

HDM04.	What is the highest level of schooling you have completed? 0 = Never attended, 1 = Preschool, 2 = Primary/Basic, 3 = Secondary, 4 = Post Secondary, 88 = Don't know <i>If the respondent is also the household head, skip next question</i>	
HDM05.	What is the highest level of schooling the head of the household has completed? 0 = Never attended, 1=Preschool, 2 = Primary/Basic, 3 = Secondary, 4 = Post Secondary, 88 = Don't know	

Food Security

Food Supply		FS	
FFS03.	Now I would like to ask you about your household's food supply during the different months of the year. When responding, please think back over the last 12 months. In the past 12 months, were there months in which you did not have enough food to meet your family's needs? Yes = 1 No = 0 <i>If no, skip to next section</i>		
FFS04.	<i>Working backwards from the current month, place a one in the box if the respondent identifies that months as one in which the household did not have enough food to meet their needs.</i> In which were the months (in the past 12 months) in which you did not have enough food to meet your family's needs? <i>Yes = 1 No = 0</i>		
	January	May	September
	February	June	October
	March	July	November
	April	August	December

Household Diet Diversity		DD
FDD01.	How many meals (including porridge or bread) did adults eat yesterday in your household? <i>(Respondent should clearly outline the actual meals)</i>	
FDD02.	How many meals (including porridge or bread) did the children eat yesterday in your household? IF NO CHILDREN IN THE HH, WRITE 99.	
FDD03.	Now I would like to ask you about the type of foods that the children in your household ate yesterday during the day and the night <i>Read the list of foods. Place a one in the box if anyone in the household ate the food in question. Place a zero in the box if no one in the household ate the food. Place 88 in the box if the respondent does not know.</i>	Yes = 1 No = 0 DK = 88

a) Any ugali, bread, rice, or any other foods made from millet, sorghum, maize, rice or wheat?	a.
b) Any potatoes, cassava or sweet potatoes?	b.
c) Any vegetables?	c.
d) Any fruits?	d.
e) Any beef, pork, lamb goat, rabbit, chicken, liver, kidney or other organ meats?	e.
f) Any eggs?	f.
g) Any fresh or dried fish?	g.
h) Any food made from beans, peas or nuts?	h.
i) Any milk or other milk product?	i.
j) Any foods made with oil, fat or butter?	j.
k) Any sugar or honey?	k.
l) Any other foods such as coffee or tea?	l.

Household Hunger Scale		HH
FHH01.	In the past four weeks was there ever no food to eat of any kind in your household because of lack of resources to get food? Yes = 1 No = 0(<i>If no skip next question</i>)	
FHH02.	How often did this happen? 1 = rarely (about once or twice a month) 2 = sometimes (about once a week) 3 = often (about twice a week or more)	
FHH03.	In the past four weeks, did any child go to sleep at night hungry because there was not enough food? Yes = 1 No = 0(<i>If no skip next question</i>)	
FHH04.	How often did this happen? 1 = rarely (about once or twice a month) 2 = sometimes (about once a week) 3 = often (about twice a week or more)	
FHH05.	In the past four weeks, did any child go a whole day and night without eating anything because there was not enough food? Yes = 1 No = 0(<i>If no skip next question</i>)	
FHH06.	How often did this happen? 1 = rarely (about once or twice a month) 2 = sometimes (about once a week) 3 = often (about twice a week or more)	

Coping Strategies		CS				
FCS01.	In the past <u>30 days</u> , how frequently did your household resort to one or more of the following strategies in order to access food? CIRCLE ONE FREQUENCY FOR EACH COPING STRATEGY IN THIS LIST					
		Never	Seldom (<1 day a week)	Once in a while (1-2 days a week)	Pretty often (3-6 days/week)	Almost every day
	a) Limit portion size at mealtimes?	1	2	3	4	5
	b) Reduce number of meals eaten per day?	1	2	3	4	5
	c) Skip entire days without eating?	1	2	3	4	5
	d) Borrow food or rely from help from a friend or relative?	1	2	3	4	5
	e) Rely on less expensive or less preferred foods?	1	2	3	4	5
	f) Purchase food on credit, or take a loan to purchase food?	1	2	3	4	5
	g) Gather unusual types/amounts of wild food or hunt?	1	2	3	4	5
	h) Harvest immature crops (e.g. green mealies)? <i>If not applicable circle here N/A</i>	1	2	3	4	5
	i) Send household members to eat elsewhere?	1	2	3	4	5
	j) Send household member to beg?	1	2	3	4	5
	k) Restrict consumption by adults so children can eat more?	1	2	3	4	5
	l) Rely on casual labour for food?	1	2	3	4	5
	a) Avoid spending on healthcare in order to buy food?	Yes 2		No 1		N/A 0
	b) Reduce expenditure on education/withdrew child/children from school in order to buy food?	2		1		0
	c) Reduce expenditure on agricultural livestock input to buy food?	2		1		0

