

A guide and tools for maternal mortality programme assessment

MODULE 4, Tool 6

Productivity Costs Survey

Version 2.0

List of Acronyms

SPSS Statistical Package for the Social Sciences Stata data analysis and statistical software

TBA traditional birth attendant VAS visual analogue scale WHO World Health Organization

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INTRODUCTION

The economic evaluation of health interventions is an important means to support policy-makers in decision-making. Immpact aims to promote evidence-based safe motherhood strategies, and economic evaluation plays an important part in the establishment of the cost effectiveness of such strategies. The costs of interventions not only include direct costs – such as the costs of medical treatment and transport to health facilities – but also the 'productivity costs' of lost, or less productive, working time of the patient due to illness (Mukuria and Newlands, 2004; Russell, 2004). In the case of maternal health, the illness may not only be of the woman herself but also of her baby.

There is little evidence on how best to measure and value production time lost due to ill health (Pritchard and Sculpher, 2000). Although existing methods have been tested in developed countries with some success, these are not directly transferable to maternal health or to developing country contexts. Study design issues are also important. The developed country studies that have collected information on productivity have often relied on self-reported data that is verified against employer records. The prevalence of informal and household work makes verification difficult in a developing country context. There have been a handful of studies that attempt to measure productivity costs in developing countries, but they have focused on endemic diseases — mainly malaria and schistosomiasis, and more recently HIV/AIDS.

Households employ 'coping strategies' to manage both direct and productivity costs, by altering roles within the household and by drawing upon the support of other households such as relatives and friends (Sauerborn et al, 1996). Health expenditure and productivity losses arising from illness may both be significantly reduced by such inter-household income transfers, and inter- and intra-household labour re-allocations.

However, while coping strategies may allow production to be maintained, this may be at the expense of the future welfare of the household and community. Among the more important longer-term impacts is the withdrawal of children from school, either because their labour is required or because the family cannot afford school fees. The effect is a reduced investment in the human capital of the children concerned which is likely to result in lower productivity over their entire lifetime. Other long-term effects arise when coping strategies lead to reduced food security in the form of lower food consumption or a switch to cheaper but less nutritious foods. The consequences include the stunted growth of children, the greater vulnerability of all family members to illness, and the reduced inability to perform physically demanding activities.

Coping strategies also mean that there is a difference between the immediate and the broader economic impacts of illness. The immediate effects in terms of lost production are reduced – or may occasionally be almost cancelled out – by coping strategies.

While the Productivity Costs tool is a freestanding survey, it could also be conducted alongside the Household Costs Survey tool (see Tool 7 in this module). If this is the case, certain sections of the two surveys could be combined: the household roster; housing and asset ownership; and household expenditure.

4(6).1 What is the Productivity Costs tool?

The Productivity Costs tool is a survey instrument for collecting data that can be used to estimate productivity costs arising from maternal ill health (Chikwama et al, 2006). It was tested in a survey conducted in the Central Region of Ghana in 2005.

The primary data collection instrument used for this study was a questionnaire that was administered to women in households falling into our sampling frame. The questionnaire was designed to collect data on women's work activities and labour productivity outcomes during pregnancy and the puerperium, the period of up to 42 days after delivery. For the most recent episode of maternal-related illness, the questionnaire aims to derive measures of days of employment lost due to ill health. Slightly different versions of a questionnaire can be administered to pregnant women and to recently delivered women. As behavioural responses and consequences of ill health are

dependent on other household characteristics, the questionnaire also collected data on various socio-economic aspects of the household.

Table 4(6).1 summarizes the main parts of the questionnaire. Modules 1–3 and 6–8 are administered to all women. Modules 4 and 5 are mutually exclusive and their administration depends on a woman's maternal status, whether she is pregnant or has a pregnancy that terminated recently.

The questionnaire covers productivity losses which occur when individuals are absent from work – absenteeism – and as a result of reduced efficiency due to illness while still at work – presenteeism. Most studies have measured the production losses occurring as a result of absence from work for ill individuals. Far fewer have attempted to measure productivity losses while at work (Brouwer et al, 1999).

