

**Module 1. Household characteristics**

|     |  |  |
|-----|--|--|
| H0  | GPS coordinates: Longitude( <i>automatic from PDA</i> )  | _ _  :  _ _ _ _ _                                      |
| H0a | GPS coordinates: Latitude( <i>automatic from PDA</i> )   | _ _  :  _ _ _ _ _                                      |
| H1  | State( <i>PDA drop down list</i> )   | _ _ _ _ _ _ _  |
| H2  | LGAname ( <i>PDA drop down list</i> )  | _ _ _ _ _ _ _ _ _ _ _ _                                |
| H2a | Ward name ( <i>PDA drop down list</i> )  | _ _ _ _ _ _ _ _ _ _ _ _                                |
| H3  | Village(EA) name( <i>PDA drop down list</i> )  | _ _ _ _ _ _ _  |
| H3a | EA code ( <i>automatic from PDA</i> )  | _ _ _ _ _ _ _  |
| H4  | Household no<br><i>Enter the household number</i>  | _ _ _  |
| H5  | Unique household ID ( <i>generated by PDA and to be copied onto all documents e.g. consent forms</i> ) | _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ <br>LGA/EA/household |
| H6  | Interviewer initials   | _ _ _ _  |
| H7  | Date ( <i>dd/mm/yyyy, PDA format</i> )   | _ _ / _ _ / _ _ _ _                                    |
| H8  | Name of household head<br>Sunan Maigidan nan   | _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _                        |

|     |  |                         |
|-----|--|-------------------------|
| H9  | <p><b>Interviewer:</b> Have you read him/her the consent form?<br/>(1) yes (2) no-one is available to read it to</p> <p><b>Interviewer:</b> Ka /kin karanta wa maigidan takardar daukar izini?<br/>(1) yes (2) no-one is available to read it to</p> | _                       |
| H10 | <p><b>Interviewer:</b> Does the respondent agree?<br/>(1)Yes (2) No <b>IF NO END INTERVIEW HERE</b></p> <p><b>Interviewer:</b> Maigidan ya/ta amince?<br/>(1)Yes (2) No <b>IF NO END INTERVIEW HERE</b></p>  | _                       |
| H11 | <p><b>Interviewer:</b> Who is the respondent?<br/>(1) Household head (2)Representative</p> <p><b>Interviewer:</b> Wanene mai amsa tambayoyin?<br/>(1) Household head (2)Representative</p>   | _                       |
| H12 | <p>What is the ethnic group of the household head?<br/><i>PDA drop down list</i></p> <p><i>Menene kabilar Maigidan?</i><br/><i>PDA drop down list</i></p>  | _ _ _ _ _ _ _ _ _ _ _ _ |
| H13 | How many women who are married to  | _ _                     |

|  |  |  |
|--|--|--|
|  | the household head live in the house?<br><i>Write number</i>                                     |  |
|  | <i>Matan aure nawa ne maigidan ke tare<br/>dasu a cikin wannan gidan?</i><br><i>Write number</i> |  |

**H14.Household listing**

Please can I ask the names and some characteristic of all the people in your household?**START WITH THE HEAD OF HOUSEHOLD AND OLDER PEOPLE, THEN CHILDREN FROM OLDEST TO YOUNG**  
Zan iya tambayar ka/ki sunaye da wasu bayanai game da dukkan mutanen dake gidan nan?

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Gombe State, Nigeria, 2016**

| ALL                  | ALL                                     | ALL   | ALL  | PDA check:   | If born before 2004:  | If born before 2004:   | ALL   | ALL  | ALL   | ALL  |
|----------------------|---|---|--|--|---|--|---|--|---|--|
| Number of the person | Name of the person<br><br>Menene sunan? | Sex<br>(1)M<br>(2)F<br><br>Menene jinsin?<br><br>(1)M<br>(2)F | Date of birth (dd/mm/yyyy)<br><i>don't know date</i><br>01/01/2099)<br><br>Menene cikakken ranar haihuwar? | <b>Interviewer:</b><br>Is it a woman between 13 and 49 years? (1967-2003)<br>(1)yes<br>(2)no | What is the marital status?<br>(1) <i>currently married</i><br>(2) <i>not currently married but in a union</i><br>(3) <i>not married</i><br><br><i>Tana da aure?</i><br>(1) <i>currently married</i><br>(2) <i>not currently married but in a union</i><br>(3) <i>not married</i> | How many completed years of education? (enter number of years)<br><br><i>Wanne gurbin ilimi kika kammala?</i><br>enter number of years | Religion<br>(1)Christian<br>(2)Muslim<br>(3)Other<br><br><i>Menene addinin sa/ta?</i><br>1)Christian<br>(2)Muslim<br>(3)Other | Did the person sleep in the household last night?<br>(1) Yes<br>(2) No<br><i>Shin ya/ta kwana a nan gidan jiya?</i><br>(1) Yes<br>(2) No | Is this person a permanent resident of the household<br>(1) yes<br>(2) no | <i>Is there anybody else in the household</i><br>(1) Yes<br>(2) No<br><br><i>If No end the listing</i> |
| A                    | B                                       | C   | D  | G  | H   | I  | J   | K  | L   | M  |

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Gombe State, Nigeria, 2016**

Now I want to ask you some questions about the characteristics of your household

**Ina so in maka/ki tambayoyi akan wasu abubuwan da suka shafi gidan nan**

|     |  |                              |
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| H15 | <p>What is the main material of the walls?<br/>(1) <i>Natural materials or no walls (millet stalks/ woven thatch/mud)</i> (2) <i>Bamboo/Plywood/Stone with mud</i> (3) <i>Cement/bricks/planks</i> (6) <i>Other</i></p> <p>Da wanne irin abu aka kewaye gidan nan?<br/>(1) <i>Natural materials or no walls (millet stalks- Kara/ woven thatch - Zana/mud – Katangar laka)</i> (2) <i>Bamboo/Plywood/Stone with mud</i> (3) <i>Cement/bricks/planks</i> (6) <i>Other</i></p>   | <input type="checkbox"/>     |
| H16 | <p>What is the main floor material?<br/>(1) <i>Natural floor (earth/sand/dung)</i><br/>(2) <i>Rudimentary floor (wood/palm/bamboo)</i><br/>(3) <i>Finished floor (Polished wood, vinyl, tiles, cement, carpet or other finished floor)</i></p> <p>Da wanne irin abu akayi daben gidan nan?<br/>1) <i>Natural floor (earth/sand/dung)</i><br/>(2) <i>Rudimentary floor (wood/palm/bamboo)</i><br/>(3) <i>Finished floor (Polished wood, vinyl, tiles, cement, carpet)</i></p>   | <input type="checkbox"/>     |
| H17 | <p>What is the main material of the roof:<br/>(1) <i>Iron sheets/ tiles/cement;</i> (2) <i>Thatch/mat/cardboard/grass;</i> (3) <i>Other</i></p> <p>Da wanne irin abu akayi rufin/jinkar gidan nan?<br/>(1) <i>Iron sheets/ tiles/cement/decking;</i> (2) <i>Thatch/mat/cardboard/grass/mud;</i> (3) <i>Other</i></p>   | <input type="checkbox"/>     |
| H18 | <p>What kind of toilet facilities does your household have?<br/>(1) <i>Flush toilet</i> (2) <i>Pit toilet/latrine</i> (3) <i>Bucket toilet</i> (4) <i>No facility/bush</i> (5) <i>Pour flush</i></p> <p>Wanne irin bandaki ake dashi a gidan nan?<br/>(1) <i>Flush toilet</i> (2) <i>Pit toilet/latrine</i> (3) <i>Bucket toilet</i> (4) <i>No facility/bush</i> (5) <i>Pour flush</i></p>   | <input type="checkbox"/>     |
| H19 | <p>What is the main source of drinking water for members of your household?<br/>(1) <i>Piped water into dwelling;</i> (2) <i>Piped water into yard/plot;</i><br/>(3) <i>Public tap;</i> (4) <i>Borehole/Borehole with tap;</i> (5) <i>Dug well;</i> (6) <i>Water from spring;</i><br/>(7) <i>Tanker truck;</i> (8) <i>Surface water (river/dam/lake ect);</i><br/>(9) <i>Bottled water;</i> (10) <i>Water vendor/satchets</i> (11) <i>other</i></p> <p>Menene hanyar samun ruwan sha a gidan nan?<br/>1) <i>Piped water into dwelling;</i> (2) <i>Piped water into yard/plot;</i><br/>(3) <i>Public tap;</i> (4) <i>Borehole;</i> (5) <i>Dug well;</i> (6) <i>Water from spring;</i><br/>(7) <i>Tanker truck;</i> (8) <i>Surface water (river/dam/lake ect);</i><br/>(9) <i>Bottled water;</i> (10) <i>Water vendor/satchets</i> (11) <i>other</i></p> | <input type="checkbox"/>     |
| H20 | <p>What type of fuel does your household mainly use for cooking<br/>(1) <i>Electricity;</i> (2) <i>Gas;</i> (3) <i>Kerosene;</i> (4) <i>Charcoal;</i> (5) <i>Firewood/straw;</i> (6) <i>Dung;</i><br/>(7) <i>Other</i></p> <p>Da me aka fi yin girki dashi a gidan nan?<br/>(1) <i>Electricity;</i> (2) <i>Gas;</i> (3) <i>Kerosene;</i> (4) <i>Charcoal;</i> (5) <i>Firewood/straw;</i> (6) <i>Dung;</i><br/>(7) <i>Other</i></p>   | <input type="checkbox"/>     |
| H21 | <p>Is the house connected to electricity? (1) <i>yes</i> (2) <i>no</i></p> <p>Akwai lantarki a wannan gidan? (1) <i>yes</i> (2) <i>no</i></p>  | <input type="checkbox"/>     |
|     | <p>In this household is there anyone who owns the following:<br/>Akwai masu wadannan abubuwa a cikin gidan nan?</p>  | (1) <i>yes</i> (2) <i>no</i> |
| H22 | Fridge: Firiji   | <input type="checkbox"/>     |
| H23 | TV Talebijin   | <input type="checkbox"/>     |
| H24 | Radio: Redito  | <input type="checkbox"/>     |
| H25 | Bicycle: Keke  | <input type="checkbox"/>     |
| H26 | Mobile phone: Wayar salula   | <input type="checkbox"/>     |
| H27 | A bed: Gado  | <input type="checkbox"/>     |
| H28 | A kerosene lamp/pressure lamp: Fitilar kwai/ fitilar ruwa  | <input type="checkbox"/>     |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

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|-----|---------------------------|--------------------------|
| H29 | Wrist watch: Agogon hannu | <input type="checkbox"/> |
| H30 | Motorcycle: Babur         | <input type="checkbox"/> |
| H31 | Generator: Janareta       | <input type="checkbox"/> |
| H32 | Fan: Fanka                | <input type="checkbox"/> |

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| H33 | In this house are there ducks or chickens/Guinea fowl? How many?<br>(write the number; <b>0 if none, 999 if respondent does not know</b> )<br><br>Akwai agwagi ko kaji a gidan nan? Guda nawa ne?<br>(write the number; <b>0 if none, 999 if respondent does not know</b> )                         | <input type="text"/>     |
| H34 | Do you have animals in this household like goat, sheep or cattle<br>How many? (write the number; <b>0 if none, 999 if does not know</b> )<br><br>Ko kuna da dabbobi a gidan nan kamar su awaki, tumaki ko shanu? Guda nawa ne?<br><b>0 if none, 999 if does not know</b>                            | <input type="text"/>     |
| H35 | Do you have any horses, donkeys or mules? How many?<br>(write the number; <b>0 if none, 999 if respondent does not know</b> )<br><br>Ko kuna da dawaki, jakuna ko alfadari a gidan nan? Guda nawa ne?<br>(write the number; <b>0 if none, 999 if respondent does not know</b> )                     | <input type="text"/>     |
| H36 | How many mosquito nets does your household have?<br>(Write total number; <b>count those in use plus those not in use</b> )<br><br>Gidan sauro nawa kuke dasu a gidan nan?<br>(Write total number; <b>count those in use plus those not in use</b> )   | <input type="text"/>     |
|     | Now I would like to ask you about messages you have heard on the radio<br><br>Yanzu ina son na tambayeki gameda da sakonnin da kika ji ko saurara daga rediyo?  |                          |
| H37 | Have you listened to the radio at all in the last 3 months? (1)yes (2)no<br><b>If no skip to W1</b><br>A chikin wattanni ukkun da suka gabata ko ka/ki saurari rediyo?  | <input type="text"/>     |
| H38 | Have you heard any messages about health care for mothers and children on the radio in the last 3 months?<br>(1)yes (2)no<br>Ko ka/kin samu wani sako game da lafiyar mata ko yara a rediyo a cikin wattanni ukun da su ka gabata?  | <input type="text"/>     |
|     | Can you name or tell me on which radio programme you heard messages about health care for mothers and children in the last 3 months?<br><b>Do not prompt, ask – any others? Mark all that apply.</b><br>Daga wane gidan rediyo ne ka/ki ji/sami wannan sakon a cikin wattanni ukkun da suka gabata? |                          |
| H38 | Progress radio  | <input type="checkbox"/> |
| H39 | Gombe radio cooperation   | <input type="checkbox"/> |
| H40 | Ray power radio station   | <input type="checkbox"/> |
| H41 | OTHER   | <input type="checkbox"/> |

**Module 2: WOMENS MODULE: Health now**

**All resident women aged 13-49 years**

**Interviewer:** When you have identified the next woman for interview you must first complete the consent procedure (to W6) before proceeding with interview.

