**Form 2A KMC Baseline Information**

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|  | Study ID | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **No** | **questions** | **Response** |
| 1  | Date of filling | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 2 | Research Assistant Code | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 3 | Woman ID | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 5 | Number of family members residing in the house | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 6 | In what year and month were you born? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(dd/mm/yy) |
| 7 | What is your age (years)?(Compare and correct Q. #6 and/or 7 if inconsistent. Probe using local calendar/historical events.) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 8 | Are you able to read and/or write?  | Yes No |
| 9 | Did you ever attend formal school?  | Yes No  |
| 10 | What is the highest level of school you attended?  | * Primary /1-8/
* Secondary/9-12/
* Technical/vocational certificate
* Degree or higher
 |
| 11 | What is your current occupation?  | * House wife
* Farmer
* Skilled Labor
* Unskilled Labor
* Professional
* Merchant
* Petty trade
* Other Specify
 |
| 11a |  If occupation of mother is "other", specify | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 12 | In what year and month was the baby's father born? (If not known, 99 = Don't know)  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(dd/mm/yyyy) |
| 13 | What is the age of the baby's father (years)? if not known, 99 = Don't know) Compare and correct 14 and/or15 if inconsistent. Probe using local calendar/historical events. | \_\_\_\_\_\_\_\_\_\_\_\_\_(in years) |
| 14 | Does the father able to read and/or write?  | yes No Don't know  |
| 15 | Did the father ever attend formal school?  | Yes No Don't know  |
| 16 |  What is the highest level of school the father attended?  | * Primary /1-8/ Secondary/9-12/
* Technical/vocational certificate
* Degree or higher
* Don't know
 |
| 17 | What is the current occupation of the father? | * Farmer
* Skilled Labor
* Unskilled Labor
* Professional
* Merchant
* Petty trade
* Other Specify
 |
| 17.a | If occupation of father is "other", specify | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 18. | Is father currently staying with the family?  | Yes No  |
| 19. | What is the religion of the head of the household? | * Christian orthodox
* Muslim
* Christian protestant
* Christian Catholic
* Christian other
* Traditional
* Other
 |
| 19.a | If other religion, specify | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 20. | What is the ethnic group of the head of the household?  | * Amhara
* Agew
* Tigre
* Oromo
* Other (specify)
 |
| 20.a | If other ethnic group, specify | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 21 | Do you own the house that you live in? | Yes No  |
| 22 | What is the total income of your family per year? (in birr) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in birr)  |
|  | **Obstetric history** |  |
| 23. | How many times have you been pregnant including this birth?  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 24. | Did you ever have any miscarriages or abortion (termination of pregnancy)?  | Yes No  |
| 25. | How many times did you have miscarriages or abortion? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 26. | How many times have you given birth including this birth?  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 27. | How many of the babies were pre-term (born too soon) including this birth, if any? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 28. | How many of the babies were low birth weight (born too small) including this birth, if any? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 29. | How many live births have you had during your lifetime?  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 30. | How many stillbirths (babies who were born and never breathed) have you ever have, if any? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 31. | How many newborn deaths (a child who died in the first 28 days of life) have you ever have, if any? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 32. | How many living children do you have now? (Review this against Q29 - 32 and correct inconsistencies)  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Antenatal Care** |  |
| 33. | In your recent pregnancy, did you receive at least one care (ANC) at a health facility during pregnancy (at least one)?  | Yes No  |
| 34. | How many times did you get care (ANC) during your last pregnancy from the health facility? (If not known, 99 = Don't know) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(# of visits) |
| 35. | When you got ANC at the health facility, Did you get any information on preterm and/or LBW baby born?  | Yes No  |
| 36. | When you got ANC at the health facility, did you get any information on KMC?  | Yes No  |
|  | **Delivery** |  |
| 37. | Where did you give birth to (Baby name)?  | * Your home
* Other home
* Health post
* Health centre
* Government hospital
* Private hospital/clinic
* NGO health facility
* On the way to health facility
* Other
 |
| 37.a | If the place of birth is "Other place of delivery", specify | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 38. | Who (what kind of professional) conducted the delivery? | * Skilled health care provider
* HEW
* CHW/HDAs
* TBA
* Family/Friend/relatives
* Neighbor
* No one was present
* Other (Specify)
 |
| 38.a | If "Other " attendant specify  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 39. | Was the delivery normal, assisted (forceps or vacuum extraction), or by caesarian (surgery)?  | * Normal
* Assisted
* Caesarian
 |
| 40. | If home birth, who told you to bring your baby to health facility? | * Myself /No one
* HEW
* HDA/vCHW
* Family/Friend/relatives
* Neighbor
* Others (specify)
 |
| 40.a | If other person told her, specify | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | **Gestational Age** |  |
| 41. | What was the date of first day of your last menstrual period ?(if don't remember, write 97 = Don't Remember) | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(dd/mm/yyyy) |
| 42. | At which month of pregnancy was your infant born? ask the mother or other care givers; If not remember, 97 = Don't Remember)  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in months) |
| 43. | At which month of pregnancy was the infant born? take Gestational age from records (observation)  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in weeks) |
| 44. | What was the source document?  | * ANC Card
* Delivery register
* USG (Ultrasound) if available
* Other records (discharge record)
 |
| 45. | What was the birth order of the child?  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in months) |
| 46. | If birth order is >1, what was the interval between the birth of this child, and the previous child? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(in months)  |
| 47. | Was the infant born single, twins or triplets?  | * single birth
* twins
* triplets
* >triplets
 |
|  | **Birth Weight** |  |
| 47a. | Birth weight of infant\_1 reported by mother? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |
| 47b. | Birth weight of infant\_1, from record? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |
| 47c. | Birth weight of infant\_2 reported by mother? |  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |
| 47d. | Birth weight of infant\_2, from record? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |
| 47e. | Birth weight of infant\_3 reported by mother? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |
| 47f. | Birth weight of infant\_3, from record? | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |
| 48. | Specify the name of the document where weight is recorded?  | * Delivery register
* Referral slip
* KMC register
* NICU register
* Others (specify)
 |
| 49. | Weight (gm) of baby as measured by study team | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (in grams) |