The concept of presenteeism may be particularly important in the context of maternal morbidity. Women are often involved in a variety of tasks in developing countries and maternal morbidity may reduce their efficiency while they are still at work. This is likely to be more pronounced in poor or small families which have no alternative sources of labour or where some types of work can only be done by the woman.

Table 4(6).1: Description of questionnaire modules

Module number	Module name	Level of data collection	Data
1	Background	Household	Household location information.
2	Household roster	Individual	Demographic and socio-economic data.
3	Woman's work activities	Individual	Women's work activities and time allocations.
4	Productivity costs: pregnant women	Individual	Health outcomes during pregnancy, time lost to ill health, efficiency losses and household coping strategies.
5	Productivity costs: women with recent births	Individual	Health outcomes after delivery, time lost to ill health, efficiency losses and household coping strategies.
6	Household economic activities	Household/ individual	Farm production, fishing and non-farm enterprises, wage employment activities and earnings.
7	Household asset ownership	Household	Household property and productive assets.
8	Household expenditure	Household	Food and non-food expenditures.

There are two aspects that need to be considered when measuring productivity losses at work: (1) the length of the period during which losses are experienced; and (2) the extent of the production loss. The latter was assessed by use of a visual analogue scale (VAS) in which respondents were asked to estimate their average efficiency on days when they were ill on a scale of 0 ('illness did not permit me to work') to 5 ('illness did not affect my work').

The Productivity Costs tool first focuses on the ill individual and seeks to measure the time she loses due to illness. It then recognizes that, through intra- and inter-household labour reallocation, many of the adverse effects of ill health on economic production can be alleviated. The tool seeks to measure the time that is recovered through these labour substitutions. Another VAS was used for this. Respondents were asked to estimate how much of their normal work was done by others on a scale of 0 ('no one assisted me') to 5 ('assistance fully covered all my activities).

| Household Costs |
|-----------------|-----------------|-----------------|-----------------|-----------------|
| | | | | |

4(6).2 Why use the Productivity Costs tool?

The Productivity Costs tool could be used if the evaluation team is interested in capturing all the important economic consequences of maternal ill health. In particular, the value of averted production losses, or productivity cost savings, constitutes an important outcome of health interventions. By reducing work time lost to poor maternal health, safe motherhood interventions lead to important cost savings. These cost savings represent additional benefits to society of improving maternal health outcomes. Estimating their magnitude should make up an integral component of any economic evaluation.

Having a clear understanding of the size and distribution of productivity costs is also important as it contributes towards explaining the link between poverty and health. Moreover, the fact that maternal ill health is gender specific has important implications. A number of studies have shown that women are more likely than men to spend their income on children, while in addition, children are often withdrawn from school and drafted into activities that their mothers are not able to attend to because of illness.

4(6).3 Limitations of the Productivity Costs tool

An ideal assessment of productivity costs would follow women from the time of conception through to childbirth and the end of the puerperium. However, this is impractical and Immpact only interviewed women at a single point in time by focusing on the last episode of identified maternal illness for women who are still pregnant and those who have recently delivered.

Some studies have treated all illness occurring during pregnancy, childbirth and the puerperium as maternal. Clearly, however, not all such illness is due to maternal causes. Since it is not feasible to conduct a clinical diagnosis of ill health during a survey, this tool relies on self-assessment to identify if maternal illness has occurred. It leaves it to the discretion of the women being interviewed to determine whether their condition was due to pregnancy, childbirth or the puerperium. Of course, the extent to which this possible misclassification of conditions leading to ill health is seen as a problem depends on the focus of interest. If the focus is on the health needs of mothers, it may not matter.