|    |  |                     |
|----|--|---------------------|
| W1 | <b>PDA look up: Select</b> name of the woman   |                     |
| W2 | <b>PDA look up: Confirm the ID number of the woman and write on her consent form (LGA/EA/household/person)</b>   | _ / _ _ / _ _ / _ _ |
| W3 | <b>Interviewer:</b> Is it possible to interview the woman?<br>1 = yes ( <b>SKIP TO W5</b> ) 2 = No   | _                   |
| W4 | <b>Interviewer:</b> Why is it not possible to interview?<br>1 = Temporarily absent – call back<br>2 = Travelled away<br>3 = Sick<br>4 = Other<br><b>END OF PROCESS FOR THIS WOMAN – CONTINUE TO OTHER WOMEN 13-49 IN THE HOUSEHOLD</b> | _                   |
| W5 | <b>Interviewer:</b> Have you read her the consent form?<br>(1) yes (2) no  | _                   |
| W6 | <b>Interviewer:</b> Does the woman agree?<br>(1) yes (2) no<br><b>IF NO, END INTERVIEW HERE – CONTINUE TO OTHER WOMEN 13-49 IN THE HOUSEHOLD</b>   | _                   |

|      |   |                   |
|------|---|-------------------|
| W52a | Are you a member of a mother's group organized by PACT? (1) yes (2) no<br><br>Kina gungiyar iyaye mata da PACT su ka tsara?<br><b>If no skip to W53</b>   | _                 |
| W52b | For how long have you been a member of a mother's group?<br><br>Tun yausha kika shiga kungiyar?<br>Enter number of completed months since membership began.<br><b>If became a member less than 30 days before interview enter 0</b> | _   _             |
| W52c | How many meetings have you attended so far?<br><br>Sau nawa kika halarci taron kungiyar mata iyaye ya zuwa yanzu?<br>Enter number of meetings attended  | _   _             |
| W52d | What was the date of your last mother's group meeting?<br><br>Wace rana ce kungiyar iyaye mata sukayi taron karshe?<br>Enter dd/mm/yyyy.  | _ _ / _ _ / _ _ _ |
|      | What was discussed at the last mother's group meeting that you attended?<br><b>Do not probe, select all that are mentioned, probe – anything else?</b><br><br><b>Wane abubuwa aka tattauna a taron karshe da kika halarta?</b>      |                   |
| W52e | Danger signs during pregnancy?<br>(1) yes (2) no<br><br>Wadanne ne alamu masu hadari lokacin goyon ciki ko juna biyu?   | _                 |
| W52f | Danger signs during labor and delivery?<br>(1) yes (2) no<br>Wadanne ne alamu masu hadari lokacin nakuda da haihuwa?  | _                 |
| W52g | Danger signs in the post natal period?<br>(1) yes (2) no<br>Wadanne ne alamu masu hadari bayan haihuwa?   | _                 |
| W52h | Learnings around improving members' capacity for generating income?<br>(1) yes (2) no<br>Horarwar ta kunshi koyar da dabarun yadda za'a farfado da yadda ake samun kudi?<br>(1) yes (2) no  | _                 |
| W52i | Learnings around improving members. Literacy and numeracy skills?<br>(1) yes (2) no   | _                 |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|       | <p><i>Horarwar ta kunshi koyar da dabaru ga 'yan kungiyar. Ta hanyar karatu da lissafi?</i><br/>(1)yes (2)no</p>  |                           |
| W52j  | <p>Other things discussed? __Wadanne abubuwa kuka tattauna akai_____ Specify: Ki shaida mani</p>  |                           |
| W52k  | <p>Have you ever accessed funds from the mothers group?<br/>(1)yes (2)no</p> <p><i>Ko kin taba amsar kudi daga kungiyar iyaye mata?</i></p>   | <input type="checkbox"/>  |
| W52l  | <p><b>If yes:</b> What was the money for?<br/><i>Specify</i></p> <p><b>If yes: Menene dalilin amsar kudin?</b><br/><i>Specify</i></p>   | <p>_____</p> <p>_____</p> |
| W52la | <p>Now thinking about who makes decisions in your household.</p> <p>Yanzu ina son kiya tunani gameda yadda kuke zartar da shawarwari a gidan nan?</p>   |                           |
| W52m  | <p>Who usually decides how the money you earn will be used: you, your husband/partner, or you and your husband/partner jointly, or someone else? (1) <i>Myself only</i> (2) <i>My husband/partner only</i> (3) <i>Myself and my husband/partner jointly</i> (4) <i>My parent</i> (5) <i>Another person in the household</i></p> <p><b>Select one</b></p> <p>Wanene yawanci yake yanke shawarar yadda za'a kashe kudaden da kuka samu: <b>Select one</b></p> <p>(1) <i>Myself only</i> (2) <i>My husband/partner only</i> (3) <i>Myself and my husband/partner jointly</i> (4) <i>My parent</i> (5) <i>Another person in the household</i></p> | <input type="checkbox"/>  |
| W52n  | <p>Who usually makes decisions about health care for yourself: you, your husband/partner, you and your (husband/partner) jointly, or someone else? (1) <i>Myself only</i> (2) <i>My husband/partner only</i> (3) <i>Myself and my husband/partner jointly</i> (4) <i>My parent</i> (5) <i>Another person in the household</i></p> <p><b>Select one</b></p> <p>Wanene yawanci ke baki shawara gameda kiwon lafiyar ki?</p> <p>(1) <i>Myself only</i> (2) <i>My husband/partner only</i> (3) <i>Myself and my husband/partner jointly</i> (4) <i>My parent</i> (5) <i>Another person in the household</i></p>                                   | <input type="checkbox"/>  |

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|      | <p>Now asking you about use of bednets</p> <p>Yanzu ina son in tambaye ki gameda amfani da gidan sauro.</p>   |                          |
| W93c | <p>Did you sleep under a bednet last night?<br/>(1) yes (2) no <b>(if no, skip to W94)</b></p> <p>A daren jiya, kin yi barci a gidan sauro?<br/>(1) yes (2) no <b>(if no, skip to W94)</b></p>  | <input type="checkbox"/> |
| W93d | <p>What kind of net was it? <b>(select one)</b></p> <p>1)LLIN (2) Ordinary net with no insecticide added (3) Ordinary net with insecticide added</p> <p>Wanne irin gidan sauro ne?<br/>(1) <i>Gidan sauro mai magani tun fil-azal(LLIN)</i> (2) <i>Gidan sauro marar magani</i> (3) <i>Gidan sauro wanda aka sa masa magani daga baya</i></p> | <input type="checkbox"/> |
| W93e | <p>How many years ago did your household obtain that net? <b>(enter number of</b></p>   | <input type="text"/>     |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|  | <b>years before survey date; if less than 1 year before survey enter 0; if don't know enter 99)</b><br><br>Yanzu shekaru nawa ne da mallakar gidan sauron? <b>(enter number of years before survey date; if less than 1 year before survey enter 0; if don't know enter 99)</b> |  |
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Now I would like to ask you some questions about any pregnancies that you have had

Ina so in yi miki tambayoyi game da duk haihuwar da kika yi a baya?

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| W94a | Just to ask you again, have you ever been pregnant even if that pregnancy did not lead to a live birth?<br>(1) Yes <b>(Continue)</b> (2) No <b>(End of interview)</b><br><br>Bari dai in kara tambayarki, Kin taba samun juna biyu, ko da 'dan bai zo da rai ba? Yes <b>(Continue)</b> (2) No <b>(End of interview)</b>   | _   |
| W94b | In total, how many times have you ever been pregnant, including those pregnancies that did not lead to a live birth?<br><i>Enter total number of pregnancies.</i><br><br>Nawa ne jimlar juna biyu da kika taba samu harda wadanda basu zo da rai ba? <i>Enter total number of pregnancies.</i>  | _ _ |
| W94c | Have you ever given birth?<br>(1)Yes (2)No <b>(End of interview)</b><br><br>Ko kin taba haihuwa?<br>(1)Yes (2)No <b>(End of interview)</b>  | _   |
| W94d | How many times have you ever given birth even if the baby was not born alive?<br><i>Enter total number</i><br>Kamar sau nawa kika taba haihuwa ko da 'ya'yan basu zo da rai ba?<br><i>Enter total number</i>  | _ _ |
| W94e | How many of your births ended with a live born baby?<br><i>Enter total number of live births</i><br><br>'Ya'ya nawa kika haifa da ransu?<br><i>Enter total number of live births</i>  | _ _ |
| W94f | Have you ever given birth to a child who cried or showed signs of life but unfortunately died later?<br>(1)yes (2) no – <b>skip to W94</b><br><br>Kin taba haihuwar 'da ko 'ya'ya da suka koma?<br>(1)yes (2) no – <b>skip to W94</b>   | _   |
| W94g | <b>If yes, a child died:</b><br>How many of your live born children have ever died? (write number)<br><br><b>If yes, a child died:</b><br>Cikin 'ya'yan da kika haifa da rai nawa suka rasu? (write number)   | _   |
| W94  | How many times have you had a birth since 2014 that ended in a live born baby (even if baby later died)? ( <i>Enter number; if 0, end of interview for this woman</i> )<br><br>Haihuwar yara masu rai nawa kika yi daga shekarar 2014 zuwa yau, koda ace jaririn ya rasu daga baya? ( <i>Enter number; if 0, end of interview for this woman</i> )  | _   |
| W95  | What was the date of your last live birth since 2014? ( <i>Enter date dd/mm/yyyy; don't know date enter 99 for dd, probe for month and year; ask for a birth certificate to verify date if one is available</i> )<br><br>A wane kwanan wata ne kika haifi 'da/ya mai rai tun daga shekarar 2014? ( <i>Enter date dd/mm/yyyy; don't know date enter 99 for dd, probe for month and year; ask for a birth certificate to verify date if available</i> ) | _   |
| W96  | Was it a single or multiple birth? (1) single (2)twins (3)three or more babies<br><br>A haihuwar ki ta baya bayan nan daya kika haifa ko fiye? (1) daya   | _   |



**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

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|      | (2) <i>tagwaye</i> (3)'ya'ya uku ko fiye da haka  |   |
| W97  | What was the name of the child <b>(first child to be born if not a singleton birth; enter name)</b><br><br>Menene sunan 'dan ko 'yar <b>(Idan fiye da daya ne, ki ambaci sunan wadda ya fara fitowa)</b>  | _ |
| W98  | What was the gender of the child <b>(first child to be born if not a singleton birth)</b> (1) <i>male</i> (2) <i>female</i><br><br>Macece ko namiji ? <b>(Idan fiye da daya ne, ki ambaci jinsin wadda ya fara fitowa)</b> (1) <i>male</i> (2) <i>female</i>  | _ |
| W98a | Is the child still alive today?<br>(1) <i>yes</i> – <b>go to W100</b> (2) <i>no</i><br><br>'Dan/'yar na da rai yanzu?<br>(1) <i>yes</i> – <b>go to W100</b> (2) <i>no</i>   | _ |
| W99  | <b>If the child died</b><br>How many days did the child live for? <i>(write number of days; if less than 1 day write 0)</i><br><br>Kwana nawa 'dan/'yar yayi/tayi a raye? <i>?(write number of days; if less than 1 day write 0)</i>  | _ |
| W100 | I just want to check, have you had any other live births after the one you just told me about?<br><b>(If the answer here is yes go back and check the responses from W94 onwards again)</b><br><br>Ko kin taba wata haihuwar bayan wadda kika fada mani?<br><b>(If the answer here is yes go back and check the responses from W94 onwards again)</b> | _ |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

**MODULE 2 continued for women with a recent live birth**  
**Women aged 13-49 who had a live birth since April 2014**

Now I want to talk to you about the last birth you had that ended in [DATE], with the birth of [NAME]  
Yanzu inason mu tattauna dangane da juna biyun da kika haifa ranar [DATE], wadda aka samu [NAME]

|  |   |                     |
|--|---|---------------------|
| M1   | Do you have a health card with information about that pregnancy and birth?<br>(1)yes (2)no<br><br>Kina da katin asibiti da ke dauke da bayanai game da wannan juna biyun da haihuwar?<br>(1)yes (2)no   | _                   |
| M2   | May I see your health card?<br>(1)yes (2)no because it isn't at home (3)no, refused permission<br><br>Ko zan iya ganin katin asibitin?<br>1)yes (2)no because it isn't at home (3)no, refused permission  | _                   |
| M3   | When pregnant with [NAME], did you receive any care during pregnancy? <b>Probe: care at the health facility, or visits at home from a community health volunteer/worker</b><br>(1)Yes (2)No <b>(SKIP TO M14d)</b><br><br>Lokacin da kike da cikin[NAME], ko kin samu wata kulawa? <b>Probe: care at the health facility, or visits at home from a community health volunteer/worker</b><br>(1)Yes (2)No <b>(SKIP TO M14d)</b> | _                   |
| M4   | During that pregnancy, did you receive pregnancy care from a health facility<br>(1)yes (2)no( <b>go to M9</b> )<br><br>Lokacin da kike da ciki ko kin samu kulawa daga asibiti?<br>(1)yes (2)no( <b>go to M9</b> )  | _                   |
| <b>For women who received pregnancy care at a health facility:</b> |   |                     |
| M5   | How many times did you attend the health facility for pregnancy (antenatal) care that pregnancy? <i>Enter the number of times</i><br><br>Lokacin da kike da cikin sau nawa kika sami zuwa awo?<br><i>Enter the number of times</i>  | _                   |
| M6   | When did your first visit to the health facility take place?<br>(enter date using PDA lookup)<br><b>Interviewer: record from health card if available</b><br><br>Yaushe ne kika fara zuwa awon farko a asibiti?<br>(enter date using PDA lookup)<br><b>Interviewer: record from health card if available</b>  | _ _ / _ _ / _ _ _ _ |
| M7   | How old was your pregnancy at the first visit? (record no.weeks)<br><b>Interviewer: record from health card if available</b><br><br>Cikin na da wata nawa kika fara zuwa awo? (record no.weeks)<br><b>Interviewer: record from health card if available</b>   | _ _                 |
| M8   | Who attended/saw you at that first visit?<br>(1)CHEW (2) CHO (3) Nurse/midwife (4) Doctor (5) other<br><br>Wane irin jami'in kiwon lafiya ki ka gani a zuwan farko?<br>(1)CHEW (2) CHO (3) Nurse/midwife (4) Doctor (5) other   | _                   |
| M8a  | The last time you visited the health facility for antenatal care, how did you travel there? (1)walked (2)bicycle (3)motorised vehicle (4)motorbike (5)other   | _                   |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

