GRAND STUDY Survey 3rdTrimester (T1)

Study Arm

○ Individual ANC○ Group ANC

Section 1: Self-efficacy

We will start with a few questions about how decisions are made in your household.

1. Generally, can you tell us all of the people who are involved in the decisions about your healthcare?

(DO NOT PROMPT - select all that apply)

Self
Spouse/Father of the baby
Grandmother of the baby (mother-in-law)
My mother
My father
Uncle/Auntie
Religious leader
Other
Don't Know
Refused to respond

2. Who typically has the strongest voice in deciding when and where you can seek healthcare? (Select one response)	 Self Spouse/Father of the baby Grandmother of the baby (mother-in-law) My mother My father Uncle/Auntie Religious leader It is a joint decision Other Don't Know Refused to respond

3. In your household, who makes the decisions about the household purchases?

Self
 Husband / baby's father alone
 Self and husband together
 Husband with household head
 Husband with another family member
 Other
 Depit Kers

Don't Know
 Refused to respond

Now I want to ask you questions about your health. Please answer YES or NO to the following					
statements.					

4. Are there are things you can do to help prevent problems and keep yourself healthy?	 Yes No Refused to respond
5. Do you know how to recognize a problem with your pregnancy?	 Yes No Refused to respond
6. Do you know what actions you will take if you think there is a problem with your pregnancy?.	 Yes No Refused to respond
7. Do you usually ask questions if you do not know what a provider is telling you?	 Yes No Refused to respond
8. Can you usually let others know what you really think, even if it is different from them?	 Yes No Refused to respond

Now I will ask some questions about the health of your baby.		
9. Are there things you can do to help prevent problems and keep your baby healthy?	 Yes No Refused to respond 	
10. Do you know how to recognize a problem with your newborn?	 Yes No Refused to respond 	
11. Do you know what actions to take if you think there is a problem with your newborn?	 Yes No Refused to respond 	
SECTION II - HEALTH RELATED BEHAVIORS/BPCR		

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12. What are some things a woman can do to prepare for birth?	 Arrange for emergency transport Save money Have a valid black black paragraph of the second seco
(Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Have a valid Health Insurance Card Obtain supplies for the birth / prepare birth bag Keep self clean (bathing) Eating and drinking light food Watch for health problems
	 Identify place for delivery Identify blood donor Identify someone to go with woman to facility Identify someone to care for other family members Other
	Refused to respond (CHECK ALL THAT APPLY)

13. Do you have money saved for health emergencies or birth?	 Yes No Refused to respond
14. Do you have a plan for transport for health emergencies or birth?	 Yes No Refused to respond
15. Do you have a blood donor identified for health emergencies or birth?	 Yes No Refused to respond

16. What are the danger/warning signs during pregnancy? Things that mean there might be a problem with you or the baby?(Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Headache Vision changes/blurred vision Pain in abdomen Shortness of breath Fever Vaginal bleeding Leaking of fluids from vagina Painful urination Signs of labour before it's time for the baby to come Reduced or no fetal movement Convulsions/fits Persistent vomiting Mood changes/depression Swollen face Don't know Other Refused to respond
17. What do you think you would you do if you have any of these?(Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Treat it at home by myself See a traditional healer/ herbalists Go to a religious healer/ prayer camp Go to the hospital or health facility Nothing Don't know Other Refused to respond
18. What are some things you can do for yourself to prevent problems before your baby is born (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Sleep under an insecticide treated bed net Take malaria prophylaxis Eat frequent balanced meals Drink plenty of water Take iron tablets Take folic acid tablets Practice safe sex/use condom Get tested for HIV Get exercise Avoid tobacco Avoid alcohol Don't know Other Refused to respond

Now let's talk about what happens after the baby is born.

19. What are the danger/warning signs for you, the mother, after the baby is born? These are things that mean there might be a problem.(Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Heavy bleeding Severe abdominal (stomach) pain Severe pain and/or red and hot breast Severe headache Visual disturbances Unexplained pain in chest or legs Breathing difficulties Foul smelling vaginal discharge Fever Convulsions/fits Swollen face Mood changes/depression Persistent vomiting Don't know Other Refused to respond
20. What do you think you would you do if you have any of these? (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Treat it at home by myself See a traditional healer/ herbalists Go to a religious healer/ prayer camp Go to the hospital or health facility Nothing Don't know Other Refused to respond
21. What are some things you can do for yourself to prevent problems after your baby is born (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Bathe every day Eat at least 4x day Drink plenty of fluids Rest /No heavy lifting Sleep under an insecticide treated bed net Watch out for health problems Go for a postpartum check up Practice safe sex/use condoms Use good position for breastfeeding Don't know Other Refused to respond