Another limitation is that monetary measures of productivity costs are not derived. The traditional approach is to value time lost due to ill health using the wage rate as reflective of the value of labour in production. The use of average wage rates for the main economic activity in the region concerned is the most common option. Any official minimum wage rate is an alternative. However, this assumes that markets function competitively but, in most developing countries, wages will often overstate the value of labour in production. Therefore an accurate assessment of productivity costs should in theory attempt to estimate shadow wages for most household economic activities.

Finally, coping strategies are not adequately captured by the tool. However, qualitative work can supplement data collected using household surveys. For example, focus group discussions, involving women of reproductive age, can be used to establish community perceptions on illness during pregnancy, inability to work during pregnancy, coping strategies and other aspects of women's work during the term of their pregnancy. More information on qualitative methods is contained in Technical Annex B of Module 5.

4(6).4 Using the Productivity Costs tool

Step 1: Design your study

In terms of study design, a longitudinal study has the advantage of permitting the identification of dynamic patterns of behaviour but such studies are expensive and, by definition, lengthy. Hence, most productivity cost studies employ one-off surveys.

There are several important definitional issues that will affect the study design:

- **Defining 'maternal ill health'.** We took the productivity costs of maternal ill health as referring to the value of women's time that is adversely affected by conditions linked to pregnancy, childbirth or the puerperium, whether the illness is of the woman herself or her baby.
- Defining 'household'. The concept of a 'household' may not be homogenous. It is therefore
 necessary to define what a household is and how it is organized in the region of study. This is relevant
 because, while maternal ill health most directly affects women, most women's activities are organized
 at household level, and thus the basic sampling unit should be the household. However, as there are
 cases when economic behaviour, even in low income countries, makes it difficult to treat households
 as units, the individual members of households will be the smallest units for which some of the data will
 be collected.
- Identifying the main respondent(s). The main income earner will often be a male head of household
 and most health decisions that are made reflects the importance of this individual. In the case of
 maternal mortality, other household members will have to be consulted for information on productivity
 costs that have been incurred, especially where intra-household transfers or extended households are
 common. However, the best respondent as far as costs are concerned will usually be the head of
 household.
- **Defining the 'economically active'.** This affects the information to be gathered from respondents. Most studies identify a minimum age and anyone above this age up to a given retirement age is considered economically active. However, the use of official retirement ages may underestimate lost productivity. Older people may be the main source of help for households that experience maternal mortality and morbidity although, since their levels of efficiency may be lower, a weighting system may be necessary.
- **Defining activities.** Employing a household perspective also raises issues as to which activities to include when valuing productivity costs. Some studies explicitly include housework as a productive or economic activity while other studies focus on a main productive activity such as farming.

Once these issues have been discussed and addressed, the study sample can be determined. In most low income countries, pregnancies and their outcomes are generally not notifiable events. Since it is not possible to obtain a complete listing of women in our sampling frame, women cannot be identified for the survey using standard random sampling techniques. As an alternative, one could use population surveys to interview all households in the chosen communities to identify households with women who are pregnant and women who have recently delivered. While this may yield a representative sample for all the communities covered, it can be a very resource intensive approach. A further possibility, therefore, is to use traditional birth attendants (TBAs), community health nurses or community informants to identify women in their community who are pregnant or who have recently delivered. For women who have delivered, it might be possible to use immunization points as was done in the Household Costs Survey (see Tool 7).

The main consideration when choosing sample sizes in quantitative studies is to achieve reliable estimation of parameters. Thus sample size calculations require specification of some desired level of precision of estimates as well as variance across observations. In many cases, both of these are hard to find. Additionally, logistical, time and financial constraints also mean that the feasible sample size is much lower than the ideal one. A review of the literature on similar studies suggested 300 as an appropriate sample size for each of the sub-samples (pregnant women and recently delivered women). It proved more difficult to identify recently delivered women and the final sample consisted of 416 pregnant women and 234 women who had recently delivered. More information on sample size calculation is contained in Technical Annex A of Module 5.