|     |  |  |
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|     | Zuwan ki asibiti na karshe, ta yaya ki ka je domin awon ciki? (1) <i>Tafiya da kafa</i> (2) <i>Keke</i> (3) <i>Mota</i> (4) <i>Babur</i> (5) <i>Wani abu dabam</i>   |  |
| M8b | <p>The last time you visited the health facility for antenatal care, how many minutes did you spend there (including the waiting time and the time spent with a health worker)<br/><i>Enter number of minutes, e.g. if half an hour enters 30, if 1 hour and 10 minutes enter 70 minutes</i></p> <p>Zuwa awon ki na karshe, minti nawa ki ka yi gaba daya a asibitin (wanda ya hada da lokacin zaman jira da ganin jami'in kiwon lafiya)<br/><i>Enter number of minutes, e.g. if half an hour enters 30, if 1 hour and 10 minutes enter 70 minutes</i></p> |  |
| M8c | <p>When you attended antenatal care at the health facility, did you have to pay any cash there? (1) yes (2) no - <b>go to M8e</b></p> <p>Kin biya kudi a asibitin, kafin ganin jami'in kiwon lafiya? (1) yes (2) no - <b>go to M8e</b></p>   |  |
| M8d | <p>How much cash did you have to pay in total? <i>Enter the amount in Naira</i></p> <p>Har nawa kika biya Jami'in kiwon lafiyar a asibitin kafin yayi miki awo? <i>Enter the amount in Naira</i></p>   |  |
| M8i | <p>When you were at the health facility for pregnancy care did the health worker talk to you about emergency transport in case you had a problem with your health? (1)yes (2)no</p> <p><i>Lokacin da kika ziyarci cibiyar kiwon lafiya domin awon ciki, ko wani jami'in kiwon lafiya yayi maki magana gameda shirin sufurin gaggawa idan kina da matsalar kiwon lafiya?</i><br/>(1) yes (2) no</p>   |  |
| M8j | <p>When you were at the health facility for pregnancy care did the health worker give you a telephone number to call for emergency transport in case you had a problem with your health? (1) yes (2) no</p> <p><i>Lokacin da kika ziyarci cibiyar kiwon lafiya domin kulawar ciki, ko wani jami'in kiwon lafiya ya baki lambar wayar da zaki iya amfani da ita domin tuntubar shirin sufurin gaggawa?</i><br/>1)yes (2) no</p>   |  |
|     | <p>Did anyone specifically advise you to go to the health facility for pregnancy care? (1)yes (2)no <b>Ask for each of the following</b></p> <p><b>Shin wani ko wata ya baki shawarar da ki je cibiyar kiwon lafiya domin kulawa da ciki?</b></p>  |  |
| M8k | My family member told me   |  |
| M8l | My neighbour/friend told me  |  |
| M8m | I heard it on a radio programme  |  |
| M8n | I heard it on a TV programme   |  |
| M8o | A community health worker/visitor told me  |  |
| M8p | None of these  |  |
| M9  | <p>During that pregnancy, did you receive pregnancy care from a volunteer or from a health care worker in your own home<br/>(1)Yes (2)No (<b>go to M14</b>)</p> <p><i>Lokacin da kike da cikin, ko kin samu kulawa a gida daga wani jami'in sa kai ko wani/wata jami'in hukumar kiwon lafiya?</i><br/>(1) Yes (2) No (<b>go to M14</b>)</p>  |  |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

|       |   |                     |
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|       | <b>For women who received pregnancy care at home.</b>   |                     |
|       | <b>Domin mataan da suka amshi kulawar ciki a gida.</b>  |                     |
| M10   | How many times did the health volunteer or health worker visit you at home for pregnancy care that pregnancy?<br><i>Enter number of times</i><br><br>Sau nawa wani jami'in sa kai ko wani/wata jami'in hukumar kiwon lafiya ta ziyarce ki a gida domin kulawa da lafiyar cikin nan? <i>Enter number of times</i><br><i>Enter number of times</i>  | _                   |
| M11   | When did the first visit to your home take place?<br><i>(enter date using PDA look up)</i><br><br>Yaushe ne aka fara ziyaratar ki a gida domin kulawa da lafiyar cikin nan?<br><i>(enter date using PDA look up)</i>  | _ _ / _ _ / _ _ _ _ |
| M12   | How old was your pregnancy the first time the volunteer/worker visited you at home for pregnancy care? <i>record number of weeks</i><br><br>Cikin na da wata nawa ne lokacin ziyarar farko daga wani jami'in sa kai ko wani/wata jami'in hukumar kiwon lafiya?<br><i>record number of weeks</i>   | _ _                 |
| M13   | Who was it who came to visit you that first time?<br>(1) FOMWAN (2) TBA (3) Village health worker (4) CHEW/CHO (5) Others, specify<br><br>Wanene ya ziyarce ki da farko dangane da wannan juna biyun a gida?<br>(1) FOMWAN (2) TBA (3) Village health worker (4) CHEW/CHO (5) Others, specify   | _                   |
| M13a  | The last time the volunteer/worker visited you at home for pregnancy care, how many minutes did she spend at your home?<br><b>Enter number of minutes, e.g. if half an hour enter 30, if 1 hour and 30 minutes enter 90</b><br><br>A ziyarar karshe da wani jami'in sa kai ko wani/wata jami'in hukumar kiwon lafiya ya kawo ma ki gida, minti nawa ta/ya yi a gidan?<br><b>Enter number of minutes, e.g. if half an hour enter 30, if 1 hour and 30 minutes enter 90</b> | _   _ _             |
| M13b1 | When you were visited at home for pregnancy care, did the person measure your blood pressure? (1)yes (2)no<br><b>(PROBE: when a strap was put around your upper arm and a measure taken)</b><br><br>Lokacin ziyarar kulawa da ciki da aka kawo maki a gida ko an gwada bugun jinin ki?<br><b>(PROBE: when a strap was put around your upper arm and a measure taken)</b>  | _                   |
| M13b2 | When you were visited at home for pregnancy care, did the person talk to you about emergency transport in case you had a problem with your health?<br>(1) yes (2) no<br><br>Lokacin da aka kawo maki ziyarar awon ciki, ko jami'in yayi magana gameda shirin sufurin gaggawa idan kina da matsalar kiwon Lafiya?<br>(1) yes (2) no  | _                   |
| M13b3 | When you were visited at home for pregnancy care, did the health worker give you a telephone number to call for emergency transport in case you had a problem with your health?<br>(1) yes (2) no   | _                   |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

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|      | <i>Lokacin da aka kawo maki ziyarar awon ciki a gida, ko jami'in kiwon Lafiya ya baki lambar waya domin kiran shirin sufurin gaggawa idan kina da matsalar kiwon Lafiya?</i><br>(1) yes (2) no   |               |
| M13b | When you were visited at home for pregnancy care, did you ever have to pay any cash to the volunteer? (1)yes (2)no - <b>go to M13d</b><br><br>Ko kin biya ma'aikacin sa kai lokacin da ya/ta ziyarce ki? (1) yes (2) no - <b>go to M13d</b>  | _             |
| M13c | How much cash did you have to pay to the volunteer/worker for your pregnancy care at home care in total? <i>Enter the amount in Naira</i><br><br>Har nawa ki ka biya ma'aikacin sa kai lokacin da ta/ya ziyarce ki a gida domin kulawa da lafiyar cikin? <i>Enter the amount in Naira</i>                                | _ _ _ _ _ _ _ |
| M13d | When you were visited at home for pregnancy care, did you ever have to give any non-cash gifts to see the home visitor? (1) yes (2) no- <b>go to M14a</b><br><br>Lokacin da ma'aikacin sa kai ta/ya ziyarce ki a gida domin kulawa da lafiyar cikin ko kin ba ta/shi wata 'yar kyauta? (1) yes (2) no- <b>go to M14a</b> | _             |
|      | What non-cash gifts did you give? <b>(mark all that apply):</b><br><br>Wace irin kyauta ki ka bayar? <b>(mark all that apply)</b>  | (1) yes (2)no |
| M13e | Fuel: ManFetur   | _             |
| M13f | Food/livestock: Kayan abinci/dabbobi   | _             |
| M13g | Other gifts: Wata kyautar daban  | _             |

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|      | When you were pregnant that time, did you have the following at any time?<br>(enter yes or no; <b>verify with health card if available</b> )<br><br>A cikin ki na baya-bayan nanko akwai wani lokacin da akai maki daya da cikin wadan nan abubuwan?( <i>enter yes or no,verify with health card if available</i> ) | (1)yes (2)no |
| M14d | Was your weight measured? (1)yes (2)no<br>Angwada nauyin ki? (1)yes (2)no   | _            |
| M14f | Was your height measured? (1)yes (2)no<br>An gwada tsawonki? 1)yes (2)no  | _            |
| M14h | Did you receive information about breastfeeding your baby?(1)yes (2)no<br>Ko kin sami ilmantarwa gameda shayar da jaririn ki nono?  |              |
| M14j | Did you receive information about danger signs for newborns? (1)yes (2)no<br>Ko an ilmantar da ke game da alamomin hadurran da ke tattare da danyen goyo? 1)yes (2)no   | _            |
| M14l | Did you receive information about the things you need to prepare for your birth?<br>(1)yes (2)no<br>Ko an ilmantar da ke game da shirye-shiryen haihuwa?  | _            |
| M14n | Was your blood pressure tested(1)yes (2)no<br>(PROBE: when a strap was put around your upper arm and a measure taken)<br><br>Anyi maki awon bugawar jini(1)yes (2)no  | _            |
| M16  | Did you give a urine sample for a test<br>(1)yes (2)no<br>Anyi maki gwajin fitsari?<br>1)yes (2)no  | _            |
| M18  | Did you get information about babies getting HIV/AIDS from their mother?<br>(1)yes (2)no<br>Ko an ilmantar da ke game da daukar kwayar cutarKanjamaudaga uwa zuwa jariri?(1)yes (2)no   | _            |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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| M20  | Did you receive information about things that you can do to prevent getting the HIV/AIDS virus? (1)yes (2)no<br><i>Ko an ilmantar da ke tun da farko game da hanyoyin kare kan ki daga kamuwa da kwayar cutar Kanjamau (1)yes (2)no</i>                                 | <input type="checkbox"/> |
| M22  | Did you receive information about getting tested for the HIV/AIDS virus? (1)yes (2)no<br><i>Ko an ilmantar da ke game da gwajin kwayar cutar Kanjamau? (1)yes (2)no</i>   | <input type="checkbox"/> |
| M24  | Did you give blood for any test? (1)yes (2)no<br><i>Ko an debi jininki domin wani gwaji? (1)yes (2)no</i>   | <input type="checkbox"/> |
| M26  | Did you receive a test result for syphilis? (1)yes (2)no<br><i>Bana son ki fadi mani sakamakon, amma ko kin amshi sakamakon gwajin ciwon sanyi? (1)yes (2)no</i>  | <input type="checkbox"/> |
| M26a | Was the test result positive? (1)yes (2)no (3)don't know <b>If (2) or (3) skip to M27</b><br><i>Ko sakamakon gwajin ya nuna akwai cutar kanjamau? (1)yes (2)no (3)don't know If (2) or (3) skip to M27</i>  | <input type="checkbox"/> |
| M26b | Did you receive treatment for syphilis? (1)yes (2)no (3)don't know<br><i>Cin ko kin amshi maganin ciwon Tinjere?</i>  | <input type="checkbox"/> |
| M27  | I don't want to know the result, but did you receive a test result for HIV? (1)yes (2)no<br><i>Bana son ki fadi mani sakamakon, amma ko kin amshi sakamakon gwajin kwayar cutar Kanjamau? (1)yes (2)no</i>  | <input type="checkbox"/> |
| M28  | Did you receive advice about preparing for a safe birth? (1)yes (2)no<br><i>Ko an baki shawara game da daukar matakan haihuwa cikin koshin lafiya? (1)yes (2)no</i>   | <input type="checkbox"/> |
| M30  | Were you told things to look out for that might suggest problems with the pregnancy and delivery? (1)yes (2)no <b>if no skip to M32</b><br><i>Ko anfada ma ki abubuwan da zaki lura da su da ka iya nuna matsaloli yayin renon ciki? (1)yes (2)no if no skip to M32</i> | <input type="checkbox"/> |
|      | <b>If M30 is yes</b><br>What are all the places you got the information from?<br>Daga wanne wuri aka samu wadannan bayanar?<br><b>Ask each place from the list below.</b><br><br><b>If M30 is yes:</b>  |                          |
| M31a | From a community health worker in my own home<br><i>Daga wajen jami'in kiwon lafiya na wannan al'ummar a gida na</i>  | <input type="checkbox"/> |
| M31b | From a health staff in a health facility<br><i>Daga wajen kiwon lafiya a cibiyar kiwon lafiya ko asibiti</i>  | <input type="checkbox"/> |
| M31c | From a CHEW/CHO<br><i>Daga jami'in kiwon lafiya mai matsayin CHEW/CHO</i>   | <input type="checkbox"/> |
| M31d | From neighbours and relatives<br><i>Daga wawajen makwafu ko dangi</i>   | <input type="checkbox"/> |
| M31e | On the radio<br><i>Daga gidan rediyo</i>  | <input type="checkbox"/> |
| M31f | If radio, specify which programme<br><i>Idan daga gidan rediyo ne, a wanne shirin</i>   | <input type="checkbox"/> |
| M31g | From a sign in a shop/market place<br><i></i>   | <input type="checkbox"/> |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|      | Daga wata alama a shago ko kasuwa   |    |
| M31h | Other place or person<br>Daga wani wuri ko mutum  | __ |
| M32  | Did you receive medicine for intestinal worms?<br>(1)yes (2)no<br>Ko kin amshi maganin tsutsar ciki?<br>(1)yes (2)no  | __ |
| M34  | Did you receive medicine to prevent malaria?<br>(PROBE:medicine called <i>sulphadoxine pyrimethamine</i> ) <b>IF NO SKIP TO M37</b><br>Ko kin amshi maganin rigakafin zazzabin cizon sauro?<br>(PROBE:medicine called <i>sulphadoxine pyrimethamine</i> ) <b>IF NO SKIP TO M37</b>  | __ |
| M35  | <b>If M34 is yes:</b> How many doses of medicine to prevent malaria were you given?<br>(PROBE: How many times were you given the medicine?) <i>Write number of doses</i><br><b>If M34 is yes:</b> Kwayoyin magani nawa aka baki domin kariyar zazzabin cizon sauro?<br>(PROBE: How many times were you given the medicine?) <i>Write number of doses</i><br><i>Sau nawa aka baki maganin?</i> | __ |
| M36a | Were you tested for anaemia?<br>(1) yes (2) no (3) don't know<br>Ko anyi maki gwajin tabbatar da karancin jini?<br>1) yes (2) no (3) don't know   | __ |
| M37  | Did you receive iron tablets or iron syrup?<br>1) yes (2) no (3) don't know<br><b>IF NO SKIP TO M40</b><br>Ko kin amshi kwayoyin karin jini ko maganin karin jini na ruwa?<br><b>IF NO SKIP TO M40</b>  | __ |
| M38  | <b>If M37 is yes:</b> For how many days did you take the tablets or syrup?<br><i>Write number of days, or write 99 if doesn't remember</i><br><b>If M37 is yes:</b> Har kwana nawa kika yi kina shan maganin?<br><i>Write number of days, or write 99 if doesn't remember</i>   | __ |
| M39a | Did you receive misoprostol (the drug to stop women bleeding after birth)?<br>(1)yes (2)no (3)don't know<br>Ko kin amshi kwayar miso da ke hana mata zubar jini bayan haihuwa?<br>1)yes (2)no (3)don't know   | __ |
| M40  | Were you given an injection in the arm to prevent the baby from getting tetanus, that is, convulsions after birth? (1)yes (2)no (3)don't know<br><b>IF NO SKIP TO M43</b><br>Ko an yi miki allura a dantsen hannu domin kare jaririn ki daga cuta mai kawo sanderawa da taune-taune bayan haihuwa? (1)yes (2)no (3)don't know<br><b>IF NO SKIP TO M43</b>                                     | __ |
| M41  | <b>If yes:</b> How many times did you get a tetanus injection? ( <i>write number of times</i> )<br><b>IF 2 or more times SKIP TO M45</b><br><b>If yes:</b> Sau nawa aka yi maki allurar rigakafin kare jariri daga cutar sandarewa da taune-taune bayan haihuwa?<br><b>IF 2 or more times SKIP TO M45</b>   | __ |
| M42  | <b>If less than 2 times:</b> At any time before this pregnancy did you receive any tetanus injections? (1)yes (2)no - <b>SKIP TO M45</b><br><b>If less than 2 times:</b> Kafin samun wannan juna biyun, ko an taɓa maki allurar rigakafin kare jariri daga cutar sandarewa da taune-taune bayan haihuwa?<br>(1)yes (2)no - <b>SKIP TO M45</b>   | __ |
| M43  | <b>IF M40 WAS NO or M42 was yes</b> Before this pregnancy, how many times did you receive a tetanus injection? ( <i>write number of times; if zero skip to M45</i> )<br><b>IF M40 WAS NO or M42 was yes</b> Kafin samun wannan juna biyun, sau nawa   | __ |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|      | aka yi maki allurar rigakafin kare jariri daga cutar sandarewa da taune-taune bayan haihuwa? <i>if zero skip to M45)</i>   |  |
| M44  | <b>If M43 was &gt;0:</b> How many years ago did you receive the last tetanus injection before this pregnancy? <i>Write number of years ago</i><br><b>If M43 was &gt;0:</b> Kafin samun wannan juna biyun, kamar shekaru nawa kenan yanzu da akayi miki rigakafin kare jariri daga cutar sandarewa da taune-taune bayan haihuwa? <i>Write number of years ago</i>   | <input type="text"/>                         |
|      | Can you tell me what are the problems in pregnancy that might need medical treatment?<br><b>(do not read out the list, select all mentioned, probe – anything else)</b><br><br>Ko zaki iya fada mini matsolin renon ciki waɗanda ke bukatar jinya?<br><b>(do not read out the list, select all mentioned, probe – anything else)</b>   | (1)yes<br>(2)no                              |
| M45  | Severe headache: Ciwon kai mai tsanani   | <input type="text"/>                         |
| M45a | Dizziness : Jiri (Juwa)  | <input type="text"/>                         |
| M46  | Blurry vision: Rashin gani sosai   | <input type="text"/>                         |
| M47  | Reduced or absent fetal movement: Karanci ko rashin jin motsin 'da   | <input type="text"/>                         |
| M48  | High blood pressure: Hawan jini  | <input type="text"/>                         |
| M49  | Edema of the face/hands/legs( <b>Probe – swelling</b> ):<br>Kumburin fuska ko kafa ko hannu ( <b>Probe – swelling</b> ):   | <input type="text"/>                         |
| M50  | Convulsions: Jijiga ko taune-taune   | <input type="text"/>                         |
| M51  | Excessive vaginal bleeding: Zubad da jini mai yawa ta farji  | <input type="text"/>                         |
| M52  | Severe lower abdominal pain: Matsanancin ciwon mara  | <input type="text"/>                         |
| M53  | Anemia/Pallor/Pale Skin: Rashin isasshen jini/ fata ta yi fari   | <input type="text"/>                         |
| M54  | Fever: Zazzabi   | <input type="text"/>                         |
| M55  | Other: Wasu abubuwa daban  | <input type="text"/>                         |
| M56  | No problems in pregnancy mentioned   | <input type="text"/>                         |
| M57  | Do you know where to go if you have any pregnancy health complications?<br>(1)yes (2)no ( <b>go to M59</b> )<br><br>Ko kin san inda zaki nemi taimako idan kin fuskanci haɗurra da suka shafi juna biyu?(1)yes (2)no ( <b>go to M59</b> )  | <input type="text"/>                         |
| M58  | <b>If yes,</b> Where were should you go first? <b>Select one</b><br>(1) health facility (2) community health volunteer/worker (3) MNH call centre (4) traditional healer/herbalist (5) shop (6) other<br><br><b>If yes:</b> Ina ne zaki fara neman taimako da farko? <b>Select one</b><br>(1) health facility (2) community health volunteer (3) MNH call centre (4) traditional healer/herbalist (5) shop (6) other | <input type="text"/>                         |
| M59  | During your last pregnancy did you make any preparations for your delivery?<br>(1) yes (2) no<br><b>Probe for getting ready the things she would need to have a safe delivery, and to take care of herself at that time; ask first unprompted then ask again by prompting for each item;</b><br><br>Lokacin da kike da cikin baya-baya nan ,ko kin yi wasu shirye-shirye domin haihuwa?<br>(1) yes (2) no            | <input type="text"/>                         |
|      | What preparations did you make for the delivery?<br>Wanne shirin kika yi domin haihuwa?<br><br><b>FIRST UNPROMPTED: Do not read out the list, probe – anything else? – select all that apply</b><br><b>SECOND PROMT: read out the list and check the prompted response</b>   | Unprompted response<br><br>Prompted response |
| M60  | Money for the delivery: Tanadin kudi domin haihuwa   | <input type="text"/> <input type="text"/>    |



