

Principal Investigator M. Shafiqul Islam Trainee Investigator (if any) 90  
 Application No. 81-015 Supporting Agency (if Non-ICDDR,B) \_\_\_\_\_  
 Title of Study MATERNAL AND CHILD CARE Project status:  
(Sociocultural Aspects)  New Study  
 Continuation with change  
 No change (do not fill out rest of form)

- Circle the appropriate answer to each of the following (If Not Applicable write NA).
- Source of Population:
- (a) Ill subjects Yes  No
- (b) Non-ill subjects  Yes  No
- (c) Minors or persons under guardianship Yes  No
- Does the study involve:
- (a) Physical risks to the subjects Yes  No
- (b) Social Risks Yes  No
- (c) Psychological risks to subjects Yes  No
- (d) Discomfort to subjects Yes  No
- (e) Invasion of privacy  Yes  No
- (f) Disclosure of information damaging to subject or others Yes  No
- Does the study involve:
- (a) Use of records, (hospital, medical, death, birth or other) Yes  No
- (b) Use of fetal tissue or abortus Yes  No
- (c) Use of organs or body fluids Yes  No
- Are subjects clearly informed about:
- (a) Nature and purposes of study  Yes  No
- (b) Procedures to be followed including alternatives used Yes  No  N.A
- (c) Physical risks Yes  No  N.A
- (d) Sensitive questions Yes  No  N.A
- (e) Benefits to be derived Yes  No
- (f) Right to refuse to participate or to withdraw from study  Yes  No
- (g) Confidential handling of data  Yes  No
- (h) Compensation &/or treatment where there are risks or privacy is involved in any particular procedure  Yes  No N.A
5. Will signed consent form be required:
- (a) From subjects  Yes  No
- (b) From parent or guardian (if subjects are minors) Yes  No  N.A
6. Will precautions be taken to protect anonymity of subjects  Yes  No
7. Check documents being submitted herewith to Committee:
- Umbrella proposal - Initially submit an overview (all other requirements will be submitted with individual studies).
- Protocol (Required)
- Abstract Summary (Required)
- Statement given or read to subjects on nature of study, risks, types of questions to be asked, and right to refuse to participate or withdraw (Required)
- Informed consent form for subjects
- Informed consent form for parent or guardian
- Procedure for maintaining confidentiality
- Questionnaire or interview schedule \*
- \* If the final instrument is not completed prior to review, the following information should be included in the abstract summary:
1. A description of the areas to be covered in the questionnaire or interview which could be considered either sensitive or which would constitute an invasion of privacy.
  2. Examples of the type of specific questions to be asked in the sensitive areas.
  3. An indication as to when the questionnaire will be presented to the Cttee. for review.

I agree to obtain approval of the Ethical Review Committee for any changes involving the rights and welfare of subjects before making such change.

M. Shafiqul Islam  
Principal Investigator

\_\_\_\_\_  
Trainee

REF  
WA 310. JB2  
I 82m  
1981

81-015  
rec'd 31/3/81

SECTION I - RESEARCH PROTOCOL

1. Title: Maternal and Child Care - Sociocultural Aspects
2. Principal Investigators: M. Shafiqul Islam and P. Claquin
3. Starting Date: March, 1981
4. Completion Date: December, 1981
5. Total Direct Cost: US \$11,594
6. Scientific Program Head:

This protocol has been approved by the Community Services Research Working Group.

\*Signature of Scientific Program Head: 

Date: 19/3/81

\*This signature implies that the Scientific Program Head takes responsibilities for the planning, execution and budget for this particular protocol.

7. Abstract Summary:

The aim of this study will be to investigate the beliefs, knowledge, attitude, practices and customs related to physical activities, movements, personal hygiene, diet, illness and treatment during pregnancy, and child-birth. 500 pregnant women will be interviewed in Matlab MCH-FP and Comparison areas by trained and experienced female health assistants once during their pregnancies. These women will be interviewed again at the outcome of their pregnancies and subsequently. The interview at pregnancy outcome will be done within seven days and the subsequent one within forty days of pregnancy outcome. These interviews will take place whatever the result of pregnancy will be. Eight female health assistants will-interview the women and

fill up pre-tested questionnaires. Adequate supervision by the investigators and supervisors will be given to maintain uniformity of standard and accuracy of data collection. Extensive training will be imparted to the interviewers before sending them to field. An information system will be developed in such a way that after the initial interview, the interviewers can easily know about the pregnancy outcome in time so that the subsequent interviews can be completed in due time. The community health workers will be utilised in this respect. Every female field assistants will be assigned to a particular area. The study will be carried out in a population of 60,000 comprising three blocks of Matlab MCH-FP and Comparison areas. The completion of work will require about one year.

8. Reviews: (leave blank)

(a) Ethical Reveiw Committee: \_\_\_\_\_

(b) Research Review Committee : \_\_\_\_\_

(c) Director: \_\_\_\_\_

(d) BMRC: \_\_\_\_\_

(e) Controller/Administrator: \_\_\_\_\_

ABSTRACT SUMMARY

1. This study will involve a subject population of 500 pregnant women to be interviewed thrice - during pregnancy, within a week of pregnancy outcome and forty days of post-partum period.
2. The only potential risk is the possible invasion of privacy.
3. The subjects will be initially informed about the nature of information collected, maintenance of confidentiality and their right to refuse to respond.
4. All the subjects will have their identification numbers, which will be mostly used instead of their names. The handling of data are limited only to the female health assistants interviewing the women, their supervisor and the investigators of this protocol till the raw data are entered into cards or computer tapes. There will be no scope for distinguishing individual characteristics after the results are published in aggregate.
5. A consent form prepared in vernacular will be read to every respondent. The woman will either sign or put her left thumb impression on the form.
  - (a) Not applicable.
  - (b) Not applicable.
6. Every woman under study will be interviewed at home by female health assistants about her belief, knowledge, attitudes, practices and customs related to physical activities, movements, personal hygiene, diet, illness and treatment during pregnancy and child-birth. A respondent will have to answer mostly structured questions and a few open-ended questions prepared in simple vernacular. Each interview will take 45 minutes to an hour to complete.
7. No immediate or direct benefit to an individual or society is foreseen. However, this study is likely to create individual and community awareness by distinguishing the beliefs, knowledge, attitude, practices and customs which are considered harmful from those which are beneficial or neutral for the well-being of mother and her child.
8. No.