Cultural awareness and sensitivity helps in the study design phase in providing information as to how questions should be phrased, who to ask and sensitive issues within cultures. This reduces the number of non-responses. It will also identify practices such as the accompaniment of female patients to hospital, social obligations and other social constructs that would impact on the level of time and productivity loss encountered due to maternal

mortality and morbidity. This is useful in data analysis in interpreting the findings. More information on cultural adaptation and translation of survey instruments is contained in Technical Annex C of Module 5.

Step 2: Obtain permissions

Seek permissions from the ethics committees of collaborating institutions, from the regional health administrations in-country, and from the participating hospitals and health centres.

Step 3: Data collection

The primary data collection instrument is a questionnaire that will be administered to women in households falling into the sampling frame. The different modules of the questionnaire are outlined in table 4(6).1, while section 4(6).6 contains an example of the <u>questionnaire used in Ghana</u>. The questionnaire focuses on collecting information on women's work activities and labour productivity outcomes during pregnancy and the puerperium. As behavioural responses and consequences of ill health are dependent on households' socio-economic backgrounds, the questionnaire also collects data covering different socio-economic aspects of households.

A recurring issue with regard to collection of data is the recall period. The accuracy of information in self-reported data can be verified by checks against employer records for formal work. The use of other household members to assist the respondent in recalling details of absenteeism may help reduce recall errors.

In very conservative cultures, or where women have low status, it may be difficult to acquire a suitable sample. It may be important to gain consent from male household heads in order for women to participate. The use of focus groups can reduce any response biases that may arise due to gender or cultural sensitivity. The use of researchers who are from the region, are locally known or of the same ethnic background improves access and cooperation and the interpretation of respondents' answers. Our questionnaire was administered by a small team of interviewers from the Central Region of Ghana where the survey was conducted.

Step 4: Data analysis

Data analysis should establish mean productivity costs both before and after adjustment for intra- and interhousehold coping strategies. It can then be extended into the consideration of whether there are significant differences across women in different demographic and socio-economic groups.

Our data analysis was conducted using Stata but this is not essential. Most other statistical packages, such as SPSS, could have been used instead.

Step 5: Disseminate findings and recommendations

The main audience for results from this study consists of analysts seeking to compile a comprehensive measure of the benefits of safe motherhood strategies but policy-makers should also be familiarized with the findings. Reducing maternal ill health leads to increased productivity which is a secondary and less visible benefit but may nevertheless be an important outcome. Inclusion of productivity costs illustrates the value of the economist's 'societal perspective', which seeks to capture all the benefits and costs of an intervention regardless of who enjoys the benefits or bears the costs.

4(6).5 Budget implications of using the Productivity Costs tool

Table 4(6).2 shows the estimated recurrent costs which would be incurred in use of the Productivity Costs tool. No capital costs are included. The table shows the resources required for a survey of around 600 women.

Table 4(6).2: Productivity costs resource implications

	Quantity	Time				
Supplies	Requisite copies of the questionnaire	Not applicable				
	Sufficient copies of the interviewer's manual for one per interviewer/supervisor					
Personnel	Team of interviewers (possibly 6)	3 days training (including 1 day pretesting)				
		8 weeks interview time				
	Supervisor (one per 6–8 interviewers)	8 weeks interview time				
	Data entry staff (possibly 2)	6 weeks				
	Drivers	Depends on organization of survey				
Travel and communication	Vehicle to make preliminary visits to set up the survey	1–2 weeks				
	Vehicle to travel to interview sites	8 weeks				
	Travel and subsistence costs for survey staff, supervisor(s) and drivers					
	Phone calls					
Building operation and maintenance	Date entry facility	Not applicable				

4(6).6 Productivity Costs data collection instruments

This section contains the following instruments:

- 1. Informed consent form;
- 2. Productivity costs questionnaire;
- 3. Interviewers' manual for the productivity costs questionnaire;
- 4. Coding manual.

