11 Think about your youngest child. Do you sometimes tell stories to the child?</p>	<p>1 never 2 rarely 3 a few times a year 4 a few times a month 5 at least once a week 6 multiple times a week 7 daily -999 Refuse to answer</p>
	<p>D.12 Think about your youngest child. Do you sometimes point at an object, say the name to the child, and then ask the child to repeat the word, emphasizing the movements of your lips as you pronounce it?</p>	<p>1 never 2 rarely 3 a few times a year 4 a few times a month 5 at least once a week 6 multiple times a week 7 daily -999 Refuse to answer</p>
<p>-You should include the respondent in the number of adults who take care of the child if she takes care of the child more than 30 minutes a day. -Only include household members. Be careful to distinguish between family and household members.</p>	<p>D.13 How many people in your household take care of your youngest child (including yourself if you are taking care of the child)? SURVEYOR: this includes anyone watching the child for more than 30 min a day</p>	<p>_____ adults _____ children 10 to 18 years old _____ children below 10 -999 Refuse to answer -888 if Don't Know</p>
<p>In the tablet, you will have to rank caregivers in order of importance.</p>	<p>D.14 Who are the main caregiver(s) of your youngest child? Please list them in order of importance. [UP TO FOUR] SURVEYOR: Someone who is responsible for at least some of the day-to-day decision about the child’s life on a regular basis SURVEYOR: Select multiple</p>	<p>1 Respondent 2 Spouse 3 Co-wife 4. Other Child of the respondent 5 Grandmother of child 6 Grandfather of child 7 Other female relative 8 Other male relative 9. House help 10 Female Non-relative</p>

		11 Male Non-relative -999 Refuse to answer -888 if Don't Know
E. Parenting Beliefs about Child Development		
<i>READ: This part of the questionnaire is going to ask you some questions about your views regarding various milestones in childhood development. There are no trick questions, we just want to know what *you* think.</i>		
E.1 Think about children from the time they are born till they reach school age. According to you, at what age do babies or children begin to make noises or babble in response to someone talking to them?	[__]__ years [__]__ months [__]__ days -888 if don't know -999 Refuse to answer	
E.2 Think about children from the time they are born till they reach school age. According to you, at what age do babies or children begin to say meaningful words?	[__]__ years [__]__ months [__]__ days -888 if don't know -999 Refuse to answer	
E.3 Think about children from the time they are born till they reach school age. According to you, at what age should mothers begin to talk to babies or children?	[__]__ years [__]__ months [__]__ days -888 if don't know -999 Refuse to answer	
E.4 In your opinion, is it important for a parent to tell stories to a baby or child to help in the development of the brain of the baby or child?	1. Yes 0. No → SKIP TO E.6 -111 no connection between storytelling and brain development -888 if don't know -999 Refuse to answer	
E.5 Think about children from the time they are born till they reach school age. In your opinion, at what age is it important for a parent to start telling stories to a baby or child to help in the development of the brain of the baby or child?	[__]__ years [__]__ months [__]__ days -888 if don't know -999 Refuse to answer	
E.6 In your opinion, is it important for a parent to speak to a baby or child in complete sentences to help in the development of the brain of the baby or child?	1. Yes 0. No → SKIP TO E.8 -111 no connection between speaking and brain development -888 if don't know -999 Refuse to answer	
E.7 Think about children from the time they are born till they reach school age. In your opinion, at what age is it important for a parent to start speaking to a baby or child in complete sentences to help in the development of the brain of the baby or child?	[__]__ years [__]__ months [__]__ days -888 if don't know -999 Refuse to answer	
E.8 I will now read two common views about children and then ask you which one best represents your view. 1. It is better for parents to treat and invest in all their children equally. 2. It is better for parents to invest in each child according to their needs, so that they equalize opportunities. Which statement best represents your view?	1. It is better to treat and invest in all children equally. 2. It is better to invest in each child according to their needs. -999 Refuse to Answer -888 if don't know	
E.9 I will now read a statement and then ask you if you 1. Strongly Agree 2. Somewhat Agree 3. Somewhat Disagree 4. Strongly Disagree.	1. Strongly Agree 2. Somewhat Agree 3. Somewhat Disagree 4. Strongly Disagree. -999 Refuse to Answer	