PROCEDURE TO MAINTAIN CONFIDENTIALITY

All the subjects will have identification numbers (Census Numbers) which will be most often used instead of names used only in the homes at the time of interview. Only the female health assistants will be doing the interviews. A supervisor and the investigators of the study will carefully handle the completed questionnaires till the data will be entered into card columns or computer tapes. All the staff who will be handling the data are trained, responsible and well aware of the confidentiality of information. No personal characteristics will be distinguished after the results are published in aggregate.

## SECTION II - RESEARCH PLAN

### A. INTRODUCTION

1. Objective: The overall objective of this study will be the investigation of beliefs, knowledge, attitude, practices and customs related to physical activities, movements, personal hygiene, diet, illness and treatment during pregnancy and child-birth.
  
2. Background: Maternal and child health is an important component of our national primary health care system. Infant mortality is very high in Bangladesh like in many other developing countries. It is the most important component of the overall mortality rate and accounts for 40 percent of the crude death rate of Bangladesh.<sup>1-2</sup> Maternal death related to child-birth is the highest among all causes for women in age group 15-44 years and almost one-third of all deaths among women aged 10-49 years is related to child-birth, occurring during pregnancy or within 90 days after termination of pregnancy.<sup>3-4</sup> A significant number of these deaths are due to infection - particularly post-partum tetanus and sepsis. The health problems of mother and child arising during and after gestation are closely interlinked. Both ante-natal and post-natal care are governed by a complex of customs and beliefs involving rituals, food and methods of treatment of both the mother and the child.<sup>5</sup> Inadequate intake of food, deficient sanitation and a high rate of infections play a significant role in the pre-natal period, affecting the health of both the mother and the unborn

child. For example in some cultures, a pregnant woman is restricted from going outside her house during mid-day and sunset and she should not keep her hair loosened up.<sup>6</sup> The unborn child has to be kept inside the house for forty days and also the mother keeps indoors and leaves the house only for brief periods.<sup>7</sup> Tetanus is believed to be due to an evil spirit that enters into the body of the newborn due to breach of certain set rules by the mother.<sup>8</sup>

Belief in a correlation between health and diet is very widespread. Certain dietary items may be seen as preventing illness, others may cause illness and some others may have certain curative elements in them. Pregnancy and post-partum periods are thought potentially troublesome for women in many parts of the world if the diet is not carefully monitored and manipulated.<sup>9</sup> Restrictions are imposed upon a pregnant women's diet, the food intake and the kind of foods she eats are strictly controlled.<sup>10</sup> A woman usually remains less active for several days after delivery when she has to practice dietary restrictions. The foods eaten, the amount of work and rest allowed to the mother, and other customs in pregnancy can affect the baby in the uterus. For example, in a study from India, it has been reported that only a small amount of food was given in pregnancy with the belief that a small baby and an easy delivery will result. Seventy two percent of the respondents recommended extra food for pregnant women and other 28% believed that extra food taken during pregnancy may cause undue increase in the size of the foetus leading to difficulties during labour.<sup>11</sup>

Deaths and disease in the newborn babies are generally difficult to estimate. Both are certainly frequent, due mainly to infection, leading to tetanus of the newborn and to birth injury from unskilled midwifery.<sup>12</sup> Harmful customs to the health of infants are: use of cow-dung as a dressing for the umbilical cord, failure to tie it and not giving the young child fish, because it is believed to cause worms.<sup>13-15</sup> A recent study has reported that seventy percent of the mothers go to the doctors when their children fall sick, only 14% seek the help of kabiraj and homeopath and 1% go to religious healers.<sup>16</sup>

3. Rationale: Some beliefs, knowledge, attitude, practice and customs related to physical activities, movements, personal hygiene, diet, illness and treatment during pregnancy, child-birth and several weeks after child-birth are thought to be detrimental to the health and well-being of the mother and her child. Many of them are believed to contribute greatly to the high rate of maternal and infant mortality in rural areas where the great majority of the country's population live. For example, the traditionally poor diet of the rural mothers is worsened during pregnancy due to observance of certain customs and taboos attached to their diets.

This study will segregate the beliefs, knowledge, attitudes, practice and customs which are considered harmful from those which are beneficial or neutral for the health of pregnant women and their newborn infants.



## B. SPECIFIC AIMS

This protocol will address the following specific research questions:

1.
  - i) To identify the kind of physical activities pregnant women involve themselves and the ones they avoid with their justification.
  - ii) To know the restrictions on their physical movements and the beliefs for the restrictions.
  - iii) To know the personal habits, domestic and personal hygiene of pregnant women.
  - iv) To study the body image (i.e. the perception and understanding of various parts of one's body) of pregnant women in relation to gestation, delivery and breast-feeding.
2.
  - i) To know the kind of food preferred and avoided by pregnant women with their respective reasons with particular reference to classification of foods as "hot" and "cold".
  - ii) To know women's belief about eating more or less than normal of any food during pregnancy and following child-birth with possible explanation.
3.
  - i) To understand the type of illness (or complaints) during pregnancy, practitioner consulted, treatment and cost of treatment.
  - ii) To understand the nature of complications of the women and their newborn infants at time of delivery, the type of practitioner consulted, treatment obtained and costs involved.
4.
  - i) To study the type of birth attendants, their socio-economic characteristics, knowledge and practices (particularly in reference to their handling of the cord and the placenta).