Household Costs Household Costs Household Costs Household Costs	Household Costs
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1. Informed Consent Form (example from Ghana)

A. Region							0	1			
B. District											
C. Community											
D. Date [ddmmyyyy]											
RESPONDENTS ARE WOMEN AGED 15–49 YEARS WHO ARE PREG MONTHS PRIOR TO THE SURVEY AND HAVE BEEN HOME FOR AT L						RED I	N TH	IE 4			
PLEASE DO NOT ADMINISTER THE QUESTIONNAIRE IF A WOMAN DOES NOT MEET THE ABOVE CRITERIA											
E. RESPONDENT'S INFORMED CONSENT [SEEK RESPONDENT'S AGREEMENT TO BE INTERVIEWED BY READING THE STATEMENT BELOW]											
My name is I am from the Noguchi Memorial Institute for Medical Research. We would like to talk to you about yourself and your family. Your answers are very important to us and will help to find better ways to deliver health services in Ghana. All the information you give us will be treated in the strictest confidence. You are free not to take part in this study or to discontinue the interview at any time. You will not be penalized for not taking part in the study. The interview will not last more than 40 minutes. Are you willing to take part in this study?											
[IF RESPONDENT IS WILLING TO PARTICIPATE, COMPLETE THE C BELOW]	ONS	ENT	TO P	ART	ICIPA	TE S	ECT	ION			
F. CONSENT TO PARTICIPATE IN SURVEY											
I freely volunteer to be interviewed											
Respondent's name Respon	dent'	s sigr	nature	?		_					