	If a mother provides better care to her second infant than to her first infant, she should feel bad for her first infant.	-888 Don't Know
	E.10 Do you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with the following statement: Children are born with a certain level of intelligence and parents can't really do much to change it	1. Strongly Agree 2. Somewhat Agree 3. Somewhat Disagree 4. Strongly Disagree. -999 Refuse to Answer -888 Don't Know
	E.11 One factor that affect children are the financial resources parents can spend on them (food, schooling, books). Another is time and attention, regardless of money. I will read three statements and ask you which one best represents your view. 1 Financial resources parents invest influence children's success more than time and attention do 2 The time and attention parents invest influence children's success more than financial resources do 3 Financial resources parents invest influence children's success just as much as time and attention do. Which statement best represents your view?	1 Financial resources parents invest influence children's success more than time and attention do 2 The time and attention parents invest influence children's success more than financial resources do 3 Financial resources parents invest influence children's success just as much as time and attention do. -999 Refuse to Answer
	E.12 In your opinion, at what age does it becomes clear how smart a child is?	[__] years [__] months [__] days -888 Don't Know -999 Refuse to Answer
	F. Self-Consciousness	
	<i>READ: I will now say a statement and I would like you to indicate how much each statement is like you by saying: "a lot like me", "somewhat like me", "a little like me" or "not like me at all".</i>	
	F.1 I care a lot about how I present myself to others.	1. A lot like me 2. Somewhat like me 3. A little like me 4. Not like me at all -999 Refuse to answer
	F.2 I get embarrassed very easily	1. A lot like me 2. Somewhat like me 3. A little like me 4. Not like me at all -999 Refuse to answer
	F.3 I'm concerned about what other people think of me	1. A lot like me 2. Somewhat like me 3. A little like me 4. Not like me at all -999 Refuse to answer
	<i>READ: I will now read a pair of statements and I would like you to tell me which one is more like you by saying: "Statement 1 is a lot like me", "Statement 1 is a somewhat like me", "Statement 2 is somewhat like me", or "Statement 2 is a lot like me".</i>	
	F.4 Statement 1: I'm always saying: I'll do it tomorrow. Statement 2: If I have a thing to do, I do it right away.	1. Statement 1 is a lot like me 2. Statement 1 is somewhat like me

		<p>3. Statement 2 is a somewhat like me</p> <p>4. Statement 2 is a lot like me</p> <p>-999 Refuse to answer</p>
	<p>F.5 Statement 1: I usually accomplish all the things I plan to do in a day.</p> <p>Statement 2: Often, I do not end up following my plan for the day.</p>	<p>1. Statement 1 is a lot like me</p> <p>2. Statement 1 is somewhat like me</p> <p>3. Statement 2 is a somewhat like me</p> <p>4. Statement 2 is a lot like me</p> <p>-999 Refuse to answer</p>
	<p>F.6 Statement 1: I postpone on things I dislike to do.</p> <p>Statement 2: I rarely delay doing things even when they are unpleasant.</p>	<p>1. Statement 1 is a lot like me</p> <p>2. Statement 1 is somewhat like me</p> <p>3. Statement 2 is a somewhat like me</p> <p>4. Statement 2 is a lot like me</p> <p>-999 Refuse to answer</p>
	<p>F.7 Statement 1: I manage to find an excuse for not doing something.</p> <p>Statement 2: If I have something to do, I make time to do it even if I am busy.</p>	<p>1. Statement 1 is a lot like me</p> <p>2. Statement 1 is somewhat like me</p> <p>3. Statement 2 is a somewhat like me</p> <p>4. Statement 2 is a lot like me</p> <p>-999 Refuse to answer</p>
	<p>F.8 Statement 1: I often start things at the last minute and find it difficult to complete them on time.</p> <p>Statement 2: I usually finish things before they need to be done.</p>	<p>1. Statement 1 is a lot like me</p> <p>2. Statement 1 is somewhat like me</p> <p>3. Statement 2 is a somewhat like me</p> <p>4. Statement 2 is a lot like me</p> <p>-999 Refuse to answer</p>
	<p>F.9 Statement 1: Whenever I make a plan, I usually stick to it.</p> <p>Statement 2: I change my plans frequently.</p>	<p>1. Statement 1 is a lot like me</p> <p>2. Statement 1 is somewhat like me</p> <p>3. Statement 2 is a somewhat like me</p> <p>4. Statement 2 is a lot like me</p> <p>-999 Refuse to answer</p>
	G. Tracking Information	
	<p>We will ask to survey you again in-person sometime between August and September 2021 at your home. We would need your address and phone number to reach you. Could you provide us with the address you will be living in August and September 2021, please be as detailed as possible - landmarks, street numbers, etc.</p>	_____
	<p>G.4a City/Town/Village SURVEYOR: This is the address where the respondent will live in August-September 2021</p>	_____
	<p>G.4b Street name SURVEYOR: Leave blank if not applicable</p>	_____
	<p>G.4c Compound Name SURVEYOR: Leave blank if not applicable</p>	_____
	<p>G.4d House Number SURVEYOR: Leave blank if not applicable</p>	_____