Ante and Post Natal care		
This section is about experiences during the most recent pregnancy. This questions should be administered to a caregiver with a child who is below two years of age		
WNU01.	When you were pregnant with (NAME), did you eat 1 = Less amount than when not pregnant 2 = Same amount 3 = 1 meal more per day 4 = 2 meals more per day than when you were not pregnant?	
WNU02.	During your last pregnancy, did you receive any iron/folate supplements for strengthening your blood? 1 = Yes 0 = No (if 'no', skip to next section) 88 = Don't know/No response (if 'don't know/no response', skip to next section)	
WNU03.	During your last pregnancy, did you take any iron/folate supplements like this (show example)? 1 = Yes 0 = No 88 = Don't know/No response	
WNU04.	During this last pregnancy did you take any alcohol? 1 = Yes 0 = No 88 = Don't know/No response	
WNU05.	Did you take any alcohol after delivery of (name)? 1 = Yes 0 = No 88 = Don't know/No response	
WNU06.	If yes, for how long did you take alcohol after the birth of (name) 1 = <6 months 2 = 6 - 12 months 3 = 12 - 24 months 4 = 24 - 59 months 5 = Others (Specify) _____	
WNU07	Do you currently drink? 1 = Yes 0 = No 88 = Don't know/No response	
Child feeding practices		
SNU01.	Has (NAME) ever been breastfed? 1 = Yes 0 = No (if 'no' skip to question SNU05)	

SNU02.	Since yesterday, including during the day and night, did (name) receive breast milk? 1 = Yes (if 'yes', skip to SNU05) 0 = No 88 = Don't Know/No response	
SNU03.	Is (name) still receiving breast milk? 1 = Yes (if 'yes', skip to SNU05) 0 = No 88 = Don't Know/No response (if 'don't know/no response', skip to SNU05)	
SNU04.	How old was (name) when he or she stopped taking breast milk? <i>Record number of months. If respondent doesn't know, write 888</i>	Months _____
<i>The next few questions are about any meals or snacks that (name) may have had yesterday, during the day or night.</i>		
SNU05.	Did (name) eat any solid, semi-solid or soft foods yesterday, during the day or night? 1 = Yes 0 = No (if 'no', skip to SNU10) 88 = Don't Know/remember (if 'don't know/remember', skip to SNU10)	
SNU06.	How many times did (name) have a meal yesterday, during the day or night? <i>1 = Once 2 = Twice 3 = Thrice 4 = More than thrice 88 = Do not know/ No response</i>	
SNU07.	How many times did (NAME) drink milk, such as tinned, powdered or fresh animal milk yesterday during the day or night? <i>1 = Once 2 = Twice 3 = Thrice 4 = More than thrice 88 = Do not know/ No response</i>	
SNU08.	Since this time yesterday (during the day or the night), did (NAME) eat any grains, sweet potatoes, or cereals, including porridge, ugali, rice, potatoes, etc? 1 = Yes 0 = No 88 = Don't Know/ remember	
SNU09.	Since this time yesterday (during the day or night) did (NAME) eat any orange or yellow colored fruits or vegetables for example, carrots, orange sweet potatoes, mango? 1 = Yes 0 = No 88 = Don't Know/ remember	

SNU10.	Since this time yesterday (during the day or night) did (NAME) eat any other fruits or vegetables? 1 = Yes 0 = No 88 = Don't Know/ remember	
SNU11.	Since this time yesterday (during the day or night) did (NAME) eat any meats, fish or poultry? 1 = Yes 0 = No 88 = Don't Know/ remember	
SNU12.	Since this time yesterday (during the day or night) did (NAME) eat any eggs? 1 = Yes 0 = No 88 = Don't Know/ remember	
SNU13.	Since this time yesterday (during the day or night) did (NAME) eat any beans, peas, or any other legume? 1 = Yes 0 = No 88 = Don't Know/ remember	
SNU14.	Have you ever taken (NAME) to Growth Monitoring and promotion sessions? 1 = Yes 0 = No (if 'no', skip to next section) 88 = Don't Know/No response (if 'don't know/no response', skip to next section)	