2. Productivity Costs Questionnaire (example from Ghana)

Note:	An interviewers'	manual with	guidance	on the use	of this	questionnaire is	s contained in	this section.
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Questionnaire I.D.				
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1.1	Region (I Coding n								0	1
1.2	District (
	Coding n									
1.3	Commun									
4.4	Coding n	nanual	0)							
1.4	Coding n	er's code (S	5)							
1.5		ld ID (RRDD								
1.6	Date of in	nterview (ddi	mmyyyy)							
1.7	Time of s	start of interv	view						am	pm
	Would like you		of all members	of your house	ehold who usua	ally sleep	and e	at w	ith vou	
2.1		2.2	2.3	2.4	2.5	2.6	<u> </u>		2.7	•
ID	Name	Age at last	Relationship	Main	Sex		Level of educational			status
		birthday	with	economic						
			respondent	activity			attainment (completed)			
			(woman who delivered or	(Over 15yrs)		(comple				
			who is	(Over 13y13)		(Over 5	vrs)			
		(yrs)	pregnant)		1=male	(0.13.13	J. 0,			
		,	(Code a)	(Code b)	2=female	(Code c))		(Code d	1)
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Code a	a: Relationsh	qi	Code b: Main	activity or type	of	Code c: Educational		Code d: Mari	tal status											
	espondent	-1-	employment			attainment														
Self	•	01	Skilled wage er	mployment	01	None	01	Never married	l	01										
Spouse	9	02	Unskilled wage	employment	02	Primary	02	Married/co-ha	biting	02										
(husba																				
Own ch		03	Skilled self-em		03	Middle/JSS	03	Widowed		03										
Parent		04	Unskilled self-e	employment	04	Secondary	04	Divorced/sepa	ırated	04										
Grandp	parent	05	Student		05	Post-secondary	05													
Sister/b	orother	06 Unemployed			06	Tertiary	06													
Co-wife	9	07	Other		96	Koranic education	07													
Other r	elative	08 Not applicable			99	Other	96													
Servan	ıt/worker	09				Not applicable	99													
Other		96				11														
2.8	Does the	hea	d of the hous	sehold reside	wit	th vou?														
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	ty Codes		\A/=11.		45	NI -										
	estic work	04	Walk to/from farm									44				
	ssing food (pounding fufu,	01	Other (specify)	17 Attending religious								41				
etc)	ng food	02	Other work		ceremony Visiting friends/relatives											
	ing house/dishes	03	Agriculture wage labor	nır	Visiting friends/relatives r 21 Attending school							42 43				
	ing water	04	Non-farm wage labou		22	Bathing						44				
	ering firewood	05	Helping friend	••	23		Resting/taking a nap					45				
	ehold repairs	06	Helping family		24		Other social events					46				
Wash	ing clothes	07	Trading/crafts		25											
	g at the market	80	Preparing food for sa	le	26											
	(specify)	09	Travel to/from work		27											
	ultural Work		Other work (specify)		30											
_	on own farm	10	Child care													
	on spouse's farm	11	Feeding children		31											
	on joint farm	12	Bathing/dressing child		32											
	on other farm livestock	13 14	Playing/watching chil Other childcare activi		33 34											
rena	iivestock	14	Other childcare activi	ues	34											
3.4 What is the current status of the respondent?																
	1=pregnant (→ Section 4),	2=de	livered (→ Section 5)													
/ PR	ODUCTIVITY COSTS - PR	FGN/	ANT WOMEN													
7. 1 1	AODOCIIVIII COSIS-IK	LON	AITI WONLIT													
4.1	When did you first know	that v	ou were pregnant?	Mon	th			Year			I					
	(→ 4.2)		, cac. c p. cga		•••				<u> </u>							
4.2	When are you expecting	to de	liver? (→ 4.3)	Mon	th			Year								
	, , ,				I											
43	From the time you first ki	1ew v	you were pregnant ha	VE VOI	ı hee	n ill?	4.3 From the time you first knew you were pregnant, have you been ill?									
4.3			ou were pregnant, ha	ve you	ı bee	n ill?	1									
4.3	From the time you first ki 1=yes (\rightarrow 4.4), 2=no (\rightarrow 4.8		ou were pregnant, ha	ve you	ı bee	en ill?	1									
	1=yes (→ 4.4), 2=no (→4.8	3)	, ,	•							T	<u> </u>				
4.4		3)	, ,	•												
	1=yes (→ 4.4), 2=no (→4.8	3)	, ,	•												
	1=yes (\rightarrow 4.4), 2=no (\rightarrow 4.8 How many times have yo What were the main symp	u bee	en ill during this pregr	nancy?	? (→ ss? (4.5) (→ 4.6	6)			A.						
4.4	1=yes (→ 4.4), 2=no (→4.8 How many times have yo What were the main sympton 1=nausea and vomiting, 2	u bee	en ill during this pregr s of the last episode on tburn, 3=backache, 4=	nancy?	? (→ ss? (n pe	4.5) (→ 4.6 Ivic ai	6) rea,	5=vagir	nal	A. B.						
4.4	1=yes (→ 4.4), 2=no (→4.8 How many times have yo What were the main symp 1=nausea and vomiting, 2 bleeding, 6=shortness of	u bee	en ill during this pregres of the last episode of the last episode of the thick and the second secon	nancy?	? (→ ss? (n pe	4.5) (→ 4.6 Ivic ai is, 9=	S) rea, =rais	ed bloo	nal	B.						
4.4	1=yes (→ 4.4), 2=no (→4.8 How many times have yo What were the main sympton 1=nausea and vomiting, 2	u bee	en ill during this pregres of the last episode of the last episode of the thick and the second secon	nancy?	? (→ ss? (n pe	4.5) (→ 4.6 Ivic ai is, 9=	S) rea, =rais	ed bloo	nal od							
4.4	How many times have yo What were the main sympton 1=nausea and vomiting, 2 bleeding, 6=shortness of pressure, 10=headache, 12	u bee	en ill during this pregress of the last episode of the representation of the last episode of the representation of the last episode of the last ep	nancy? of illne: pain i wollen her	? (→ ss? (n pe n leg	4.5) (→ 4.6 lvic ai is, 9=	S) rea, rais	ed bloo	nal od	B.						
4.4	How many times have yo What were the main sympton 1=nausea and vomiting, 2 bleeding, 6=shortness of pressure, 10=headache, 12 Do you think the illness w	u bee	en ill during this pregress of the last episode of the representation of the last episode of the representation of the last episode of the last ep	nancy? of illne: pain i wollen her	? (→ ss? (n pe n leg	4.5) (→ 4.6 lvic ai is, 9=	S) rea, rais	ed bloo	nal	B.						
4.4	How many times have yo What were the main sympton 1=nausea and vomiting, 2 bleeding, 6=shortness of pressure, 10=headache, 12	u bee	en ill during this pregress of the last episode of the representation of the last episode of the representation of the last episode of the last ep	nancy? of illne: pain i wollen her	? (→ ss? (n pe n leg	4.5) (→ 4.6 lvic ai is, 9=	S) rea, rais	ed bloo	nal	B.						
4.4	How many times have yo What were the main sympton 1=nausea and vomiting, 2 bleeding, 6=shortness of pressure, 10=headache, 12 Do you think the illness w	u bee	en ill during this pregress of the last episode of the representation of the last episode of the representation of the last episode of the last ep	nancy? of illne: pain i wollen her	? (→ ss? (n pe n leg	4.5) (→ 4.6 lvic ai is, 9=	S) rea, rais	ed bloo	nal od	B.						