**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|              |  |   |
|--------------|--|---|
| M60a         |  |   |
| M61<br>M61a  | Transport: Tanadin abin hawa   | <input type="checkbox"/> <input type="checkbox"/> |
| M62<br>M62a  | Food: Tanadin abinci   | <input type="checkbox"/> <input type="checkbox"/> |
| M63<br>M63a  | Identification of birth attendant: Samun mai taimakawa wajen karbar haihuwa  | <input type="checkbox"/> <input type="checkbox"/> |
| M64<br>M64a  | Identification of facility: Gano asibitin da za'a je domin karbar haihuwa  | <input type="checkbox"/> <input type="checkbox"/> |
| M65<br>M65a  | Clean clothes: Tsabtattun kayan sawa   | <input type="checkbox"/> <input type="checkbox"/> |
| M66<br>M66a  | Cover to deliver on: Shimfida domin haihuwa  | <input type="checkbox"/> <input type="checkbox"/> |
| M67<br>M67a  | Gloves: Safar hannu  | <input type="checkbox"/> <input type="checkbox"/> |
| M67b<br>M67c | Antispectic/dettol: Sinadarai masu kashe kwayoyin cuta   | <input type="checkbox"/> <input type="checkbox"/> |
| M68<br>M68a  | Cotton gauze: Auduga da bandeji  | <input type="checkbox"/> <input type="checkbox"/> |
| M68b<br>M68c | Sanitary towels: Tsabtattun tawul  | <input type="checkbox"/> <input type="checkbox"/> |
| M68d<br>M68e | Razor or scissors: Reza ko almakashi   | <input type="checkbox"/> <input type="checkbox"/> |
| M68f<br>M68g | Bar of soap: Sandar sabulu   | <input type="checkbox"/> <input type="checkbox"/> |
| M69b         | Did you ever call the MNH call centre for advice during that pregnancy?<br>(1) yes (2) no<br><br><i>Ko kin taɓa tuntuɓar "cibiyar inganta rayuwar iyali (MNH Call Center)" ta wayar salula domin neman shawara lokacin renon wancan cikin?</i><br>(1) yes (2) no   | <input type="checkbox"/>                          |
| M69c         | Did you ever need to ask for transport in an emergency to take you to a facility because of an urgent health problem during that pregnancy?<br>(1) yes (2) no<br><br><i>Ko kin taɓa amfani da shirin sufurin gaggawa domin neman agaji lokacin renon waccan cikin? (1) yes (2) no</i>                          | <input type="checkbox"/>                          |
| M69d         | Who transported you to the facility for that health emergency?<br>(1) my family member; (2) my neighbour/friend; (3) taxi/paid driver; (4) emergency transport driver free of charge; (5) other<br><br><i>Wanene ya dauke ki zuwa cibiyar kiwon lafiya wancan lokacin domin kulawar kiwon lafiyar gaggawa?</i> | <input type="checkbox"/>                          |
| M69e         | <b>If M69d (5) other,</b><br><b>Explain who the driver was?</b><br><b>Yi bayanin ko wanene direban?</b>  |   |

Yanzu ina da wasu tambayoyi da zan yi maki gameda abinda ya faru lokacin daukar ciki na bayan haihuwa

|  |  |              |
|--|--|--------------|
|  | First, I want to ask you about the complications in a woman during childbirth that need medical treatment. Can you tell me what these might be?<br><b>Do not read out the list, select all mentioned, ask – anything else?</b><br><br>Da farko, Ina son in tambayeki gameda matsalolin da mace ke fuskanta lokacin haihuwa da zai bukaci kulawar Jami'in kiwon lafiya. Zaki iya fada mani ko su menene? <b>Don't read the list, select all mentioned, ask – anything else?</b> | (1)yes (2)no |
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**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