	G.4e Landlord Name <i>SURVEYOR Leave blank if not applicable</i>	_____
	G.4f Landmark	_____
	G.4g Direction	_____
	BEGIN LOOP TO COLLECT UP TO 5 PHONE NUMBERS:	
	G.5 Is there a phone number that we could reach you at? Or someone we could call to help us find you (neighbor, family member, friend etc.)?	phone number -999 Refuse to answer -888 Don't know
	<i>G.6 SURVEYOR: Insert phone number again please</i>	phone number
	G.7 Whose number is this?	1. Respondent 2. Husband 3. Family member 4. Neighbour 5. Friend -555 Other Specify
	[IF NOT RESPONDENT] G.8 Name of contact	_____
H. INTERVENTION IMPLEMENTATION		
	SURVEYOR: This is woman number ___ to whom I give a calendar today <i>Have you already given out one calendar today? Then this is the second woman you will be giving a calendar to today , so write 2 . Have you already given out two calendars today? Then this is the third woman you will be giving a calendar to today , so write 3 .
To help you, you can count the number of calendars you have left. Response constrained to: .>0 and .<21</i>	_____
	SURVEYOR: Please confirm : this is woman number ___ to whom I give a calendar today . This is really important so please make sure you count only women to whom you have given a calendar (regular or IDS calendar). You should only give calendars to women who reach this question. <i>Response constrained to: .>0 and .<21</i>	_____
	SurveyCTO preload determines if in Video treatment group or Video control group	
	[IF TREATMENT GROUP] H. 1. IDS VIDEO AND CALENDAR	
	<i>READ: I am now going to show you a video about how you can do important things when your baby is very young to make him or her smarter. We hope you enjoy it.</i>	
	H.1 In what language would you like to watch the video? <i>SURVEYOR: Read aloud options</i>	1. English 2. Twi (Asante, Fanti or Akuapem) 3. Dangme 4. Ewe 5. Frafra/Gruni 6. Dagbani 7. Wali/Dagari 8. Kokomba/Likpakpa

	<i>SURVEYOR: Show respondent video in their requested language</i>	
	H.2 Would you like to watch the video again?	0. No 1. Yes
	<i>SURVEYOR: Replay video if answer to previous question</i>	
	<i>READ: I hope you enjoyed the video about how you can make your baby smarter.</i>	
	<i>SURVEYOR: Give Infant-Directed Speech calendar to respondent. READ: We would like to give you this calendar as a reminder of the messages in the video. There is a star next to each week [POINT AT CALENDAR]. If you had at least one conversation per day with your baby in that week, you can color in the star to mark your achievement.</i>	
	[IF MOTHER BREAST-FEEDS CHLD OR INTENDS TO] <i>READ: For instance, you could talk to your baby in full sentences when your baby is breastfeeding.</i>	
	<i>READ: We hope this will help you remember to talk with your baby. To watch the video again, visit the Facebook address listed here [POINT AT CALENDAR] or just search "Talking to Babies Makes Them Smarter" or "ghanababytalk" on Facebook.</i>	
	H.3 Do you have any questions or comments about the content of the video?	_____ text
	H.4 Do you know anyone who has already seen this video?	0 No 1 Yees -999 Refuse Other (specify)
	[IF CONTROL GROUP] H.2 REGULAR CALENDAR	
	<i>SURVEYOR: Give NORMAL calendar to respondent. READ: We would like to give you this calendar as a thank you for participating in this study.</i>	
	I.	
	<i>READ: This is the end of the interview. Thank you very much for your time today. We appreciate your patience. Your interview is very helpful for our study. I want to reiterate that all the information you gave today will be kept confidential. We will contact you again in August or September to ask you if you would like to participate in our follow-up survey.</i>	
	I.1 Can you please let us know the reason for ending the survey before the end?	1 1. Too busy 2. Too sick 3. Wants her parents/husband to be present 4. Does not know the information we ask 5. Does not trust studies like those 6. Does not trust researcher 7. Had bad experience with similar studies in the past. 8. Too scared about future consequences 9. Uncomfortable with the questions we ask -555 -555. Other (Specify) -999 -999. Refuse to Answer
	J. Surveyor Observations	
	<i>SURVEYOR: How talkative was the respondent?</i>	1. Very talkative 2. Somewhat talkative

		3. Somewhat quiet 4. Very quiet
	<i>SURVEYOR: Did the respondent have trouble with the questions in the survey because some words were too difficult for them to understand?</i>	1. A lot of trouble 2. Some trouble 3. A little trouble 4. No trouble
	<i>SURVEYOR: Comments</i>	_____