4.8	domestic work 1=yes (\rightarrow 4.10), Has this pregnating 1=yes (\rightarrow 6.1), 2 For how long	ancy had any ef	generatin	ng activities)	?				ties?	.e.	
4.10	activities? (→ 4	l.10) have you work	ed in a	Months		Weeks		Day	s		
	state of poor he		· · L			1		1 - 3.9	<u>-</u>		
4.11	health, can yo	[present 5 blo u pick the num ill? (Enter numb	ber that	represents	the am	nount of w					
	0 Illness did not permit me to work	1	2		3 4				5 ss did t my v		
4.12	During the time QN 3.3? 1=yes (→ 4.13),	e you were ill di , 2=no (→ 6.1)	d anyone	e assist you	with th	ne daily ac	tivities	you me	ntione	ed in	
4.13	1=other househousehousehousehousehousehousehouse	ou with your not old members (→ ed someone (→ 4	4.14), 2=	relatives/frier	ds (→	4.16), 3=ne	eighbou		a. b. c.		
4.14	If the persons please name (ROSTER] (→ 4	who assisted y them? [ENTER 1.16)	ou are r ID, FRC	members of DM QN 2.1	your h IN HO	nousehold, PUSEHOLD	2. Pe 3. Pe	erson 1 erson 2 erson 3 erson 4			
4.15	period you we	comeone to ast re ill, how much is in kind ask for v 4.16)	n did you	pay them?	1. Da 2. We 3. Mo					,000, 000, 000,	
4.16		were you assist ing the time yo		Months		Weeks		Day	ys		

4.17	If these blocks [present 5 blocks] represent the work that you normally do in a state of good health, can you <u>pick the number that represents the amount of work done by the persons</u> who assisted you? (Enter number of blocks picked) (→ 6.1)												
	0	1	2	3	4	5							
	No one assisted me					Assistance fully cover all my acti	ed						
5.	PRODUCTIVITY COSTS – WOMEN WITH RECENT BIRTHS												
5.1	When did you o card] (ddmmyyy		an cannot rem	nember ask for bab	y <u> </u>								
5.2	centre (\rightarrow 5.3);	ıl (→ 5.3); 2=mis 5=health post/cli	nic (\rightarrow 5.3); 6=	→ 5.3); 3=private h -maternity home (— specify)	→ 5.3); 7=at home	$(\to 5.5);$							
5.3	If you delivered $(\rightarrow 5.4)$	l at a health fac	ility please na	ame it. [Coding ma	nual, page 15]								
5.4	If you delivered labour? 1=yes; 2=no (wa		-	s where you first	sought care afte	er you went	into						
5.5	If you did not deliver at a health facility, please give main reason why. 1=no money; 2=health facility too far; 3=no one to escort me; 4=no one to leave child(ren) with; 5=bad weather; 6=husband decided; 7=did not see the need; 8=poor quality of facility service; 9=it was at night; 10=unexpected delivery; 96=other (specify)												
5.6	Who attended to you while you delivered? 1=medical doctor; 2=facility midwife/nurse; 3=private midwife; 4=health (ward) assistant; 5=TBA; 6=mother-in-law/mother; 7=village health worker; 8=friend/neighbour; 96=other (specify)												
5.7		=assisted manua	ally (by hand);	3=assisted with eq); 4=by							
5.8	A week after you 1=yes (\rightarrow 5.9); 2		you experier	nce any health pro	blem?								