Now, let's talk about your newborns.	
22. What are danger/warning signs for your newborn? These are signs that there may be a problem. (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Too hot or too cold Convulsions/fits Little or no movement/floppy baby Feeding poorly or not at all Fast breathing or chest indrawn Not passing urine and/or stool Umbilical cord stump is bleeding; has foul odor, pus, or redness around it Very small baby born at home Yellow skin, eyes, palms or soles of feet Red swollen eyes with pus Persistent vomiting Diarrhea Weak Cry Don't know Other Refused to respond
23. What do you think you would you do if you have any of these? (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Treat it at home by myself See a traditional healer/ herbalists Go to a religious healer/ prayer camp Go to the hospital or health facility Nothing Don't know Other Refused to respond
24. What are the most important things you can do to help keep your newborn healthy? (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Keep warm (keep head and body covered; skin to skin with mom) Feed only on breastmilk for 6 months Breastfeed often/whenever baby wants Keep cord stump clean and dry Wash hands with soap and water at all times before handling baby Have baby immunized Go for postnatal visit Don't Know Other Refused to respond

25. How long do you think pregnancies should be spaced apart for the best health of the mother and baby?	 Less than 2 years 2 years or more Don't know Refused to respond 	
(Don't read the options)		
26. When do you think it is best to first breastfeed your baby after delivery?	\bigcirc Immediately after delivery (within 30 minutes) \bigcirc After 30 minutes and within 24 hours	
(Don't read the options)	 After 24 hours After the first produced breastmilk (yellowish milk) has gone (when "true" milk comes in) Don't Know Other Refused to respond 	
27. At what age do you think it is best to start	○ Less than 6 months	
giving your baby fluids other than breastmilk?	 6 months to 1 year More than 1 year 	
(Don't read the options)	 Don't know Refused to respond 	
28. At what age do you think it is best to start giving your baby solid food?	\bigcirc Less than 6 months \bigcirc 6 months to 1 year	
(Don't read the options)	 More than 1 year Don't know Refused to respond 	
29. Have you ever heard of using breastfeeding to prevent pregnancy after you have a baby?	 Yes No Refused to respond 	
Section 2: Family Planning		
Next, I would like to ask you some questions ab	out family planning.	
30. Tell me the family planning methods you know of?	 Lactation Amenorrhea Method (LAM) Cycle beads Withdrawal Condoms Pills/oral contraception Injectable Implants IUD Emergency contraception Sterilization (female) Vasectomy (male) Other 	

 $\hfill\square$ Refused to respond

31. Tell me what you know about the Lactation Amenorrhea Method (LAM). (Check all that are mentioned. Prompt with "anything else". Do not read options.)	 Start to breastfeed as soon as possible after birth Breastfeed frequently, or at least every 4 hours during the day Breastfeed at least once during the night Give only breastmilk until baby is 6 months old Do not give bottle Do not give water Do not give supplemental feeds Nothing Other Refused to respond
32. After this pregnancy, do you intend to use family planning methods?	 Yes No Don't Know Refused to respond
33. If yes, what method do you plan to use?	 Lactation Amenorrhea Method (LAM) Cycle beads Withdrawal Condoms Pills/oral contraception Injectable Implants IUD Emergency contraception Sterilization (female) Vasectomy (male) None Other Refused to respond

Thank you for answering those questions for us. Section 5: NOW LOOK AT THE ANC CARD WITH THE MOTHER		
35. Was she provided Folic acid?	 Yes No Missing Refused to respond 	
36. Was she provided iron tablets or syrup?	 Yes No Missing Refused to respond 	

37. Was she tested for VDRL?	 Yes No Missing Refused to respond
38. Was she given at least two tetanus toxoid vaccines?	 Yes No Missing Refused to respond
39. Was she counseled on danger signs?	 Yes No Missing Refused to respond
40. Was her BP checked at least once?	 Yes No Missing Refused to respond
41. Did she complete the IPT2 malaria prophylaxis?	 Yes No Missing Refused to respond
42. Did she have an Ultrasound before 24 weeks?	 Yes No Missing Refused to respond