C. METHODS OF PROCEDURE

1. Methodology: Five hundred pregnant women will be identified in three blocks of MCH-FP and Comparison areas which will cover a population of 60,000. At the initial interview, baseline data will be collected including information about women's physical activities, movements, dietary habits, illness, type of medical care and cost of treatment. All women will be again interviewed within seven days of pregnancy outcome and within forty days of post-partum period whatever the result of pregnancy outcome might be. Most of the questions asked during pregnancy will be repeated when the women will be interviewed following the pregnancy outcome. Special inquiries will be made about delivery practices (handling of placenta and cord care etc.) and birth attendants when the interviews will be completed during post-partum period. In all there will be three separate but inter-linked set of questionnaires (e.g. Pregnancy Report, Birth Report and Post-partum Report) to complete the study. Female health assistants assigned to particular area will interview the women in pre-tested questionnaires prepared in vernacular. The community health workers who are residing in the villages will inform the female health assistants when births take place. A male field research officer will supervise the work of the female health assistants. He will be contacting all the female health assistants at least once in a week to check and verify the completed questionnaires. The filled-up questionnaires with discrepancies will be sent back to respective female health assistant for necessary corrections. The completed questionnaires will be edited in office and the data will be punched into IBM cards after being coded.

2. Staff requirement and training: Eight female health assistants of Matlab project will be utilized in this study as interviewers. They have the requisite education and background to accomplish this work. These workers will receive extensive training by the investigators, hospital physicians and technicians of MCH-FP project, Matlab. They will pre-test the questionnaires related to different aspects of the study to test their adequacy and understanding of importance and purpose of their work. The female health assistants will be required to stay a day or two with several women who are at different stages of pregnancy or experienced a recent pregnancy outcome. This will help the female health assistants to observe some of their activities and behaviour which will be included in the final questionnaires.
  
3. Report writing: The study will be completed within a year. Listed below is a tentative plan of major tabulations to be generated in this investigation:
  - a) Personal habits (namely bathing, smoking, sleeping, rest, wearing cloths, amulets and lifting heaving weights) according to gestation period, age and education of women.
  - b) Avoidance of certain physical activities and movements with justification according to gestation period.
  - c) Type of foods preferred during pregnancy according to given reasons.
  - d) Type of foods avoided by pregnant women according to stated reasons.
  - e) Intake of more than or less than normal food by pregnant women with their stated reasons.
  - f) Type of illness or complaints, treatment and cost of treatment during pregnancy.
  - g) Place of delivery according to parity, age and education of women.

- h) Type of food avoided and specially taken after child-birth according to duration and the given reason.
- i) Delivery complications of women and or newborn child according to parity, age and gestation period.
- j) Methods of cord care (cutting and dressing the umbilical cord).
- k) Hand washing practice of birth attendant and other sterilization method used.
- l) Distribution of birth attendants according to type, age, marital status, remuneration, experience and training.

#### D. SIGNIFICANCE

Studies on the sociocultural aspects of care during pregnancy, child-birth and post-partum period are few in Bangladesh and elsewhere. The ICDDR,B Matlab field set-up provides an unique opportunity and an excellent framework to carry out such a study. Beliefs, customs and practices related to personal hygiene, food habits, illness and cure, care of the mother and child at delivery and post-partum period will have impact on morbidity, mortality and nutrition status. Knowledge gained through such a study will have immense importance to ICDDR,B as well as to other health organizations and national policy makers since the results will have important implications for maternal child health, family planning and nutrition education in rural Bangladesh.

E. FACILITIES REQUIRED

- Office/Laboratory space - None
- Hospital/Animal resources - None
- Logistic support - One speedboat 8 hours per working day.  
Eight country-boats for transportation field workers.
- Personnel - Eight female health assistants, one supervisor, key punching, computing, statistical and secretarial facilities.
- Data Management - Key punching and computer facilities.
- Supplies - Stationeries, punch cards, tapes, etc.

F. COLLABORATIVE ARRANGEMENT - None

REFERENCES

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SECTION III - DETAILED BUDGET

1. PERSONNEL SERVICES

<u>Name</u>	<u>Position</u>	<u>% effort</u>	<u>No. of days</u>	<u>Annual Salary</u>	<u>Project Requirements (FY 1981)</u>		
					<u>Taka</u>	<u>Dollar</u>	
M.S. Islam	Asst. Scientist	60	260	101,760	61,056	-	
Dr. P. Clauquin	Field Coordinator	10*	260	-	-	-	
To be named	Field Research Officer, Grade I	35	260	48,591	17,007	-	
To be named	8 Health Assistants (female)	35*	260	-	-	-	
To be named	Data Entry Technicians	20	65	21,872	1,094	-	
To be named	Coder	50	65	21,872	2,734	-	
To be named	Statistical Officer	20	65	46,304	2,316	-	
To be named	8 Boatmen	35*	260	-	-	-	
To be named	Secretarial/typist	10	260	46,304	4,631	-	
					<u>Sub-Total</u>	<u>88,838</u>	-

\* No fund is required as time already budgeted in MCH-FP Project, Matlab.



2. SUPPLIES AND MATERIALS

Items	Unit Cost	Quantity	Project Requirements (FY'81)	
			Taka	Dollars
Pen, ball point, black	Tk. 7.00	20 each	140	-
Refill, black	" 2.00	60 "	120	-
Pencil, wooden	" 2.00	20 "	40	-
Pad, octave	" 7.00	10 "	70	-
Pad, foolscap, plain	" 14.00	6 "	84	-
Pad, foolscap, lined	" 15.00	6 "	90	-
Clip board	" 10.00	10 "	100	-
Scissors	\$ 3.17	1 "	-	3.17
Stapler	Tk.50.00	1 "	50	-
Staples	" 6.00	4 boxes	24	-
Clip, paper jem	" 5.00	4 "	20	-
Scotch tape	\$ 0.33	5 each	-	1.65
File fastener	\$ 1.71	12 boxes	-	20.52
Blue cover file	Tk. 2.45	600 each	1,470	-
IBM cards	\$ 38.00	1000 "	-	3.80
Multivitamin tablets	Tk.47.00	5000 "	235	-
Aspirin tablets	" 90.00	2000 "	180	-
Sub-total			2,633	29.14