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|------|---|--|
| M70  | Excessive vaginal bleeding: Kwararar jini ta farji  | <input type="checkbox"/>   |
| M71  | Foul-smelling discharge: Zubar da ruwa mai wari ta farji  | <input type="checkbox"/>   |
| M72  | High fever: Zazzabi mai zafi  | <input type="checkbox"/>   |
| M73  | Baby's hand or feet come first: Fara fitowar hannu ko kafa yayin haihuwa  | <input type="checkbox"/>   |
| M74  | Baby in abnormal position: Kwanciyar da ba daidai ba  | <input type="checkbox"/>   |
| M75  | Prolonged labour >12 hours: Doguwar nakuda da tawuce sa'a 12  | <input type="checkbox"/>   |
| M76  | Retained placenta: Rashin fitar mabiyi a cikin lokaci (fiye da minti 30)  | <input type="checkbox"/>   |
| M77  | Ruptured uterus: Fashewar mahaifa   | <input type="checkbox"/>   |
| M78  | Prolapsed cord: Fara fitowar cibiya ko sarkewa  | <input type="checkbox"/>   |
| M79  | Cord around neck: Zargewar cibiya a wuya  | <input type="checkbox"/>   |
| M80  | Convulsions: Jijiga ko taune-taune  | <input type="checkbox"/>   |
| M81  | Other: Wani abun daban  | <input type="checkbox"/>   |
| M82  | Don't know any complications during childbirth: Ban san wani haɗari dangane da haihuwa ba   | <input type="checkbox"/>   |
| M82a | What gestation were you when you went into labour? <b>Probe for number of gestation weeks, ask whether she went into labour early or on time; check on health card if available; enter number of weeks or enter 99 if don't know</b><br><br>Watannincikin nawa ne, kafin kika fara nakuda?<br><b>Probe for number of gestation weeks, ask whether she went into labour early or on time; check on health card if available; enter number of weeks or enter 99 if don't know</b>   | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| M82b | Did anyone check your blood pressure when you were in labour?<br>(1)yes (2)no (3) don't know<br><br>Ko anyi miki awon bugun jini lokacin da kike nakuda?<br>(1)yes (2)no (3) don't know   | <input type="checkbox"/>   |
| M82c | Did anyone give you an injection because your labour had started too early?<br>(1)yes (2) no (3) don't know<br><br>Ko anyi miki wata allura domin nakudar ki ta fara da wuri (kafin sati 37 cikakku)?<br>(1)yes (2) no (3) don't know   | <input type="checkbox"/>   |
| M83  | Now about your delivery:<br>Yanzu sai game da haihuwar da kika yi:<br><br>Who assisted with the delivery? <b>Probe for most senior person present</b><br>(1)Doctor (2)Nurse/Midwife (3)CHEW/CHO (4) FOMWAN (5)Traditional birth attendant (6) Relative/friend (7)No-one ( <b>go to M85</b> ) (8) Other (specify)<br><br>Wa ya taimaka maki wajen haihuwar? <b>Probe for most senior person present</b><br>(1)Doctor (2)Nurse/Midwife (3)CHEW/CHO (4) FOMWAN (5)Traditional birth attendant (6) Relative/friend (7)No-one ( <b>go to M85</b> ) (8) Other (specify) | <input type="checkbox"/>   |
| M83a | Was anyone else present?<br>(1)yes (2)no – <b>go to M83c</b><br><br>Ko akwai wani kuma da yake wurin?<br>(1)yes (2)no – <b>go to M83c</b>   | <input type="checkbox"/>   |
| M83b | Who else was present at the delivery?<br>(1)Doctor (2)Nurse/Midwife (3)CHEW/CHO (4) FOMWAN (5)Traditional birth attendant (6) Relative/friend (7)No-one ( <b>go to M85</b> ) (8) Other (specify)<br><br>Wanene kuma yake wurin haihuwar?<br>(1)Doctor (2)Nurse/Midwife (3)CHEW/CHO (4) FOMWAN (5)Traditional birth attendant (6) Relative/friend (7)No-one ( <b>go to M85</b> ) (8) Other (specify)   | <input type="checkbox"/>   |
| M83c | Did you have to pay any cash/money to the person/people assisting you at delivery?<br>(1)yes (2)no – <b>go to M83e</b>  | <input type="checkbox"/>   |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|      | Ko sai da ki ka biya wani mutum ko mutane domin a taimaka maki yayin haihuwar?<br><i>1)yes (2)no – go to M83e</i>   |                          |
| M83d | How much cash/money did you pay? <i>Enter the amount in Naira</i><br><br>Har nawa kika biya? <i>Enter the amount in Naira</i>   | <input type="text"/>     |
| M83e | Did you have to give any non-cash gifts to the person/people assisting you at delivery?<br><i>(1)yes (2)no – go to M83i</i><br><br>Ko sai da ki kabada wata kyauta ga wani mutum ko mutane domin a taimaka maki yayin haihuwar?<br><i>(1)yes (2)no – go to M83i</i>   | <input type="text"/>     |
|      | What non-cash gifts did you give? <b>(mark all that apply)</b><br><br>Wacce irin kyauta kika bayar? <i>(mark all that apply)</i>  | <i>(1)yes (2)no</i>      |
| M83f | Fuel: Man Fetur   | <input type="checkbox"/> |
| M83g | Food/livestock: Kayan abinci/dabbobi  | <input type="checkbox"/> |
| M83h | Other gifts: Wata kyautar `daban  | <input type="checkbox"/> |
| M83i | When you gave birth, did the person assisting you wear gloves during delivery?<br><i>(1)yes (2)no, don't remember</i><br>Yayin karbar haihuwar, ko wanda ya/ta taimaka maki ya/ta sa safar hannu?<br><i>(1)yes (2)no, don't remember</i>  | <input type="checkbox"/> |
| M84  | When you gave birth, did the person assisting you wash hands with soap before the delivery?<br><i>(1)yes (2)no, (3)don't remember</i><br><br>Yayin karbar haihuwar, ko wanda ya taimaka maki ya/ta wanke hannu?<br><i>(1)yes (2)no, (3)don't remember</i>   | <input type="checkbox"/> |
| M84a | Immediately after you gave birth, did the person assisting you give you an injection or a drug to reduce your bleeding? <i>(1)yes (2)no (3)don't know</i><br><b>Probe: use names of the injection/drug (uterotonic, misoprostol etc), and show example of misoprostol packaging</b><br><br><i>Jim kadan bayar haihuwa ko wani ya taimaka miki da allura ko kwayoyin magani domin rage zubar jini?</i> | <input type="checkbox"/> |
|      | At any time during the birth, did the person assisting you ever do any of the following to you? <i>(1)yes (2)no</i><br><br><i>Ko akwai lokacin da wani ya taimaka miki da daya daga cikin wadannan yayin haihuwa?</i>   |                          |
| M84b | Shouted at you/spoke to you using harsh language <i>(Yi miki tsawa ko magana mai zafi)</i>  | <input type="checkbox"/> |
| M84c | Blamed you for what was happening <i>(Baki laifi kana bin da ke faruwa)</i>   | <input type="checkbox"/> |
| M84d | Threatened to hurt you <i>(Yi miki barazanar ji miki ciwo)</i>  | <input type="checkbox"/> |
| M84e | Threatened to not give you treatment <i>(Yi iki barazanar kin miki magani)</i>  | <input type="checkbox"/> |
| M84f | Beat/pinched/slapped you <i>(Duka, Minstini, ko Mari)</i>   | <input type="checkbox"/> |
| M84g | Tied you down <i>(Daure ki)</i>   | <input type="checkbox"/> |
| M84h | Request a bribe from you <i>(Ya/ta tambayeki cin hanci)</i>   | <input type="checkbox"/> |
| M85  | Where did you give birth?<br><i>(1)home –skip to M88a(2)primary health facility (3) hospital(secondary level care)(4)other (specify)</i><br><br>A wane wuri kika haihu?<br><i>(1)home –skip to M88a(2)primary health facility (3) hospital(secondary level care)(4)other (specify)</i>  | <input type="text"/>     |
| M85a | Specify: Ambata   | <input type="text"/>     |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|      |  |                          |
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| M85b | <b>All women who delivered in a facility</b><br>What was the name of the facility you gave birth in?<br><i>Menene sunan asibitin da kika haihu?</i><br><i>Enter name of facility</i>   | <input type="text"/>     |
| M85c | <b>All women who delivered in a facility</b><br>What LGA is that facility in?<br><i>A wane karamar hukuma asibitin yake?</i><br><i>Enter name of LGA</i>   | <input type="text"/>     |
|      | Did anyone specifically advise you to go to the health facility for delivery?<br><i>Ko akwai wani wanda ya baki shawara ta musamman domin zuwa wannan asibiti domin haihuwa?</i><br>(1)yes (2)no <b>Ask for each of the following</b>  |                          |
| M85d | My family member told me ( <i>Wani daga cikin 'yan uwai</i> )  | <input type="checkbox"/> |
| M85e | My neighbour/friend told me ( <i>Wani daga cikin makwabci</i> )  | <input type="checkbox"/> |
| M85f | I heard it on a radio programme ( <i>Naji daga shirin gida rediyo</i> )  | <input type="checkbox"/> |
| M85g | I heard it on a TV programme ( <i>Naji daga shirin gida telebishon</i> )   | <input type="checkbox"/> |
| M85h | A community health worker told me ( <i>Naji daga jami'in kiwon Lafiya na al'umma</i> )   | <input type="checkbox"/> |
| M85i | None of these ( <i>ba daya daga cikin dalilan da suka gababata</i> )   | <input type="checkbox"/> |
| M86  | <b>If (2)(3)(4) - After giving birth, for how many nights did you stay at the health facility in total?</b><br><i>Enter number of nights she spent at the facility after the birth</i><br><br><b>If (2)(3)(4) - Bayan kin haihu, jimillar kwana nawa kika yi a asibitin kafin sallama?</b><br><i>Enter number of nights she spent at the facility after the birth</i>  | <input type="text"/>     |
|      | <b>When you left the facility, did you have the following items?</b>   |                          |
| M86a | Sanitary pad to catch your bleeding? ( <i>Audugar mata ta tare zubar jini</i> )  | <input type="checkbox"/> |
| M86b | Cord clamp had been put on baby cord? ( <i>Abin daure cibiyar jariri</i> )   | <input type="checkbox"/> |
| M86a | What means of transport did you use to reach the health facility to give birth?<br><b>Select one</b><br><br>(1) walked (2)bicycle (3)own motorised transport (4)emergency transport scheme (5)community member gave transport (6)other(7)donkey/horse cart<br><br>Wace irin hanyar sufuri kika yi amfani da ita? <b>Select one</b><br>(1 )walked (2)bicycle (3)own motorised transport (4)emergency transport scheme (5)community member gave transport (6)other | <input type="checkbox"/> |
|      | Who accompanied you? <b>Do not read out the list, select all mentioned, probe – anyone else</b><br><br>Waye ne ya raka ki? <b>Do not read out the list, select all mentioned, probe – anyone else</b>  |                          |
| M86b | No-one<br>Ba wanda ya raka ni  | <input type="checkbox"/> |
| M86c | My husband<br>Mijina   | <input type="checkbox"/> |
| M86d | A female relative or friend<br>'Yar uwa ko abokiya   | <input type="checkbox"/> |
| M86e | A male relative or friend (not husband)<br>Dan uwa ko aboki (ba miji ba)   | <input type="checkbox"/> |
| M86f | A community volunteer: Mai aikin sa kai na al'umma   | <input type="checkbox"/> |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|        |   |                          |
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| M86f-i | Which type of community volunteer (Wane irin Mai aikin sa kai na al'umma ne?)<br>(1) TBA (2) Village Health worker (3) FOMWAN (4) Patent Medicine vendor  | <input type="checkbox"/> |
| M86g   | Other person: Wani mutum daban  | <input type="checkbox"/> |
| M87    | Was [NAME] delivered by caesarean, that is, did they cut your belly open to take the baby out? (1)yes (2)no<br><br>Ko an haifi [NAME] ta hanyar tiyata ne, wato an buɗe cikin ki aka ciro shi/ta? (1)yes (2)no  | <input type="checkbox"/> |
|        | <b>ALL:</b> During the delivery of [NAME] did you experience any of the following?<br><b>Read out the list, select all that apply.</b><br><br><b>ALL:</b> Lokacin haihuwar [NAME] ko kin yi fama da ɗaya daga cikin waɗannan abubuwan?<br><b>Read out the list, select all that apply</b>   | (1)yes (2)no             |
| M88a   | Heavy bleeding: Zubarda jini mai tsanani  | <input type="checkbox"/> |
| M88b   | Labour more than 12 hours: Nakudar da ta wuce awa 12  | <input type="checkbox"/> |
| M88c   | Loss of consciousness: Suma   | <input type="checkbox"/> |
| M88d   | Premature labour: Nakuda kafin cikan watannin haihuwa (wato sati 37 zuwa sama)  | <input type="checkbox"/> |
| M88e   | Foul discharge: Zubar da ruwa mai wari ta farji   | <input type="checkbox"/> |
| M88f   | Baby in abnormal position: Kwanciyar ɗa ba daidai ba  | <input type="checkbox"/> |
| M88g   | Other: Wani abun daban  | <input type="checkbox"/> |
| M88h   | None of these: Ba daya daga cikin waɗannan da aka ambata a sama   | <input type="checkbox"/> |
| M89    | During delivery were you advised to go to a facility to get special care (a health facility if it was a home birth, a different facility if it was a health facility birth)?<br>(1)yes (2)no— <b>SKIP TO M93</b><br><br>A lokacin haihuwa ko an baki shawarar da ki je asibiti domin samun kulawa ta musamman(Zuwa asibiti idan haihuwar gidace, daga asibiti zuwa wani asibitin daban idan haihuwar asibiti ce)<br>(1)yes (2)no— <b>SKIP TO M93</b>  | <input type="checkbox"/> |
| M90    | <b>If yes:</b> Did you go to that different facility to get the special care (referral)?<br>(1)yes ( <b>go to M92</b> ) (2)no( <b>go to M91</b> )<br><br><b>If yes:</b> Ko kin je asibitin da aka turakin ne, domin samun kulawa ta musamman?<br>(1)yes ( <b>go to M92</b> ) (2)no( <b>go to M91</b> )  | <input type="checkbox"/> |
| M91    | <b>If no:</b> Why not? <b>Probe for the most important reason and select one. Now go to M93</b><br>(1)facility was too far (2)cost too much money (3)don't like going to different facility (4)no permission to go (5)other<br><br><b>If no:</b> Meƴe dalilin rashin karɓar shawarar zuwa wani asibiti domin samun kulawa ta musamman?? <b>Probe for the most important reason and select one. Now go to M93</b><br>1)facility was too far (2)cost too much money (3)don't like going to different facility (4)no permission to go (5)other | <input type="checkbox"/> |
| M92a   | <b>If M90 = yes:</b> What was the different facility that you went to?<br>(1) I went from home to a PHC; (2) I went from home to a hospital; (3) I went from home to a private/other facility; (4) I went from PHC to a hospital; (5) I went from hospital to another hospital; (6) Other   | <input type="checkbox"/> |
| M92    | <b>If M90 = yes:</b> What transport did you take to get there? (1)own transport (2)public transport (3)hired transport (4)district/ambulance (5) bike (6) walked (7) emergency transport scheme (8) donkey/horse cart<br><br><b>If M90 = yes:</b> Wane irin abin sufuri kika yi amfani dashi domin zuwa asibitin don samun kulawa ta musamman?<br>(1)own transport (2)public transport (3)hired transport (4)district/ambulance (5) bike (6) walked (7) emergency transport scheme  | <input type="checkbox"/> |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

