

Self-administered questionnaire

Informed consent

This survey, led by **Mihretab M Salasibew**, is being conducted as part of a PhD research on Measurement of new born behaviours and practices in Ethiopia. **Della Berhanu** and **Girmaye Dinsa** from London School of Hygiene and Tropical Medicine in the UK will lead data collection process.

The survey aims at assessing your experiences in asking questions on **Module 3, section 8 of the IDEAS newborn health household survey**. The questionnaire is self-administered and is expected to take not more than 10 minutes of your time. The survey is being conducted anonymously and data will be analysed without reference to your name or the name of the organization you represent or worked for. Data will be accessed only by the primary investigator and all findings from this survey will solely be used for the purpose of this PhD research. There are no known risks to you by participating in this survey and there are no direct benefits to you. However, outcomes of this survey will help in improving measurement of new born behaviours and practices in Ethiopia. Taking part in this survey is your choice. If you feel uncomfortable about any of the questions, you can refuse to answer. If you decide not to participate in this survey, you may not lose any services that you are otherwise receiving. Any questions about this survey, you may call **Della Berhanu** or **Girmaye Dinsa** on _____.

If you are happy to participate in this survey, you are kindly asked to give your consent by signing below and complete the following questions.

Signature: _____

Date: Day _____, Month _____, Year 2006 E.C

S/N	Question	Response
	ABOUT YOU	
1.	Gender _____ (Please circle your answer)	<input type="checkbox"/> Male <input type="checkbox"/> Female
2.	Main occupation _____ (Please write your answer)	My main occupation or job is _____
3.	Education ____ (please write your answer)	The highest level of education I achieved is _____
4.	Where do you normally live? (Please write the woreda or city, and Region you live)	I live in _____
5.	Which language (s) can you speak? (Please circle all that apply)	<input type="checkbox"/> Amharic <input type="checkbox"/> Oromigna <input type="checkbox"/> Guragigna <input type="checkbox"/> Woliyitigna <input type="checkbox"/> Tigrigna <input type="checkbox"/> Sidamigna <input type="checkbox"/> Other (please specify)

Please think about the last mother you interviewed on Module 3, section 8 of the IDEAS newborn health household questionnaire and answer the following

6.	In which region of Ethiopia was that interview carried out? (Please circle one answer)	<input type="checkbox"/> Amhara <input type="checkbox"/> Tigray <input type="checkbox"/> Oromiya <input type="checkbox"/> SNNP <input type="checkbox"/> Other (Please specify) _____
7.	In which month and year was that interview carried out? For example, if it was in February 2004 E.C, enter 06/2004.	<input type="checkbox"/> Month _____ <input type="checkbox"/> Year _____ E.C
8.	How old is the mother? (Please write your answer)	The mother is _____ years old
9.	What is her level of education? (Please circle one answer)	a) Illiterate b) Elementary school or higher
10.	Where did the mother give her last birth? (Please circle one answer)	a) Home b) Health institution
11.	How many live births has the mother had including the last birth? (Please circle one answer)	a) This is her first child b) More than one child
12.	Questions 825-- 828 asked how long after birth did the mother bath her baby. When you first asked this mother this question,	
	a) Would you say the mother understood the question on first attempt ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	b) Did the mother need more explanation in order to help her recall ?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	c) Did the mother need more explanation about how to express time in minutes, hours or days?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	d) If the mother needed more explanation about bathing recall or to express time, what	

	explanations did you provide? (Please write you explanation)	
13	Question 837 asked how long after birth did the mother start breastfeeding her baby. When you first asked this question,	
	a) Would you say the mother understood the question on first attempt? (please circle one answer)	<input type="checkbox"/> YES <input type="checkbox"/> NO
	b) Did the mother need more explanation in order to help her recall? (please circle one answer)	<input type="checkbox"/> YES <input type="checkbox"/> NO
	c) Did the mother need more explanation about how to express time in minutes, hours or days? (please circle one answer)	<input type="checkbox"/> YES <input type="checkbox"/> NO
	d) If the mother needed more explanation about breastfeeding recall or to express time, what explanations did you provide? (Please write you explanation)	

Thank you for your time in completing the questionnaire

Please **RETURN** the completed questionnaire to either Della Berhanu or Girmaye Dinsa.