3. EQUIPMENT

None

4. PATIENT HOSPITALIZATION

None

5. OUT-PATIENT CARE

None

6. ICDDR,B TRANSPORT

Project requirements (FY'81)

Taka

Dollars

Quantity

Unit Cost

Speedboat at Matlab for  
8 hours per day

Tk. 105.00

704 hours

73,920

7. TRAVEL AND TRANSPORTATION  
OF PERSONS

Per diem at Matlab

Tk. 150.00

36 overnights

5,400

8. TRANSPORTATION OF THINGS

None

9. RENT, COMMUNICATION AND  
UTILITIES

None

10. PRINTING & REPRODUCTION

Mimeograph

Tk. 00.20

5000 each

1,000

X-roxing

" 00.50

500 "

250

Special reproduction

" 4.00

25 "

100

Cover printing & binding

" 2.30

100 "

230

Printing forms

" 300.00

5000 "

1,500

Sub-total,

3,080

11. OTHER CONTRACTUAL SERVICES

Computer services 10 hours @ Tk. 1000.00 per hour Tk. 10,000

12. CONSTRUCTION, RENOVATION, ALTERATIONS

None

13. MISCELLANEOUS

None

E. BUDGET SUMMARY

<u>CATEGORY</u>	<u>FY'81</u>	
	<u>TAKAS</u>	<u>DOLLARS</u>
1. Personnel	88,838	-
2. Supplies and Materials	2,633	29.14
3. Equipment	-	-
4. Patient Hospitalization	-	-
5. Out-patient Care	-	-
6. ICDDR,B Transport	73,920	-
7. Travel and Transportation of Persons	5,400	-
8. Transportation of Things	-	-
9. Rent, Communication and Utilities	-	-
10. Printing & Reproduction	3,080	-
11. Other Contractual Services	10,000	-
12. Construction, Renovation, Alterations	-	-
13. Miscellaneous	-	-
Total	<u>183,871</u>	<u>29.14</u>
Total (in Dollars)	11,564.21*	29.14
Grand Total (in dollars)	11,593.35, say	US \$11,594

\* Calculated at @ Tk.15.90/\$1.00

CONSENT FORM

I know that the ICDDR,B (former CRL) Female Health Assistants are collecting information about beliefs, knowledge, attitude, practices and customs related to physical activities, movements, personal hygiene, diet, illness and treatment during pregnancy and child-birth. They have included me as one of their respondents. I understand that I have the right to refuse to respond and I can withdraw from the study whenever necessary. In case of my discontinuity from the study I will not be liable for explanation.

I am also assured that confidentiality will be maintained about all information.

Signature/Left thumb impression

Date: \_\_\_\_\_

## সম্মতি পত্র

আমি অবগত আছি যে আই, সি, ডি, ডি, আর, বি-র (ভূচণ্ডী কলেজ রিচার্চ  
ন্যাশনালিস্ট) মহিলা কমিটির পঠিত হওয়া ও সম্মতি প্রসবকালীন সময়ে মহিলাদের  
দৈনিক কার্যক্রম, চনাফেরা, পরিষ্কার-পরিচ্ছন্নতা, স্বাস্থ্য-প্রত্য, রোগ-ব্যাদি ও  
তাহার চিকিৎসা সম্বন্ধে বিশ্বাস, জ্ঞান, মনোভাব ও প্রচলিত সামাজিক রীতিনীতি  
সম্বন্ধে তথ্য সংগ্রহ করিতেছেন। আরও অনেক মহিলাসহ সংগে তাহারা আমাকে  
সাক্ষাৎদ্বারা নির্বাচন করিয়াছেন। আমি জানি যে তাহারা সাক্ষাৎদ্বারা না করার  
অধিকার আছে এবং যে কোন সময় এ কার্যক্রমে অংশ গ্রহণ হইতে বিরত থাকিতে  
পারি। এরপর যদি তাহাদের সংগে সহযোগিতা না করি তবে আমাকে জবাবদিহি  
করিতে হইবে না।

আমার দেওয়া সমস্ত তথ্যাবলী সম্বন্ধে প্রয়োজনীয় গোপনীয়তা রক্ষা  
করা হইবে এ বিজ্ঞপ্তি পাইয়া সাক্ষাৎদ্বারা করিতে সম্মতি দিলাম।

মহিলাসহকারী বা হাতের সাক্ষাৎদ্বারা

তারিখ-----

MATERNAL AND CHILDCARE - SOCIOCULTURAL ASPECTS

Pregnancy Report (PR)

Name of village \_\_\_\_\_ Bari \_\_\_\_\_

Name of woman \_\_\_\_\_ Census No. \_\_\_\_\_

Age \_\_\_\_\_ Education \_\_\_\_\_ Name of husband \_\_\_\_\_

Occupation \_\_\_\_\_ Education \_\_\_\_\_ Religion \_\_\_\_\_

Number of family members \_\_\_\_\_ Area of dwelling space (sq.ft) \_\_\_\_\_

Woman staying now at: Husband's residence \_\_\_\_\_ Father's residence \_\_\_\_\_

Any other place (specify) \_\_\_\_\_

Information on the women during pregnancy:

Date of last menstruation period \_\_\_\_\_ Estimated length of gestation (month) \_\_\_\_\_

Woman breast-feeding now: Yes \_\_\_\_\_ No \_\_\_\_\_ N.A. \_\_\_\_\_

Age of youngest living child (if any) \_\_\_\_\_ Sex: M/F/N.A. \_\_\_\_\_

Status of woman in family: Mother \_\_\_\_\_ Mother-in-law \_\_\_\_\_ Daughter-in-law \_\_\_\_\_

Any other (specify) \_\_\_\_\_

Woman takes bath daily: Yes \_\_\_\_\_ No \_\_\_\_\_ If no, how often she takes bath \_\_\_\_\_, the reason for not taking daily bath \_\_\_\_\_