|      |   |                          |
|------|---|--------------------------|
| M93  | <p><b>All:</b> Did you ever call the MNH call centre for advice during that labour?<br/>(1)yes (2)no</p> <p><b>All:</b>Ko kin taba tuntubar “cibiyar inganta rayuwar iyali (MNH Call Center)” ta wayar salula domin shawara lokacin nakuda?<br/>(1)yes (2)no</p>  | <input type="checkbox"/> |
| M94  | <p>Did you ever use the emergency transport scheme for help during that labour?<br/>(1)yes (2)no – <b>go to M98</b></p> <p>Ko kin taba amfani da shirin sufurin gaggawadomin neman taimakolokacin nakuda?<br/>(1)yes (2)no – <b>go to M98</b></p>   | <input type="checkbox"/> |
| M94a | <p>Who transported you to the facility for that health emergency?<br/>(1) my family member; (2) my neighbour/friend; (3) taxi/paid driver; (4) emergency transport driver free of charge; (5) other</p>   | <input type="checkbox"/> |
| M94b | <p><b>If M69d (5) other,</b><br/><b>Explain who the driver was</b></p>  |                          |
|      | Now I want to ask you about any post-natal health checks you had after the birth  |                          |
| M98  | <p>In the first month after birth, did anyone check on your health? <b>Probe for health checks sometime after birth, not during the delivery</b><br/>(1)yes (2)no – <b>SKIP TO M111</b></p> <p>Cikin watan farko bayan haihuwar ki, ko akwai wanda ya duba lafiyar ki? <b>Probe for health checks sometime after birth, not during the delivery</b><br/>1)yes (2)no – <b>SKIP TO M111</b></p>   | <input type="checkbox"/> |
| M99  | <p>How many times did anyone check on your health in the first month after delivery? <i>Write number</i></p> <p>Kamar sau nawa wani ya duba lafiyarki a cikin watan farko bayan haihuwa?<br/><i>Write number</i></p>  | <input type="checkbox"/> |
| M100 | <p>How many days after delivery did the first check take place?<br/><i>Record number of days; if same day as delivery enter 0</i></p> <p>Bayan haihuwa, tsawon wane lokaci aka dauka kafin wani ya duba ki?<br/><i>Record number of days; if same day as delivery enter 0</i></p>   | <input type="checkbox"/> |
| M101 | <p>Who checked on your health for the first time after you gave birth to [NAME]?<br/><b>Probe for most qualified person, select one</b><br/>(1)Doctor (2)Nurse/Midwife (3)CHEW/CHO (4) FOMWAN (5)Traditional birth attendant (6) Relative/friend (7)Others<br/>Bayan haihuwar [NAME] wane jami'in lafiya ne ya fara duba lafiyarki?<br/><b>Probe for most qualified person, select one</b><br/><br/>((1)Doctor (2)Nurse/Midwife (3)CHEW/CHO (4) FOMWAN (5)Traditional birth attendant (6) Relative/friend (7)Others</p> | <input type="checkbox"/> |
| M102 | <p>Where did this check take place?<br/>(1)own home (2)health facility</p> <p>A wane wuri ne aka duba ki?<br/>(1)own home (2)health facility</p>  | <input type="checkbox"/> |
| M103 | <p><b>If her health was checked at least twice (see M99)</b><br/>How long after delivery did the second check take place?<b>Record number of days</b></p> <p><b>If her health was checked at least twice (see M99)</b></p> <p>Bayan haihuwar,, tsawon wane lokaci ne Jami'an kiwon lafiya suka duba ki na biyu?<b>Record number of days</b></p>   | <input type="checkbox"/> |
|      | During any of the health checks what was done to check on your health?  | (1)yes (2)no             |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|        |   |                          |
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|        | <p><b>Do not read out the list, probe anything else? Mark all that apply</b></p> <p>Bayan kin haihu, a kowane karo wane irin bincikene a kayi miki domin duba lafiyarki?</p> <p><b>Do not read out the list, probe anything else? Mark all that apply</b></p>   |                          |
| M104a  | Examined body: Bincika lafiyar jiki gaba daya   | <input type="checkbox"/> |
| M104b  | Checked breasts: Bincika lafiyar nono (mama)  | <input type="checkbox"/> |
| M104c  | Checked for heavy bleeding: Bincika akan zubar jini mai yawa daga farji   | <input type="checkbox"/> |
| M104d  | Counselled on danger signs: Shawara akan alamomin haɗurran da ke tattare da juna biyu   | <input type="checkbox"/> |
| M104e  | Counselled on family planning: Shawara akan tazarar haihuwa   | <input type="checkbox"/> |
| M104f  | Counselled on nutrition: Shawara akan abinci mai gina jiki  | <input type="checkbox"/> |
| M104g  | Referred to a health facility: Turawa zuwa asibiti  | <input type="checkbox"/> |
| M104h  | None of these: Babu ko daya daga cikin wadannan da aka ambata a sama  | <input type="checkbox"/> |
| M105   | <p>The last time your health was checked after the birth, how many minutes did the health worker/volunteer spend checking you?</p> <p><i>Enter number of minutes, e.g. if half an hour enter 30, if 1 hour and 30 minutes enter 90</i></p> <p>Bayan kin haihu, wane tsawon lokaci ne jami'in kiwon lafiya ko ma'aikacin sa kai ya/ta dauka domin binciken lafiyar ki a ziyararki ta baya-bayan nan?</p> <p><i>Enter number of minutes, e.g. if half an hour enter 30, if 1 hour and 30 minutes enter 90</i></p> | <input type="text"/>     |
| M106   | <p>When your health was checked on after the birth, did you ever have to pay any cash to the person doing the health check? (1)yes (2)no - <b>go to M108</b></p> <p>Ko kin biya jami'in kiwon lafiya ko ma'aikacin sa kai domin duba lafiyar ki bayan kin haihu?</p> <p>(1)yes (2)no - <b>go to M108</b></p>  | <input type="checkbox"/> |
| M107   | <p>How much cash did you have to pay to the health worker or volunteer for your health checks after birth in total? <b>Enter the amount in Naira</b></p> <p>Jimlar kudi nawa ki ka biya jami'in kiwon lafiya ko ma'aikacin sa kai domin duba lafiyar ki bayan kin haihu? <b>Enter the amount in Naira</b></p>   | <input type="text"/>     |
| M108   | <p>When your health was checked on after birth, did you ever have to give any non-cash gifts to the health worker or volunteer? (1)yes (2)no- <b>go to M109</b></p> <p>Ko kin bawa jami'in kiwon lafiya ko ma'aikacin sa kai wata kyauta domin duba lafiyar ki bayan kin haihu? (1)yes (2)no- <b>go to M109</b></p>   | <input type="checkbox"/> |
|        | <p>What non-cash gifts did you give? (<b>mark all that apply</b>)</p> <p>Menene kika bayar?(<b>mark all that apply</b>)</p>   | (1)yes (2)no             |
| M108a  | Fuel: Man Fetur   | <input type="checkbox"/> |
| M108b  | Food/livestock: Kayan abinci/dabbobi  | <input type="checkbox"/> |
| M108c  | Other gifts: Wasu abubuwan daban  | <input type="checkbox"/> |
| M109   | <p>Did you ever call the MNH call centre for advice about your health after the delivery?(1)yes (2)no</p> <p>Ko kin taba tuntubar "cibiyar inganta rayuwar iyali (MNH Call Center)" ta wayar salula domin neman shawara bayan kin haihu?(1)yes (2)no</p>  | <input type="checkbox"/> |
| M110a  | <p>Have you ever used the emergency transport scheme for help for yourself or your baby after the delivery?(1)yes (2)no - <b>go to M110d</b></p> <p>Ko kin taba amfani da shirin sufurin gaggawa domin neman taimako ma kan ki ko na jaririn ki bayan kin haihu?(1)yes (2)no - <b>go to M110d</b></p>   | <input type="checkbox"/> |
| M110b1 | <p>Who transported you or your baby to the facility for that health emergency?</p> <p>(1) my family member; (2) my neighbour/friend; (3) taxi/paid driver; (4) emergency transport driver free of charge; (5) other</p>   | <input type="text"/>     |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|        | <p>Wanene ya taimaka maki/ko yaron ki da sufurin gaggawa?</p> <p>(1) my family member; (2) my neighbour/friend; (3) taxi/paid driver; (4) emergency transport driver free of charge; (5) other</p> |  |
| M110b2 | <p><b>If M69d (5) other,</b></p> <p><b>Explain who the driver was</b></p> <p>In ba daya daga cikin 1-4 wanene direban?</p>   |  |

Now I have some questions about what happened to [NAME] at the birth and immediately after.

Yanzu ina da tambayoyi gameda abinda ya faru da [NAME]a lokacin haihuwa da kuma jim kadan bayan haihuwa.

|       |   |                          |
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|       | <p>First, I want to ask you about the complications for a newborn that might need medical treatment. Can you tell me what these might be?<br/><b>Do not read out the list, select all mentioned, 'ask – anything else?'</b></p> <p>Ko za ki iya gaya mun hadfuran da ka iya samun jariri wadan da ke bukatar taimakon gaggawa?<b>Do not read out the list, select all mentioned, 'ask – anything else?'</b></p> | (1)yes (2)no             |
| M110d | Fever: Zazzabin   | <input type="checkbox"/> |
| M110e | Unable to suckle/feed: Kin tsotson nonon uwa/ ko cin abinci   | <input type="checkbox"/> |
| M110f | Difficult/fast breathing: Shessheka   | <input type="checkbox"/> |
| M110g | Diarrhea: Gudawa  | <input type="checkbox"/> |
| M110h | Convulsions: Jijjiga da Taune-taune   | <input type="checkbox"/> |
| M110i | Persistent vomiting: Yin amai ko da yausha  | <input type="checkbox"/> |
| M110j | Yellow palms/soles/eyes: Canjawa kalar tafi hannu, tafi kafa da idanu zuwa ruwan dorawa   | <input type="checkbox"/> |
| M110k | Lethargy: Mutuwar jiki da Kasala  | <input type="checkbox"/> |
| M110l | Unconscious: Suma   | <input type="checkbox"/> |
| M110m | Red/discharging eyes: Jan idanu masu fidda ruwa   | <input type="checkbox"/> |
| M110n | Skin pustules: Marurai  | <input type="checkbox"/> |
| M110o | Skin around cord was red: Fatar zagayen cibiya ta yi ja   | <input type="checkbox"/> |
| M110p | Pus from cord: Fitar diwa daga cibi   | <input type="checkbox"/> |
| M110q | Born low birth weight: An haife shida rashin cikakken nauyi   | <input type="checkbox"/> |
| M110r | Born premature: Haihuwa kafin cikar lokaci (kafin sati 37)  | <input type="checkbox"/> |
| M110s | Infection: Kamuwa da kwayar cuta  | <input type="checkbox"/> |
| M110t | Other: Wani abu daban da ba a ambata ba   | <input type="checkbox"/> |
| M110u | None of these: Ba kodaya daga ciki  | <input type="checkbox"/> |
| M111  | <p>Can I see a card recording information about the birth?<br/>(1)yes (2)no , not available (3) no, refused permission<br/><b>Interviewer – use the card to verify all information if possible</b></p> <p>Zan iya ganin katin da ke dauke da bayanai haihuwar?<br/>(1)yes (2)no , not available (3) no, refused permission<br/><b>Interviewer – use the card to verify all information if possible</b></p>      | <input type="checkbox"/> |
| M112  | <p>Was [NAME] weighed at birth?<br/>(1)yes (2)no – <b>SKIP TO M114</b></p> <p>Ko an gwada nauyin [NAME] bayan haihuwa?<br/>(1)yes (2)no – <b>SKIP TO M114</b></p>   | <input type="checkbox"/> |
| M113  | <p><b>If yes:</b> How much did [NAME] weigh at birth?<br/>(enter weight in grammes)<b>e.g. if the weight was 1.9 kilogrammes enter 1900; don't know write 9999;use the weight recorded on</b></p>   | <input type="text"/>     |



**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|       | <p><b>the card if possible)</b></p> <p><b>If yes:</b> Nawa ne nauyin [NAME] bayan haihuwa?<br/>(enter weight in grammes) <b>e.g. if the weight was 1.9 kilogrammes enter 1900; don't know write 9999; use the weight recorded on the card if possible)</b></p>   |                          |
| M114  | <p>Did [NAME] have any difficulty breathing/crying at birth?<br/>(1)yes (2)no (3)don't know – <b>skip to M116</b></p> <p>Ko[NAME] ya samu matsalar shessheka ko rashin yin kuka bayan haihuwar sa/ta? (1)yes (2)no – <b>skip to M116</b></p>   | <input type="checkbox"/> |
|       | <p>Did anyone do any of the following to [NAME] immediately at birth? <b>Read out the list, select all that apply</b></p> <p>Ko akwai wanda yayi wa [NAME] daya daga cikin wadannan abubuwan jim kadan bayan haihuwar sa/ta? <b>Read out the list, select all that apply</b></p>   |                          |
| M115a | Rubbing : Shafawa  | <input type="checkbox"/> |
| M115b | Stimulating :Chakulkuli  | <input type="checkbox"/> |
| M115c | Mouth-to-mouth : Bada numfashi baki da baki  | <input type="checkbox"/> |
| M115d | Resuscitation using a bag and mask/equipment: Farfado da shi/ita   | <input type="checkbox"/> |
| M115e | Don't know: Ban sani ba  | <input type="checkbox"/> |
| M116  | <p>Where was [NAME] placed immediately after delivery? <b>Select one</b><br/>(1)alone/on the floor; (2)on the mother's belly/chest (3)beside the mother; (4) with someone else; (5)other; (6) don't know</p> <p>Ko a ina aka ajiye [NAME] jim kadan bayan haihuwar sa/ta?<br/><b>Select one</b><br/>(1)shi kadai/kan siminti; (2)Kan cikin uwa ko kirji(3)Gefen uwar; (4) Da wani ko wata daban; (5)Wani/watar; (6) Baki sani ba</p> | <input type="checkbox"/> |
| M116a | <p>After the birth, was [NAME] placed on the bare skin of your chest for any time before you were moved from the birth place?<br/>(1)yes (2)no (3) don't know</p> <p>Jim kadan bayan haihuwa, ko an dora [NAME] a kirjinki na wani tsawon lokaci?(1)yes (2)no (3) don't know</p>   | <input type="checkbox"/> |
| M117  | <p>When [NAME] was born, was she/he dried/wiped?<br/>(1)yes (2)no (3)don't know <b>(2 and 3 skip to M119)</b></p> <p>Ko an tsane ko kuma goge[NAME] jim kadan bayan haihuwa?<br/>(1)yes (2)no (3)don't know <b>(2 and 3 skip to M119)</b></p>  | <input type="checkbox"/> |
| M118  | <p>How long after [NAME] was born was she/he dried/wiped? (Enter in minutes) <b>Check for time after the baby was born, not time after the placenta came out</b></p> <p>Tsawon wane lokaci a ka dauka kafin a tsane ko kuma goge [NAME] bayan haihuwa?<br/>(Enter in minutes) <b>Check for time after the baby was born, not time after the placenta came out</b></p>  | <input type="text"/>     |
| M119  | <p>When [NAME] was born, was she/he wrapped with a cloth?<br/>(1)yes (2)no (3)don't know <b>(2 and 3 skip to M121)</b></p> <p>Lokacin da aka haifi [NAME], an kundundune shi da zani?<br/>(1)yes (2)no (3)don't know <b>(2 and 3 skip to M121)</b></p>   |                          |
| M120  | <p>How long after [NAME] was born was she/he wrapped with a cloth? (Enter in minutes) <b>Check for time after the baby was born, not time after the placenta came out</b></p> <p>Tsawon wane lokaci a ka dauka kafin a kundundune [NAME] bayan haihuwa? Enter in minutes) <b>Check for time after the baby was</b></p>   | <input type="text"/>     |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|       | <b>born, not time after the placenta came out</b>  |                      |
| M121  | <p>What was used to tie the cord?<br/>(1)new string/thread (2)boiled string/thread (3)any string/thread<br/>(4)nothing (5)don't know (6)cord clamp from facility (7)other</p> <p>Da me aka daure cibiyar?<br/>(1)new string/thread (2)boiled string/thread (3)any string/thread<br/>(4)nothing (5)don't know (6)cord clamp from facility (7)other</p>  | <input type="text"/> |
| M122  | <p>What was used to cut the cord?<br/>(1)new razor blade (2)any razor blade (3)sterile scissors (4)don't know<br/>(5)other</p> <p>Da me aka yanke cibiyar?<br/>(1)new razor blade (2)any razor blade (3)sterile scissors (4)don't know<br/>(5)other</p>  | <input type="text"/> |
| M123  | <p>Was anything applied to the cord after cutting and tying?<br/>(1)yes (2)no (3)don't know – <b>(2) and (3) skip to M125</b></p> <p>Akwai abinda aka shafa wa cibiyar bayan an yanke an daure?<br/>1)yes (2)no (3)don't know – <b>skip to M125</b></p>  | <input type="text"/> |
|       | <p>What was applied to the cord just after cutting the cord?<br/><b>Do not prompt, select all that apply, ask whether there was anything else</b></p> <p>Me aka shafa ma cibin bayan an yanke an daure?<br/><b>Do not prompt, select all that apply, ask whether there was anything else</b></p>   | (1)yes (2)no         |
| M124a | Ash : Toka   | <input type="text"/> |
| M124b | Ointment: Daskararren mai  | <input type="text"/> |
| M124c | Animal dung: Kashin dabbobi  | <input type="text"/> |
| M124d | Oil: Mai   | <input type="text"/> |
| M124e | Antisepctic/dettol: Sinadarin kashe kwayoyin cuta  | <input type="text"/> |
| M124f | Cold water: Ruwan sanyi  | <input type="text"/> |
| M124g | Other : Wani abin  | <input type="text"/> |
| M124h | Chlorhexidine: Sinadarin Kulohezidin   | <input type="text"/> |
| M124i | <p>Can I check, was chlorhexidine applied to the cord? (1)yes (2)no</p> <p>Ko zan duba ansa sinadarin chlorhexidine a cibiyar? (1)yes (2)no<br/><b>Prompt and show a sample of chlorhexidine to mothers to verify</b></p>  | <input type="text"/> |
| M125  | <p>When [NAME] was born, how soon did you bathe him/her?<br/>(1)in the first hour –<b>CONTINUE TO M126</b><br/>(2)after one hour-<b>SKIP TO M127</b><br/>(3)after one day – <b>SKIP TO M128</b></p> <p>Tsawon wane lokaci aka dauka kafin yi wa[NAME] wanka bayan an haife shi/ta?<br/>1)in the first hour –<b>CONTINUE TO M126</b><br/>(2)after one hour-<b>SKIP TO M127</b><br/>(3)after one day – <b>SKIP TO M128</b></p> | <input type="text"/> |
| M126  | <p><b>If in the first hour:</b>After how many minutes would you say? (write number of minutes, enter 99 if don't know)<br/><b>Now go to M129</b></p> <p><b>If in the first hour:</b>A ganin ki bayan minti nawa aka yi ma sa/ta?<br/>(write number of minutes, enter 99 if don't know)</p>   | <input type="text"/> |
| M127  | <p><b>If after one hour:</b> After how many hours would you say? (write number of hours; e.g. if response is 'after one hour' enter 1, if response is 'after one and a half hours' enter 1, enter 99 if don't</p>  | <input type="text"/> |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|      | <p>know) <span style="float: right;"><b>Now go to M129</b></span></p> <p><b>If after one hour:</b> A ganin ki bayan awa nawa da haihuwar [NAME] aka yi ma sa/ta wanka?</p> <p><i>(write number of hours; e.g. if response is 'after one hour' enter 1, if response is 'after one and a half hours' enter 1, enter 99 if don't know)</i></p> <p style="text-align: right;"><b>Now go to M129</b></p>  |                      |
| M128 | <p><b>If after one day:</b> After how many days would you say? <i>(write number of days; e.g. if response is 'after one day' enter 1, if response is 'after one and a half days' enter 1)</i></p> <p><b>If after one day:</b> A ganin ki bayan kwana nawa da haihuwar [NAME] aka yi ma sa/ta wanka?</p> <p><i>(write number of days; e.g. if response is 'after one day' enter 1, if response is 'after one and a half days' enter 1)</i></p>  |                      |
| M129 | <p>In the first week of life, did you hold [NAME] skin to skin against your breasts during the daytime and nighttime?<br/><i>(1)yes always (2)yes very often (3)yes a few times (4)never (5)don't know</i></p> <p>A satin farko bayan haihuwar [NAME], ko kin dora shi/ta a kirjin ki da ranada dare?<br/><i>(1)yes always (2)yes very often (3)yes a few times (4)never (5)don't know</i></p>   | <input type="text"/> |
| M130 | <p>In the first week of life, did you sleep with [NAME] against you at night, or did you lay him/her alone on the bed or elsewhere?<br/><i>(1)slept with mother (2)baby slept alone (3) baby slept with another person</i></p> <p>Ko [NAME] a jikinki yake kwanciya a satin farko bayan haihuwa, ko dai shi/ita kadai ke kwana can gefe guda?<br/><i>(1)slept with mother (2)baby slept alone (3) baby slept with another person</i></p>   | <input type="text"/> |
| M131 | <p>Did you ever breastfeed [NAME]?<br/><i>(1)Yes (2)No – <b>SKIP TO M138</b></i></p> <p>Ko kin taba shayar da [NAME] nonon ki?<br/><i>(1)Yes (2)No – <b>SKIP TO M138</b></i></p>   | <input type="text"/> |
| M132 | <p>How long after birth did you first put [NAME] to the breast (even if the milk was not yet ready)?<br/><i>(1)in the first hour-<b>CONTINUE TO M133</b></i><br/><i>(2)after one hour but during the first day-<b>GO TO M134</b></i><br/><i>(3)after the first day of life-<b>GOTO M135</b></i></p> <p>Bayan haihuwar [NAME], tsawon wane lokaci kika dauka kafin kika sa shi/ta a nono koda ace ba ruwan nono?<br/><i>(1)in the first hour-<b>CONTINUE TO M133</b></i><br/><i>(2)after one hour but during the first day-<b>GO TO M134</b></i><br/><i>(3)after the first day of life-<b>GOTO M135</b></i></p> | <input type="text"/> |
| M133 | <p><b>If in the first hour:</b> After how many minutes would you say? <i>(write number of minutes, enter 99 if don't know)</i></p> <p><b>Now go to M136</b></p> <p><b>If in the first hour:</b> Bayan minti nawa da haihuwar sa/ta zaki iya cewa kin sa shi/ta a nono? <i>(write number of minutes, enter 99 if don't know)</i></p>  | <input type="text"/> |
| M134 | <p><b>If after one hour but during the first day:</b> After how many hours</p>   | <input type="text"/> |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