Anthropometry		AP
AAP01.	Is (name) a boy or a girl? 1 = Boy 2 = Girl	
AAP02.	What is (name's) date of birth? <i>Write date in format: DD/MM/YYYY</i>	
AAP03.	What is (name's) weight in kilograms? <i>Record weight to the nearest 0.01 kg.</i>	
AAP04.	FOR CHILDREN 0-23 months old, how many centimetres long is (name) when he/she is lying down? <i>Measure length when lying down. Record length to the nearest 0.1 cm. If child is older than 23 months, leave blank.</i>	
AAP05.	FOR CHILDREN 24-59 months old, how many centimeters tall is (name) when he/ she is standing up? <i>Measure height when standing up. Record height to the nearest 0.1 cm. If child is younger than 24 months, leave blank.</i>	

Use the table below to fill data anthropometric measurements for children 6-59 months

Cluster /Village No: _____ Village Name _____ Sub-Location: _____ Date _____ Team number:

Child no.	HH. no.	Name (optional)	Sex (f/m)	Birthday MM/D/Yr	Weight (kg) ±100g	Height (cm) ±0.1cm	Oedema (y/n)	MUAC (cm)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								

Thank for your time and the responses and information you have provided.

Advertisements/Notices/Recruitment Flyers

The text of any advertisement, video display, notice, sign, brochure or flyer used to recruit subjects either

should be included as an attachment.

Not Application

PARENT OR GUARDIAN INFORMED CONSENT FOR CHILD PARTICIPATION IN THE STUDY

Greetings

We would like to inform you that your child has been selected at random to participate in a survey by Mark Mutai and Joel Atuti who currently conducting a study on influence of social demographic factors on stunting in children aged 6-59 months in Rongai Sub County. Mark and Joel are students at Southern Adventist University USA. This form has been given to you so you can find out more about this survey and, if you wish, agree for your child to participate.

The survey is about measurement of weight, height and age and thereafter computation of the nutrition status of the child. This will be compared to the social and demographic factors and conclusion made on whether there is a relationship between various social demographic variables and stunting in children aged 6-59 months.

This survey will help the Ministry of Health and other partners to better understand what contributes to stunting in children aged 6-59 months and put in place strategies to promote proper nutrition. The information will be used to present a general picture of the nutrition status of the children in the community, sub county and the country, but not about individual children. The information collected in this survey from your child will be kept confidential – no names or personal details which could identify your child will be used.

Before we can begin, we would like to seek your agreement to include your child in the survey. If you would like more information before agreeing, please contact Joel Atuti or Mark Mutai (below) who will be happy to assist.

Name: Joel Atuti Phone number: +254 725 737 290

Name: Mark Mutai Phone number: +254 722 485 133

Before providing your consent, I would like to remind you that:

1. Your child's participation in this survey is entirely voluntary, it is your choice whether your child

participates or not.

2. The information shared by your child will be kept confidential.

To help ensure confidentiality, we will not write your name or your child's name on the survey, nor write down particular details that would allow you or your child to be identified.

Do you give your consent to your child participating in this survey?

Yes ____

No ____

By saying yes, that means that you have read this consent form or it has been read to you. You agree voluntarily to your child participating in this survey and you understand that your child has the right to end the survey at any time.

I have read the information on the information sheet, or it has been read to me. I have had the opportunity to ask questions related to the survey and any questions I have asked have been answered to my satisfaction. I consent voluntarily that my child participates in this study and understand that my child has the right to end the interview at any time.

Signature of parent/caregiver _____ Date _____

IRB Approval Letter



September 12, 2016

Principal Investigator: Mark Mutai and Atuti Nyambane

Research Project: Socio demographic factors influencing stunting in children aged 6-59 months in Rongai Sub County Kenya

IRB Tracking Number: 2016-2017-025

Dear Mark and Atuti,

It is a delight to inform you that the Institutional Review Board examined your research study proposal and supporting documents at the IRB committee and has approved your research request as **expedited**. We wish you the very best as you move forward with this study and look forward to reading your findings when they are ready.

If there are minor changes to this research, before making those changes please notify us by completing and submitting FORM B (Certification of Modification, Annual Review, Research Termination, or Research Completion). Please submit applications to irb@southern.edu. If substantial changes are planned you, as the principal investigator, should submit a new IRB FORM A application.

Many blessing to you as you move forward. Please let us know if there is anything else we can do to assist you with this research study.

Always in His service,

Cynthia

Cynthia Gettys, Ph.D.

IRB Chair

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"I applied my mind to **study** and to explore by wisdom all that is done under the heavens..." - Ecclesiastes 2:13

"Research is to see what everyone else has seen and to think what nobody else has through." - Albert Szent-Gyorgyi