Does she smoke? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how often she smokes \_\_\_\_\_

Does she chew betelnut leaves? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how often she chews betelnut leaves daily \_\_\_\_\_

Does she wear loose clothes? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the reason \_\_\_\_\_

Does she use any footwear (shoes etc)? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the reason \_\_\_\_\_

\*How does conception take place? \_\_\_\_\_

How is the initial body formed in the mother's womb? \_\_\_\_\_

What do you think will be the sex of your child? \_\_\_\_\_

If you think your child will be of either sex, would you tell us the ground? \_\_\_\_\_

No. of hours she sleeps daily: \_\_\_\_\_

No. of hours she takes rest (after mid-day): \_\_\_\_\_

When sleeping, does she lie on the back? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, state the reason \_\_\_\_\_

If the woman is wearing or would like to wear any amulet. Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the reason \_\_\_\_\_

Did woman lift or would she lift any heavy weight (if required)? Yes \_\_\_\_\_ No \_\_\_\_\_ N.A. \_\_\_\_\_

If no, state the reason \_\_\_\_\_

Woman was forbidden or would be forbidden to sit in the doorway: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the reason \_\_\_\_\_

She was forbidden or would be forbidden to stand in the doorway: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the reason \_\_\_\_\_

Woman was discouraged or would be discouraged to beat any living being: Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes): Name of the living being                      the reason for not beating

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

She was discouraged or would be discouraged to kill any living being: yes \_\_\_\_\_ No \_\_\_\_\_

(If yes): Name of the living being                      the reason for not killing

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_



Did Woman visit or would she visit the following persons, if required?

<u>Person</u>	<u>Yes/No</u>	<u>the reason for not visiting</u>
Seriously ill person	_____	_____
Dead person	_____	_____
Another woman during child-birth	_____	_____

Did she visit or would she visit the following places, if required?

<u>Places</u>	<u>Yes/No</u>	<u>The reason for not visiting</u>
Neighbourhood	_____	_____
Other villages	_____	_____
Other distant places	_____	_____
Graveyard	_____	_____
Bamboo Grove	_____	_____

Did woman perform the following activities if required?

<u>Activities</u>	<u>Yes/No</u>	<u>the reason for not performing</u>
1. Cooking	_____	_____
2. Fetching water	_____	_____
3. Husking paddy (by hand)	_____	_____
4. Husking paddy (pedal)	_____	_____
5. Grinding (pounding) rice	_____	_____
6. Boiling paddy	_____	_____
7. Washing clothes	_____	_____
8. Plastering floor with clay	_____	_____
9. Plastering floor with cow-dung	_____	_____
10. Working in the field (excluding gathering paddy)	_____	_____

<u>Activities</u>	<u>Yes/No</u>	<u>the reason for not performing</u>
11. Threshing paddy	_____	_____
12. Weaving clothes	_____	_____
13. Sweeping/Cleaning	_____	_____
14. Cleaning animal shed	_____	_____
15. Drying paddy	_____	_____
16. Gathering paddy	_____	_____
17. Fishing	_____	_____
18. Drying jute	_____	_____
19. Tying down cows, goats etc.	_____	_____
20. Sewing quilt	_____	_____
21. Frying rice	_____	_____
22. Making nets	_____	_____
23. Washing jute	_____	_____
24. Any other (specify)	_____	_____

Eating habit of woman:

Did woman eat or would she eat from a common utensil with her children? yes \_\_\_ No \_\_\_ N.A. \_\_\_

Did she eat or would she eat left-over foods by her children? Yes \_\_\_ No \_\_\_ N.A. \_\_\_

Did woman actually take the larger share or would she like to take the larger share of any of the following food items?

<u>Food items</u>	<u>Yes/No</u>	<u>the reason for taking the larger share</u>
Rice	_____	_____
Wheat	_____	_____
Fish	_____	_____
Dry Fish	_____	_____

<u>Food items</u>	<u>Yes/No</u>	<u>the reason for taking the larger share</u>
Meat	_____	_____
Milk	_____	_____
Egg	_____	_____
Dal	_____	_____
Potato	_____	_____
Vegetables	_____	_____
Fruits	_____	_____
Any other (specify)	_____	_____

Did she feel she should have taken the larger share of any of the following food items: (if not actually taken or nor likely to take as reported in the preceding question)?

<u>Food items</u>	<u>Yes/No</u>	<u>the reason, she should have taken the larger share</u>
Rice	_____	_____
Wheat	_____	_____
Fish	_____	_____
Dry Fish	_____	_____
Meat	_____	_____
Milk	_____	_____
Egg	_____	_____
Dal	_____	_____
Potato	_____	_____
Vegetables	_____	_____
Fruits	_____	_____
Any other (specify)	_____	_____

Which of the following foods the woman took specially?

<u>Name of foods specially taken</u>	<u>the reason for taking</u>
Rice	_____
Wheat	_____
Fish	_____
Dry Fish	_____
Meat	_____
Milk	_____
Egg	_____
Dal	_____
Potato	_____
Vegetables	_____
Fruits	_____
Burned soil	_____
Fried rice	_____
Uncooked rice	_____
<u>Citrus or sour foods (specify):</u>	_____
_____	_____
<u>Any other (specify):</u>	_____
_____	_____

Which of the following foods the woman avoided?

<u>Name of foods avoided</u>	<u>the reason for avoiding</u>
Rice	_____
Wheat	_____
Fish	_____
Dry Fish	_____

<u>Name of foods avoided</u>	<u>the reason for avoiding</u>
Meat	_____
Milk	_____
Egg	_____
Dal	_____
Potato	_____
Vegetables	_____
Fruits	_____
Burned soil	_____
Fried rice	_____
Uncooked rice	_____
<u>Citrus or sour foods (specify):</u>	_____
_____	_____
<u>Any other (Specify):</u>	_____
_____	_____

Did woman take more than average of any food? Yes/No.

(If yes) <u>Name of foods</u>	<u>The reason for taking more than average</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Did she take less than average of any food? Yes/No.