|       |  |                      |
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|       | <p>would you say?<br/>(write number of hours, enter 99 if don't know)<b>e.g. if response is 'after one hour' enter 1, if response is 'after one and a half hours' enter 1; if response is 'after two and a half hours' enter 2. Now go to M136</b></p> <p><b>If after one hour but during the first day:</b> Bayan sa'a (awa) nawa da haihuwar, zaki iya cewa kin sa shi/ta a nono?<br/>(write number of hours, enter 99 if don't know)<b>e.g. if response is 'after one hour' enter 1, if response is 'after one and a half hours' enter 1; if response is 'after two and a half hours' enter 2. Now go to M136</b></p> |                      |
| M135  | <p><b>If after the first day of life:</b>After how many days did you first put [NAME] to the breast?<br/><i>Enter number of days</i></p> <p><b>If after the first day of life:</b> Bayan kwana nawa da haihuwar zaki iya cewa kin sa shi/ta a nono? <i>Enter number of days</i></p>  | <input type="text"/> |
| M136  | <p>Did you squeeze out and throw away the first milk?<br/>(1)yes (2)no</p> <p>Ko kin tatse ruwan nonon farko (Kandi) don zubar wa?<br/>(1)yes (2)no</p>  | <input type="text"/> |
| M137  | <p>In the first three days after delivery, was [NAME] given anything to drink other than breast milk?<br/>(1)yes (2)no</p> <p>A cikin kwana uku na farko bayan haihuwa, ko an shayar da [NAME] wani abu da ba nonon uwa ba?<br/>(1)yes (2)no</p>   | <input type="text"/> |
|       | <p>Can I check, Did you give any of the following things in the first three days of life?<b>Read out the list and select all mentioned</b></p> <p><i>Zan iya dubawa, ko ka/kin bayar da daya daga cikin wadannan abubuwan bayan kwana ukku da haihuwa?</i><br/><b>Read out the list and select all mentioned</b></p>   |                      |
| M137a | Other type of milk: Wata irin madara da ba nonon uwa ba  | <input type="text"/> |
| M137b | Plain water: Bakin ruwa  | <input type="text"/> |
| M137c | Sugar/glucose/salt water solution: ruwan sukari, gulukos ko ruwan gishiri  | <input type="text"/> |
| M137d | Juice: Ruwan 'ya'yan itace   | <input type="text"/> |
| M137e | Tea/infusions: Ruwan shayi ko Ji'ko/Tsumi  | <input type="text"/> |
| M137f | Others: Wani abin daban da ba'a ambata ba  | <input type="text"/> |
| M137g | None of these: Babu daya daga cikin wadanda aka amabata a sama   | <input type="text"/> |
| M137h | <p>Is [NAME] still being breastfed? (1)yes, (2)no (3) child no longer alive - <b>skip to M138</b></p> <p>Har yanzu [NAME] ya/ta na tsotson nono?<br/>(1)yes, (2)no (3) child no longer alive - <b>skip to M138</b></p>   | <input type="text"/> |
| M137i | <p>Have you started to give [NAME] other types of liquid to drink?<br/>(1) yes (2) no</p> <p>Ko kin fara ba [NAME] wasu abubawa na sha?(1) yes (2) no</p>  | <input type="text"/> |
|       | <p>Can I check.Did you give any of the following to [NAME] yesterday or today? <b>Read out the list, select all mentioned.</b></p> <p>A cikin watanni 6 na farko bayan haihuwa, ko kin baiwa [NAME] daya daga cikin wadannan? <b>Read out the list, select all mentioned</b></p>   |                      |
| M137j | BreastmilkNonon uwa  | <input type="text"/> |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|       |   |                          |
|-------|---|--------------------------|
| M137k | Other type of milk: Wata irin madara da ba nonon uwa ba   | <input type="checkbox"/> |
| M137l | Plain water: Bakin ruwa   | <input type="checkbox"/> |
| M137m | Sugar/glucose/salt water solution: Ruwan sukari, gulukos ko ruwan gishiri   | <input type="checkbox"/> |
| M137n | Juice: Ruwan 'ya'yan itace  | <input type="checkbox"/> |
| M137o | Tea/infusions: Ruwan shayi ko Jiko/Tsumi  | <input type="checkbox"/> |
| M137p | Others: Wani abin daban da ba'a ambata ba   | <input type="checkbox"/> |
| M137q | None of these: Babu daya daga cikin wadanda aka amabata a sama  | <input type="checkbox"/> |
| M137r | Have you started to give [NAME] any food to eat (either solid or soft food)? (1)yes (2)no<br><br>Ko kin fara ba [NAME] wani abinci ya/ta ci (mai karfi ko ruwa-ruwa)? (1)yes (2)no  | <input type="checkbox"/> |
|       | Now about care after the birth: Yanzu zamuyi maganar kulawar bayan haihuwa  |                          |
| M138  | In the month after [NAME] was born, did any health care provider/volunteer/home visitor check on his/her health? <b>Probe for checks done sometime after birth, and not immediately at the time of birth</b> (1)yes (2)no – <b>SKIP TO M147</b><br><br>A cikin watan da aka haifi [NAME], ko wani jami'in kiwon lafiya ko ma'aikacin sa kai ya ziyarce ku a gida domin duba lafiyar sa/ta? <b>Probe for checks done sometime after birth, and not immediately at the time of birth</b> (1)yes (2)no – <b>SKIP TO M147</b> | <input type="checkbox"/> |
| M139  | In the month after [NAME] was born, how many times did a health care provider/volunteer/home visitor check on his/her health?<br><i>Write number of times</i><br><br>A cikin watan da aka haifi [NAME], sau nawa wani jami'in kiwon lafiya ko ma'aikacin sa kai ya ziyarce ku a gida domin duba lafiyar sa/ta?<br><i>Write number of times</i>  | <input type="checkbox"/> |
| M140  | How long after delivery did the first check take place?<br><i>(Record number of days; if same day as delivery enter 0)</i><br><br>Bayan haihuwa, tsawon wane lokaci aka dauka domin kawo ziyarar duba lafiyar [NAME]?<br><i>Record number of days; if same day as delivery enter 0)</i>   | <input type="checkbox"/> |
| M141  | Who checked on [NAME] for the first time after birth? <b>Probe for most qualified person</b> (1)doctor (2)nurse/midwife (3)CHEW/CHO (4)community volunteer health worker (5)other (specify)<br><br>Bayan haihuwa, wanene ya duba lafiyar [NAME] a karon farko? <b>Probe for most qualified person</b> (1)doctor (2)nurse/midwife (3)CHEW/CHO (4)community volunteer health worker (5)other (specify)  | <input type="checkbox"/> |
| M141a | <i>Specify: Ambata</i>  | <input type="checkbox"/> |
| M142  | Where did the first check on [NAME] take place?<br><i>(1)own home (2)primary health facility (3) hospital (secondary level or higher) (4) other</i><br><br>A wane wuri ne aka fara duba lafiyar [NAME]?<br><i>(1)own home (2)primary health facility (3) hospital (secondary level or higher) (4) other</i>   | <input type="checkbox"/> |
| M143  | <b>If M139&gt;1 ask M134, 144, 145, otherwise skip to M146</b><br>How long after delivery did the second check take place?  | <input type="checkbox"/> |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|       |  |                          |
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|       | (Record number of days)<br><br>Bayan haihuwa, tsawon wane lokaci ne aka dauka kafin duba lafiyar [NAME] a karo na biyu?<br>(Record number of days)   |                          |
| M144  | Who checked on [NAME] for the second time after birth? <b>Probe for most qualified person</b> (1)doctor (2)nurse/midwife (3)CHEW/CHO (4)community volunteer health worker (5)other (specify)<br><br>Bayan haihuwa, wanene ya duba lafiyar [NAME] a karo na biyu? <b>Probe for most qualified person</b> (1)doctor (2)nurse/midwife (3)CHEW/CHO (4)community volunteer health worker (5)other (specify) | <input type="checkbox"/> |
| M144a | Specify: Ambata  | <input type="checkbox"/> |
| M145  | Where did the second check on [NAME] take place?<br>(1)own home (2)primary health facility (3) hospital (secondary level or higher)<br><br>A ina aka duba lafiyar [NAME] a karo na biyu?<br>1)own home (2)primary health facility (3) hospital (secondary level or higher)   | <input type="checkbox"/> |
|       | At any of the health checks in the first month, what was done to check the health of baby? <b>Do not read out list, select all that apply, probe – anything else?</b><br><br>Wane irin bincike akayi wa [NAME] yayin kowanne karon duba lafiyar shi/ta a watan haihuwar sa/ta na farko?<br><b>Do not read out list, select all that apply, probe – anything else?</b>                                  | (1)yes (2)no             |
| M146a | Generally examined/looked at baby's body: Duba jikin jariri/jaririya gaba daya   | <input type="checkbox"/> |
| M146b | Weighed baby: Auna nauyin jariri/jaririya  | <input type="checkbox"/> |
| M146c | Checked cord: Duba cibiya  | <input type="checkbox"/> |
| M146d | Counselled on breastfeeding: Ilmantarwa da ba da shawara kan shayar da nonon uwa   | <input type="checkbox"/> |
| M146e | Observed breastfeeding:  | <input type="checkbox"/> |
| M146f | Counselled on skin-to-skin contact/warmth: An bada shawara kasancewa da 'da/ya jiki da jiki/ dumin jikin uwa   | <input type="checkbox"/> |
| M146g | Checked baby for danger signs: An duba jariri/jaririya ko akwai alamun wata lallurar rashin lafiya?  | <input type="checkbox"/> |
| M146h | Counselled on danger signs: An bada shwara kan alamun lallurorin rashin lafiya?  | <input type="checkbox"/> |
| M146i | Referred to a health facility: Turawa zuwa wani babban asibiti   | <input type="checkbox"/> |
| M146j | Nothing: Ba komai  | <input type="checkbox"/> |
| M147  | Did you ever call the MNH call centre for advice about your baby after the birth? (1)yes (2)no<br><br>Ko kin taba neman shawarar “cibiyar inganta rayuwar iyali ta (MNH Call Center)” ta wayar salula, dangane da jariri/jaririya ki bayan haihuwa?<br>(1)yes (2)no  | <input type="checkbox"/> |
| M148  | Have you ever used the emergency transport scheme for help with your baby after the birth? (1)yes (2)no – <b>go to M151</b><br><br>Ko kin taba amfani da shirin sufurin gaggawa domin neman taimako ga jariri/jaririya ki bayan haihuwa? (1)yes (2)no – <b>go to M151</b>  | <input type="checkbox"/> |
| M149  | <b>If yes:</b> Did you have to pay anything to use the emergency transport scheme? (1) yes (2) no – <b>go to M151</b>  | <input type="checkbox"/> |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

