The factors influencing inappropriate child feeding practices among families receiving nutrition allowance in the Himalayan region of Nepal

Section 1 A: Socio demographic Characteristics

S.N	Question	Response
1	Sex	a) Male
		b) Female
2	How old are you?	
3	What is the highest level of education you have	a) No formal schooling
	completed?	b) Less than primary school
		c) Primary school completed
		Secondary school completed
		d) Higher secondary (10+2)
		e) Above higher secondary
4	What is your ethnic background?	f) Brahmin
		g) Kshetri / Thakuri
		h) Janjati
		i) Dalit
		j) Others
5	What is your occupation?	k) Government employee
		l) Non-government employee
		m) Self-employed
		n) Student
		o) Homemaker
		p) Unemployed (unable to work)
6	What is your Husband Occupation?	
7	How many members are there in your house?	
8	What is your religion?	a) Hindu
		b) Buddhist
		c) Ishlam
		d) Christianity
		e) Others
9	What is your income source?	f) Business
		g) Teaching
		h) Agriculture
		i) Others

10	How much income in your family per month (in	
	Rs.)	
11	What was your Age at marriage?	
12	What was your Age at first pregnancy?	
13	Where did you delivery your baby?	a) Health facilitiesb) Home
14	How many times did you attend ANC when you were pregnant?	
15	How many times did you attend PNC after delivery of child?	
16	What was your last child's birth weight?	 a) less than 1.5 kg VLBW b) 1.5- 2.5kg LBW c) 2.5- 4 kg Normal d) more than 4 kg Large birth weight
17	How many children have you ever born?	-
18	What is the distance between your house and nearest health facility?	a) less than 30 minutesb) 30 minutes to 1 hourc) 1-2 hoursd) more than 2 hours
19	What is the place for your child illness treatment?	a) Hospital (District, Zonal, Tertiary care)b) Health Postc) Dhami, jhakrid) Others
20	For how many months, Food is sufficient for your family members?	a. <6 monthsb. <12 monthsc. >12 months
21	Household ownership of agriculture	a) Yes b) No

Section 2 B. Behaviors Related Information

S.N	Question	Response
2.1	Do you currently smoke any tobacco products, such as	a) Yes
	cigarettes, cigars, pipes, bidis, hukahs or tamakhus?	b) No, if no go to another
		question
2.2	How old were you when you first started smoking?	
2.3	Do you smoke any tobacco products currently?	

2.4	Have you ever consumed any alcoholic drink such as	a) Yes
	beer, wine, spirits, fermented cider or (jaad, raksi,	b) If No, go to another question
	tungba?	
2.5	How frequently have you had at least one alcoholic	
	drink?	
2.6	Have you consumed alcoholic drink within the past 7	a) Yes
	days?	b) No if No go to another
		question
2.7	During the past 7 days, when you consumed alcoholic	a) Usually with meals
	drink, how often was it with meals?	b) Sometimes with meals
		c) Rarely with meals
		d) Never with meals
2.8	What is your food habit?	a)Vegetarian
		b) Non vegetarian

Section 3 C: Child Feeding Practices

3a. Timely introduction of complementary foods		
3.1	Decision makers on child feeding	a) Husband
		b) Wife
		c) Both
		d) Others
3.2	Have you introduced any food apart from	a) Yes
	breast milk to your child?	No (if no move to other question.
3.3	At what age did you introduce any others	Months
	foods apart from breast milk to your child?	
3.4	Is your still child breast feeding?	a) Yes
		b) No
3.5	If no, why?	
3.6	What was your reason for introducing food	a) Breast milk was no longer
	to your child?	sufficient
		b) Because child was 6 month
		old
		c) other specify
3.7	How long after birth did you first put to the	A) Immediately
	breast?	B) Hours
		C)Days

3b. Dietary Diversity

From the meals mentioned, indicate if child receive any of these liquids and foods yesterday

Food group		Example	Yes	No
3.8	Breast milk	Continuously breastfeed		
3.9	Eggs	Eggs		
3.10	Grains, roots	Noodles, Rice, Potatoes, Biscuits, Bread, Barley,		
3.11	Legumes and Nuts	Maize, Soya bean. Beans, Groundnuts, Okhar Grams, Bengal, Peas, Rajma		
3.12	Flesh foods	Chicken, Goat, Kidney liver, Fish, Sheep		
3.13	Dairy products	Milk, Yoghurt Ghee, Panir,		
3.14	Vitamin A rich Fruits and Vegetables	Carrot , Apple, Potato, Cucumber , Radish DGLV		
3.15	Others Fruits and vegetables	Any others fruit and vegetables (Tomato, Pumpkin, Green bean, Cabbage, Carrot, Cucumber, potato, Sweet potato, Spinach Cauliflower.		

3c. Minimum Meal Frequency

3.16	How many times do you feed your child a day?	a) 2 times
		b) 3 times
		c) 4 times or more

4a. Nutrition allowance scheme information

4.1	Have you receive nutrition allowance	a) Yes
	schemes?	b) No
4.2	Where do you get a nutrition allowance	a) Ward office
	schemes?	b) Municipality
		c) Bank
		d) Others
4.3	How much incentive is received as Allowance	
	schemes?	

4.4	From where you have heard about nutrition	a) Newspaper
	allowance schemes?	b) T.V
		c) Public Representative
		d) Others
4.5	Who goes to receive the incentive?	a) Self
		b) Family other members
4.6	How convenient it was to receive incentive	a) Convenient
	earlier?	b) Inconvenient
4.7	If Inconvenient, then what are the difficulties you have to face?	c)
4.8	Was there any role of stakeholders to	a) Yes
	distribute the incentive receive by you?	b) No
4.9	If yes then what are the support you get from	,
	stakeholder?	
4.10	If No, then what are the difficulties you have	
	to face to receive allowance?	
4.11	Have you being support by your family	a) Yes
	members to receive nutrition allowance schemes?	b) No
4.12	If yes then what are the support you get from your family members?	
4.13	Have you engaged in professional /household	a) Yes
4.13	works?	b) No
4.14	If yes then how many hours do you engaged in	a) 3 hours
1.11	those works?	b) 4 hours
	mose works.	c) 5 hours
		d) 6-8 hours and more
4.15	Being engaged in your own profession have	a) Yes
	you get time to receive incentive?	b) No
4.16	Where do you spend the incentive?	c) Children Nutrition
		d) Household activities
		e) Children Clothes
		a) Others (Play group school,
		Recreation activities)