(If yes) <u>Name of foods</u>	<u>The reason for taking less than average</u>
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____

Which foods did woman eat yesterday?

<u>Meal</u>	<u>Food items</u>
Morning	_____
Mid-morning	_____
Noon	_____
After noon	_____
Night	_____

History of illness:

Did woman have any illness/complaints? Yes/No \_\_\_\_\_

<u>(If yes), illness/complaints</u>	<u>Duration</u>	<u>Days in bed</u>	<u>Type of treatment received</u>	<u>Medicine or drugs</u>	<u>Cost of treatment</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

If no treatment received, state the reason \_\_\_\_\_

If treatment was given on subsidy or free, to whom would she prefer to go for treatment? \_\_\_\_\_

Remarks (if any) \_\_\_\_\_

Reported by (Female interviewer) \_\_\_\_\_ Date \_\_\_\_\_

Verified by (Supervisor) \_\_\_\_\_ Date \_\_\_\_\_

MATERNAL AND CHILD CARE - SOCIOCULTURAL ASPECTS

Birth Report (BR)

Name of village \_\_\_\_\_ Bari \_\_\_\_\_ Name of Husband/Father \_\_\_\_\_

Information on woman:

Name \_\_\_\_\_ Census No. \_\_\_\_\_ Age \_\_\_\_\_

Length of gestation (month) \_\_\_\_\_ Outcome of previous pregnancy (breach  
delivery/miscarriage/Still birth/neonatal death, etc.) \_\_\_\_\_

Parity \_\_\_\_\_ No. of living children \_\_\_\_\_ No. of sons \_\_\_\_\_ No. of  
daughters \_\_\_\_\_ Is she breast-feeding her previous child? Yes \_\_\_\_\_ No \_\_\_\_\_

N.A. \_\_\_\_\_ Age of previous living child (if any) \_\_\_\_\_ Sex: M/F/N.A. \_\_\_\_\_

Place of birth: Husband's residence \_\_\_\_\_ Father's residence \_\_\_\_\_

Any other place (specify) \_\_\_\_\_ Delivery took place in:

Living room \_\_\_\_\_ Kitchen \_\_\_\_\_ Special room \_\_\_\_\_ Veranda \_\_\_\_\_

Any other place (specify) \_\_\_\_\_ Any kind of bedding  
provided to woman at delivery? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, state the kind of  
bedding \_\_\_\_\_

No. of days she stayed in birth room \_\_\_\_\_ Stated reason \_\_\_\_\_

Type of birth attendant \_\_\_\_\_ The reason for choosing \_\_\_\_\_

\_\_\_\_\_ Any complication of woman at time of delivery? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes),	Type of complication	Duration (days)	Type of treatment received	Kind of drug etc	Cost of treatment
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

If no doctor was consulted, give reason \_\_\_\_\_

If treatment was given on subsidy or free, to whom would she go for treatment?  
\_\_\_\_\_

Woman takes bath daily? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, how often she takes bath? \_\_\_\_\_ The reason for not bathing  
daily \_\_\_\_\_

Does she smoke? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how often she smokes? \_\_\_\_\_

Does she chew betelnut leaves? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how often she chews  
betelnut leaves daily? \_\_\_\_\_ Does she use footwear (shoes etc)? Yes \_\_\_\_\_

No \_\_\_\_\_ If yes, state reason \_\_\_\_\_

No. of hours she sleeps daily \_\_\_\_\_ No. of hours she takes rest (after  
mid-day) \_\_\_\_\_ Is woman wearing any amulet after delivery? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how long she will retain it \_\_\_\_\_ The reason for wearing amulet \_\_\_\_\_

Did woman perform the following activities if required, prior to the pregnancy  
outcome?

<u>Activities</u>	<u>Yes/No</u>	<u>The reason for not performing</u>
1. Cooking	_____	_____
2. Fetching water	_____	_____
3. Husking paddy (by hand)	_____	_____
4. Husking paddy (pedal)	_____	_____
5. Grinding (pounding) rice	_____	_____
6. Boiling paddy	_____	_____
7. Washing clothes	_____	_____
8. Plastering floor with clay	_____	_____
9. Plastering floor with cow-dung	_____	_____
10. Working in the field (excluding gathering paddy)	_____	_____
11. Threshing paddy	_____	_____



<u>Activities</u>	<u>Yes/No</u>	<u>The reason for not performing</u>
12. Weaving clothes	_____	_____
13. Sweeping/cleaning	_____	_____
14. Cleaning animal shed	_____	_____
15. Drying paddy	_____	_____
16. Gathering paddy	_____	_____
17. Fishing	_____	_____
18. Drying jute	_____	_____
19. Tying down cows, goats, etc.	_____	_____
20. Sewing quilt	_____	_____
21. Frying rice	_____	_____
22. Making nets	_____	_____
23. Washing jute	_____	_____
24. Any other (specify): _____	_____	_____
_____	_____	_____
_____	_____	_____

Which of the following foods the woman took specially prior to delivery?

<u>Name of foods specially taken</u>	<u>The reason for taking</u>
Rice	_____
Wheat	_____
Fish	_____
Dry fish	_____
Meat	_____
Milk	_____
Egg	_____

<u>Name of foods specially taken</u>	<u>The reason for taking</u>
Dal	
Potato	
Vegetables	
Fruits	
Burned soil	
Fried rice	
Uncooked rice	

Citrus or sour foods (specify):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Any other (specify): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Which of the following foods the woman avoided prior to delivery?

<u>Name of the foods avoided</u>	<u>The reason for avoiding</u>
Rice	
Wheat	
Fish	
Dry fish	
Meat	
Milk	
Egg	
Dal	

Name of foods avoided

The reason for avoiding

Potato

Vegetables

Fruits

Burned soil

Fried rice

Uncooked rice

Citrus or sour foods (specify):

Any other (specify):

Which of the following foods the woman took specially following delivery?