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|      | <b>If yes:</b> Ko kin biya wani kudi domin anfani da shirin sufurin gaggawa? 1) yes (2) no – <b>go to M151</b>   |                       |
| M150 | <b>If yes:</b> How much did you pay? Enter the amount in Naira, or enter 999 if doesn't know amount<br><b>If yes:</b> Nawa kika biya? Enter the amount in Naira, or enter 999 if doesn't know amount   | _ _ _ _ _ _ _         |
| M151 | Did [NAME] sleep under a bednet last night?<br>(1)yes (2)no (if no, skip to M154)<br><br>Ko [NAME] ya/ta kwana a cikin gidan sauro jiya da dare?<br>(1)yes (2)no (if no, skip to M154)   | _                     |
| M152 | What kind of net was it? (select one)<br>(1)LLIN (2)Ordinary net with no insecticide added (3)Ordinary net with insecticide added<br>Wanne irin gidan sauro ne? (select one)<br>(1)LLIN (2)Ordinary net with no insecticide added (3)Ordinary net with insecticide added   | _                     |
| M153 | How many years ago did your household obtain that net? (enter number of years before survey date; if less than one year before survey enter 0; if don't know enter 99)<br><br>Tsawon shekara nawa kenan da gidan nan ya mallaki wannan gidan sauron? (enter number of years before survey date; if less than one year before survey enter 0; if don't know enter 99) | _ _ _                 |
| M154 | Have you ever taken [NAME] for a vaccination? <b>PROBE – HEALTH FACILITY OR VACCINATION DAY</b> (1)yes (2)no – <b>GO TO M174</b><br><br>Ko kin taba kai [NAME] wajen yin allurar rigakafi? <b>PROBE – HEALTH FACILITY OR VACCINATION DAY</b> (1)yes (2)no – <b>GO TO M174</b>  | _                     |
| M155 | <b>If yes:</b> Do you have any record/card where [NAME] vaccinations are written down? (1)yes (2)no<br><br>If yes: Ko kina da kati da ke dauke da tarihin rigagafin [NAME]?<br>(1)yes (2)no  | _                     |
|      | Has [NAME] received the following vaccinations?<br>Ko [NAME] ya karbi wadannan alluran rigakafin?  |                       |
| M156 | BCG  | _                     |
| M157 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M158 | Polio 0 (Polio given at birth and given in the mouth (oral))   | _                     |
| M159 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M160 | Polio 1  | _                     |
| M161 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M162 | Polio 2  | _                     |
| M163 | <b>If yes:</b> record date given, or 01/01/209 if date not available   | _ _ / _ _ / _ _ / _ _ |
| M164 | Penta-1  | _                     |
| M165 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M166 | Penta-2  | _                     |
| M167 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M168 | Penta-3  | _                     |
| M169 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M170 | Measles or MMR   | _                     |
| M171 | <b>If yes:</b> record date given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M172 | Vitamin A  | _                     |
| M173 | <b>If yes:</b> record date last dose given, or 01/01/2099 if date not available  | _ _ / _ _ / _ _ / _ _ |
| M174 | <b>INTERVIEWER STOP FOR PDA CHECK: WAS THE BABY BORN 0-60 DAYS BEFORE DATE OF INTERVIEW?</b><br>(1)Yes (2)No <b>IF YES - CONTINUE, IF NO – END</b>   |                       |
|      | Now I want to talk to you about any sickness your child experienced in   |                       |

**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

|      |   |                          |
|------|---|--------------------------|
|      | the first month of life.  |                          |
|      | Yanzu ina son nayi maki magana gameda rashin lafiyar da ɗan ki/yar ya/ta samu cikin wata daya bayan haihuwa?  |                          |
| M175 | Has [NAME] ever been sick? (1)yes (2)no   |                          |
|      | Ko [NAME] ya/ta taba rashin lafiya? (1)yes (2)no  |                          |
|      | Can I just check, has [NAME] ever had any of the following symptoms?<br><b>If yes to any continue, if no to all these symptoms skip to end</b><br>Ko [NAME] ya taba samun wadannan alamomin cuta?<br><b>If yes to any continue, if no to all these symptoms skip to end</b>   | (1)yes (2)no             |
| M176 | Stopped feeding well: Rashin cin abinci sosai   | <input type="checkbox"/> |
| M177 | Difficult or fast breathing: Sheshsheka   | <input type="checkbox"/> |
| M178 | Chest in-drawing: Fadawar awazu   | <input type="checkbox"/> |
| M179 | Unusually hot or cold body: Zafi ko sanyin jiki   | <input type="checkbox"/> |
| M180 | Baby less active than usual: Rashin kuzarin jaririn/jaririyar   | <input type="checkbox"/> |
| M181 | Body became yellow: Canjin launin jiki zuwa ruwan ɗorowa  | <input type="checkbox"/> |
| M182 | Other (specify) : Wasu alamomin daban   | <input type="checkbox"/> |
| M183 | (specify):  | <input type="text"/>     |
| M184 | No symptoms <b>end:</b> Ba wasu alamun  | <input type="checkbox"/> |
| M185 | <b>If any sickness/symptom reported:</b><br>How old was [NAME] when sick for the first time?<br><i>Record number of days of age when [NAME] was first sick; if first day of life enter 0</i><br>Nawa ne shekarun [NAME] lokacin da yayi/tayi rashin lafiya na farko? <i>Record number of days of age when [NAME] was first sick; if first day of life enter 0</i> | <input type="text"/>     |
| M186 | When [NAME] was sick that first time what was the problem?<br><b>CHECK ALL the following symptoms, tick all that apply:</b><br>Lokacin da [NAME] ya/ta yi rashin lafiya na farko me ya same shi/ta?<br><b>CHECK ALL the following symptoms, tick all that apply:</b>  | (1)yes (2)no             |
| M187 | Fever: Zazzabi  | <input type="checkbox"/> |
| M188 | Unable to suckle/feed: Kin tsotson nonon uwa/ ko cin abinci   | <input type="checkbox"/> |
| M189 | Difficult/fast breathing: Sheshsheka  | <input type="checkbox"/> |
| M190 | Diarrhea: Gudawa  | <input type="checkbox"/> |
| M191 | Convulsions: Jijjiga da Taune-taune   | <input type="checkbox"/> |
| M192 | Persistent vomiting: Yin amai ko da yausha  | <input type="checkbox"/> |
| M193 | Yellow palms/soles/eyes: Canjawa kalar tafi hannu, tafi kafa da idanu zuwa ruwan dorawa   | <input type="checkbox"/> |
| M194 | Lethargy: Mutuwar jiki da Kasala  | <input type="checkbox"/> |
| M195 | Unconscious: Suma   | <input type="checkbox"/> |
| M196 | Red/discharging eyes: Jan idanu/fidda ruwa ko kontsa  | <input type="checkbox"/> |
| M197 | Skin pustules: Marurai  | <input type="checkbox"/> |
| M198 | Skin around cord was red: Fatar da ke zagaye da cibiya  | <input type="checkbox"/> |
| M199 | Pus from cord: Fitar diwa daga cibi   | <input type="checkbox"/> |
| M200 | Other: Wani abu daban   | <input type="checkbox"/> |
| M203 | Did you seek care for [NAME] outside the home at that time?<br>(1)yes – <b>go to M206</b> (2)no<br><br>Ko kin nemi a kula da [NAME] a wani wurin da ba gida ba a wancan lokacin?<br>(1)yes – <b>go to M206</b> (2)no  | <input type="checkbox"/> |
| M204 | <b>If no care sought at that time:</b><br>Why didn't you seek care for [NAME] outside the home during that first illness? <b>Select one</b><br>(1)expected him/her to get better (2) health facility too far (3) cost of treatment too expensive (4) don't trust/like the facility (5) no   | <input type="checkbox"/> |



**IDEAS HOUSEHOLD SURVEY  
Gombe State, Nigeria, 2016**

|       |  |                      |
|-------|--|----------------------|
|       | <p>permission to go (6) community advisor/TBA advised against it <b>(NOW GO TO M212)</b> (7) other</p> <p><b>If no care sought at that time:</b> Me ya hanaki nemawa [NAME] kulawa a wani wurin da bagida ba a lokacin da ba shi/ta da lafiya na farko? <b>Select one</b><br/>(1) expected him/her to get better (2) health facility too far (3) cost of treatment too expensive (4) don't trust/like the facility (5) no permission to go (6) community advisor/TBA advised against it <b>(NOW GO TO M212)</b> (7) other</p>  |                      |
| M206  | <p><b>If M203=yes:</b> How many times did you seek care for that illness? Write number of times</p> <p><b>If M203=yes</b><br/>Har sau nawa kika nemawa [NAME] kulawa da wancan rashin lafiyan?</p>   | <input type="text"/> |
| M207  | <p>Where outside the home did you seek care from the first time? <b>Select one</b><br/>(1) primary health care facility (2) hospital or secondary level care (3) health volunteer (4) shop/pharmacy (5) MNH call centre (6) traditional/community healer (7) other</p> <p>A wanne wurin da ba gida ba kika je neman kiwon lafiya da farko?<br/>(1) primary health care facility (2) hospital or secondary level care (3) health volunteer (4) shop/pharmacy (5) MNH call centre (6) traditional/community healer (7) other</p> | <input type="text"/> |
| M209  | <p>Do you have any medical record from when you went for health care outside the home the first time? (1) yes (2) no – <b>M211</b></p> <p>Lokacin da kika neman ma sa/ta kulawa da farko a wani wurin da ba gida ba, ko kina da wata takardar shaida?<br/>(1) yes (2) no – <b>M211</b></p>   | <input type="text"/> |
| M210  | <p>Can I see it? (1) yes (2) no<br/><b>Interviewer use the card to verify responses where possible</b></p> <p>Ko zan iya ganin takardar shaidar?<br/><b>Interviewer use the card to verify responses where possible</b></p>  | <input type="text"/> |
| M211  | <p>After how many days did you seek care the first time? Write number of days from the onset of illness <b>If first day of illness write 0</b></p> <p>Bayan kwana nawa ne kika nemawa [NAME] kulawa a karo na farko? Write num days from onset of illness <b>If first day of illness write 0</b></p>   | <input type="text"/> |
| M212  | <p><b>All:</b> At any time during the illness, did [NAME] take any drugs for the illness? (1) yes (2) no - <b>end</b><br/><b>Interviewer: use the card to verify if available; or ask the mother if she still has the drug wrapper</b></p> <p><b>All:</b> Duk tsawon lokacin rashin lafiyar, ko [NAME] ya/ta sha wasu magunguna domin samun lafiya?<br/><b>Interviewer: use the card to verify if available; or ask the mother if she still has the drug wrapper</b></p>   | <input type="text"/> |
|       | <p>What drugs did [NAME] take? <b>Select all mentioned</b><br/>Waddanne magunguna ne [NAME] ya/ta sha? <b>Select all mentioned</b></p>   |                      |
| M213a | Malaria drug SP/Fansidar/Chloroquine (Maganin zazzabin cizon sauro - SP/Fansidar/Chloroquine)  | <input type="text"/> |
| M213b | Other malaria drug (Wadansu magungunan zazzabin cizon sauro wadanda ba SP/Fansidar/Chloroquine ba)   | <input type="text"/> |

**IDEAS HOUSEHOLD SURVEY**  
**Gombe State, Nigeria, 2016**

|       |  |   |
|-------|--|---|
| M213c | Antibiotic: Gentamicin or Ampicilin (maganin kwayoyin cututtuka allurar jenta ko kafso)  | _ |
| M213d | Antibiotic: other antibiotic (Wadansu magungunan kwayoyin cututtuka wadanda ba allurar jenta ba ko kafso)  | _ |
| M213e | Tetracycline eye ointment (Maganin ciwon ido mai kamar kwantsa)  | _ |
| M213f | ORS (Ruwan gishiri da suga)  | _ |
| M213g | Vitamin A (Sinadarin bitamin mai kara karfin ido)  | _ |
| M213h | Traditional remedy (Magungunan gargajiya)  | _ |
| M213i | Herbs (Itatuwa)  | _ |
| M213j | Others (Wani abin daban da ba'a ambata ba)   |   |
| M214  | For how many days did [NAME] take the drugs<br><i>Write number of days</i><br>Ko kwana nawa [NAME] ya/ta yi yana/tana shan maganin lokacin rashin lafiyar? <i>Write number of days</i> | _ |

**End – thank the participant for their time. Check whether there is another woman aged 13-49 in the house.**

**Notes:**

Plain text: questions to be read out to the interviewee

*Italic text: coded responses*

**Bold text: instructions to interviewer or for programming**