Name of foods taken specially

No. of days taken

The reason for taking

Rice

Wheat

Fish

Dry fish

Meat

Milk

Egg

Dal

Potato

Vegetables

Fruits

<u>Name of foods taken</u>	<u>No. of days taken</u>	<u>The reason for taking</u>
<u>Any other (specify):</u>		

Which of the following foods the woman avoided, following delivery?

<u>Name of foods avoided</u>	<u>No. of days avoided</u>	<u>The reason for avoiding</u>
Rice		
Wheat		
Fish		
Dry fish		
Meat		
Milk		
Egg		
Dal		
Potato		
Vegetables		
Fruits		
<u>Any other (specify):</u>		

Did woman take more than normal of any food prior to delivery? Yes/No \_\_\_\_\_

(If yes),	<u>Name of foods</u>	<u>The reason for taking more than average</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

Did she take less than normal of any food prior to delivery? Yes/No \_\_\_\_\_

(If yes),	<u>Name of food</u>	<u>The reason for taking less than normal</u>
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____

Which foods did she take yesterday?

<u>Meal</u>	<u>Food items</u>
Morning	_____
Mid-morning	_____
Noon	_____
Afternoon	_____
Night	_____

History of illness:

Did woman have any illness/complaints prior to delivery? Yes/No \_\_\_\_\_

(If yes), <u>Illness/complaints</u>	<u>Duration</u>	<u>Days in bed</u>	<u>Type of treatment received</u>	<u>Medicine or drug</u>	<u>Cost of treatment</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

If no treatment received, state the reason \_\_\_\_\_

If treatment was given on subsidy or free, to whom would she go for treatment? \_\_\_\_\_

Information on Pregnancy outcome:

Date of pregnancy outcome \_\_\_\_\_ Result of pregnancy outcome \_\_\_\_\_

Sex \_\_\_\_\_ Census No. (if born alive \_\_\_\_\_ Birth weight (kg) \_\_\_\_\_

Name of the newborn \_\_\_\_\_ None/Nickname/Real name \_\_\_\_\_

If named, when? \_\_\_\_\_ Who named? \_\_\_\_\_

Why the newborn is so named? \_\_\_\_\_

If not named yet, state the reason \_\_\_\_\_

Any complication of the newborn at the time of delivery? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes), the complications	Type of treatment offered	Kind of medicine or drug	Cost of treatment
Breathing difficulty	_____	_____	_____
Crying difficulty	_____	_____	_____
Inability to suck	_____	_____	_____
Injured during birth	_____	_____	_____
Blue baby	_____	_____	_____
Birth defect	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

If no treatment offered, state the reason \_\_\_\_\_

If treatment was given on subsidy or free, to whom would the parents go for treatment? \_\_\_\_\_

Any illness of the infant after birth? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes), illness	Duration	Type of treatment offered	Kind of medicine or drug	Cost of treatment
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

If no treatment received, state the reason \_\_\_\_\_

If treatment was on subsidy or free, to whom would parents go for treatment? \_\_\_\_\_

Was infant given any inaugural feeding (not breast-milk)? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes), name the item \_\_\_\_\_ When given \_\_\_\_\_ How given \_\_\_\_\_

Was the newborn given colostrum? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, state the reason \_\_\_\_\_

Was the infant bathed daily? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, how often he/she was bathed? \_\_\_\_\_, state the reason for not bathing daily \_\_\_\_\_

Was the newborn exposed to sun? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, state the reason \_\_\_\_\_

Was the newborn taken out of the birth room? Yes \_\_\_\_\_ No \_\_\_\_\_

If no state the reason \_\_\_\_\_ No. of days \_\_\_\_\_

Information on the birth attendant:

Name \_\_\_\_\_ Village \_\_\_\_\_ bari \_\_\_\_\_

Age \_\_\_\_\_ Marital Status \_\_\_\_\_ Education \_\_\_\_\_

Remuneration, wages/gift etc. received (if any) for the delivery \_\_\_\_\_

No. of deliveries attended last year \_\_\_\_\_ Length of experience (years) \_\_\_\_\_

Any training received: Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state the type of training \_\_\_\_\_ duration \_\_\_\_\_

Hand washing before delivery: With soap \_\_\_\_\_ with any other substance (specify) \_\_\_\_\_

How soon after birth the umbilical cord was cut? \_\_\_\_\_

Name of instrument used to cut the umbilical cord \_\_\_\_\_

Was instrument sterilized before use? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state how \_\_\_\_\_ If no, state the reason \_\_\_\_\_

Why was this instrument used? \_\_\_\_\_

Method of dressing the umbilical cord: Applied ash or burnt earth but not tied \_\_\_\_\_

Tied with thread but ash or burnt earth not applied \_\_\_\_\_ Tied with thread

and applied ash or burnt earth \_\_\_\_\_ Any other (Specify) \_\_\_\_\_

If the umbilical cord was dressed with any substance, state the reason(s) for the dressing \_\_\_\_\_

If the umbilical cord was neither tied nor any substance was applied in it, state the reason \_\_\_\_\_

\* Describe the care of the placenta \_\_\_\_\_

Has birth attendant any knowledge of family planning? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, name the source of knowledge \_\_\_\_\_

If yes, name the contraception she knows of \_\_\_\_\_

If yes, has she recommended any method of contraception? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what method? \_\_\_\_\_ What ground? \_\_\_\_\_

Remarks (if any) \_\_\_\_\_

Reported by (Female interviewer) \_\_\_\_\_ Date \_\_\_\_\_

Verified by (Supervisor) \_\_\_\_\_ Date \_\_\_\_\_

\* The placenta came out spontaneously \_\_\_\_\_ Placenta required manipulation (hand etc) \_\_\_\_\_

The umbilical cord was cut after the placenta came out \_\_\_\_\_ Umbilical cord was cut before the placenta came out \_\_\_\_\_. If the umbilical cord was cut before the placenta came out state the reason/circumstances \_\_\_\_\_



MATERNAL AND CHILD CARE - SOCIOCULTURAL ASPECTS

Post-partum Report (PPR)

Name of village \_\_\_\_\_ Bari \_\_\_\_\_

Name of Husband/Father \_\_\_\_\_ Name of woman \_\_\_\_\_

Census No. \_\_\_\_\_

Information on woman since last visit:

Woman staying now at: Husband's residence \_\_\_\_\_ Father's residence \_\_\_\_\_

Any other place(specify) \_\_\_\_\_

Is woman breastfeeding her previous child? Yes \_\_\_\_\_ No \_\_\_\_\_ N.A. \_\_\_\_\_

Age of previous living child (if any) \_\_\_\_\_ Sex: M/F/N.A. \_\_\_\_\_

Woman takes bath daily: Yes \_\_\_\_\_ No \_\_\_\_\_

If no, how often she takes bath? \_\_\_\_\_

The reason for not taking daily bath \_\_\_\_\_

Does she smoke? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how often she smokes? \_\_\_\_\_

Does she chew betelnut leaves? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how often she chews betelnut leaves daily? \_\_\_\_\_

Does woman eat from common utensils with children? Yes \_\_\_\_\_ No \_\_\_\_\_ N.A. \_\_\_\_\_

Does she eat left over foods by children? Yes \_\_\_\_\_ No \_\_\_\_\_ N.A. \_\_\_\_\_

Did woman perform the following activities, if required?

<u>Activities</u>	<u>Yes/No.</u>	<u>The reason for not performing</u>
1. Cooking	_____	_____
2. Fetching water	_____	_____
3. Husking paddy (by hand)	_____	_____
4. Husking paddy (pedal)	_____	_____
5. Grinding (pounding) rice	_____	_____
6. Boiling paddy	_____	_____
7. Washing clothes	_____	_____
8. Plastering floor with clay	_____	_____
9. Plastering floor with cow-dung	_____	_____
10. Working in the field (excluding gathering paddy)	_____	_____
11. Threshing paddy	_____	_____
12. Weaving clothes	_____	_____
13. Sweeping/cleaning	_____	_____
14. Cleaning animal shed	_____	_____
15. Drying paddy	_____	_____
16. Gathering paddy	_____	_____
17. Fishing	_____	_____
18. Drying jute	_____	_____
19. Tying down cows, goats etc.	_____	_____
20. Sewing quilt	_____	_____
21. Frying rice	_____	_____
22. Making nets	_____	_____
23. Washing jute	_____	_____
24. Any other (specify)	_____	_____

Which of the following foods the woman took specially?

<u>Name of foods taken specially</u>	<u>No. of days taken</u>	<u>The reason for taking</u>
Rice		
Wheat		
Fish		
Dry fish		
Meat		
Milk (specify)		
Egg		
Dal		
Potato		
Curd		
Vegetable		
Fruits		
<u>Any other (specify)</u>		

Which of the following foods the woman avoided?

<u>Name of foods avoided</u>	<u>No. of days avoided</u>	<u>The reason for avoiding</u>
Rice		
Wheat		
Fish		
Dry fish		

<u>Name of foods avoided</u>	<u>No. of days avoided</u>	<u>The reason for avoiding</u>
Meat	_____	_____
Milk (specify) _____	_____	_____
Egg	_____	_____
Dal	_____	_____
Potato	_____	_____
Curd	_____	_____
Vegetable	_____	_____
Fruits	_____	_____
<u>Any other (specify):</u>	_____	_____
_____	_____	_____
_____	_____	_____

Which food did she take yesterday?

<u>Meal</u>	<u>Food items</u>
Morning	_____
Mid Morning	_____
Noon	_____
Afternoon	_____
Night	_____

Did woman have any illness/complaints? Yes/No

<u>(If yes), Illness/complaints</u>	<u>Duration</u>	<u>Days in bed</u>	<u>Type of treatment received</u>	<u>Medicine or Drug</u>	<u>Cost of treatment</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

If no treatment received, state the reason \_\_\_\_\_

If treatment was given on subsidy or free, to whom would she go for treatment?  
 \_\_\_\_\_

Information on the infant since last visit:

Age \_\_\_\_\_ Sex \_\_\_\_\_ Census No \_\_\_\_\_

Name \_\_\_\_\_ None/real name/nick name \_\_\_\_\_

If named, when? \_\_\_\_\_ Who named? \_\_\_\_\_

Why the newborn is so named? \_\_\_\_\_

If not named yet, state the reason \_\_\_\_\_

Is the newborn bathed daily? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, how often the baby is bathed? \_\_\_\_\_ State the reason for not  
 bathing daily \_\_\_\_\_

Was the newborn exposed to sun? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when \_\_\_\_\_ If no, state the reason \_\_\_\_\_

Was the newborn taken out of the birth room? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, when \_\_\_\_\_ If no, state the reason \_\_\_\_\_

In the family there is presence of: Paternal Grand-mother \_\_\_\_\_

Maternal grand-mother \_\_\_\_\_ Step mother \_\_\_\_\_

Grown-up sister(s) \_\_\_\_\_ Any other relation who takes special care  
 of the newborn. (specify) \_\_\_\_\_

Have your infant suffered any illness? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes), illness	Duration	Type of treat- ment received	Kind of medicine or drugs	Cost of Treatment
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

If no treatment received, state the reason \_\_\_\_\_

If treatment was on subsidy or free, to whom would parents go for treatment? \_\_\_\_\_

In case there was any illness, was breast-milk withheld? Yes \_\_\_\_\_ No \_\_\_\_\_

In case there was any illness, was breast-milk reduced? Yes \_\_\_\_\_ No \_\_\_\_\_

In case there was any illness, was breast-milk increased? Yes \_\_\_\_\_ No \_\_\_\_\_

Remarks (if any) \_\_\_\_\_

Reported by (Female interviewer) \_\_\_\_\_ Date \_\_\_\_\_

Verified by (Supervisor) \_\_\_\_\_ Date \_\_\_\_\_