5.9	What were the main symptoms of the I							A.					
	1=nausea and vomiting, 2=heartburn, 3=l	backache,	4=pai	n in pe	elvic area, 5=	vaginal		B.					
	bleeding, 6=shortness of breath, 7=tiredn	ess, 8=sw	ollen l	egs, 9	=raised blood	press	ure,						
	10=headache, 11=fever, 12=operation wo					•	,	C.					
	(→ 5.10)	oaa, .o e		,,,,,	0.1.01								
	(-> 3.10)												
5.10	Do you think that the illness was relate	ed to your	last r	regna	ancy or child	birth?	1						
	1=yes, 2=no (→ 5.11)	•	•	•	•								
	A week after you delivered, did your baby experience any health problems?												
5.11	A week after you delivered, did your baby experience any health problems?												
	A week after you delivered, did your baby experience any health problems? 1=yes (\rightarrow 5.12); 2=no (\rightarrow 5.13)												
5.12	What were the main symptoms of your baby's illness?												
	1=failure to feed; 2=breathlessness; 3=sk							B.					
	5=coughing; 6=seizures; 7=rapid respirat					nfection	;	C.					
	96=other; 99=n	ot applicab	le (\rightarrow	5.13)				Ο.					
5.13	Since the time you delivered have you	been able	to at	tend f	fully to your	norma	daily	•					
	activities (i.e. domestic work and/or in	come gen	eratin	g acti	vities)?		_						
	1=yes (\rightarrow 5.15), 2=no (\rightarrow 5.14)				•								
5.14	For how long have you not been able	Months			Weeks		Days	•					
•	to attend to your normal daily				1100110		- Day						
	activities? $(\rightarrow 5.15)$												
5.15	For how long did you work while	Months		1 1	Weeks		Dov						
3.13	either you or your baby were in a	MOHILIS			VVCCKS		Days						
	state of poor health? $(\rightarrow 5.16)$												
5 40		4.41		41 4						l			
5.16	If these blocks [present 5 blocks] repr												
	health, can you pick the number that r				ou were able	to do	during	tne the	time				
	you were ill? (Enter number of blocks	picked) (–	→ 5.1 <i>1</i>	()									
		Г								1			
	0 1 2		3		4			5					
	Illness did not						Illnes						
	permit me to						affect	my w	vork				
	work												
5.17	Did anyone assist you with your norma	al work ac	tivitie	s dur	ing the time	you or	your	baby					
	were ill?					-		•					
	1=yes (\rightarrow 5.18), 2=no (\rightarrow 6.1)												
	, (,, (,)												
	110	41 141						1		1			
5.18	Who assisted you with your normal ac							a.					
	1=other household member(s) (\rightarrow 5.19),	2=relative/	friend	$(\rightarrow 5.$	21), 3=neighl	oours	$(\rightarrow$	b.					
	5.21), 4=hired someone (\rightarrow 5.20), 96=oth	ner (specify	′)		(→ 5.21)		C.					

5.19								sehold	, 1.	Pe	rson	1		
	If the persons who assisted you were members of your household please name them. (Enter ID, from Household Roster) $(\to 5.21)$										rson			
		blease name them. (Enter ID, from Household Roster) ($ ightarrow$ 5.21) f you hired someone to assist you during the 1. Daily										3		
												4		
5.20						,000								
	period you wer	•	2.	Wee	kly	¢					,000			
	(If payment wa	only fill	3	Mon	thly	¢					,000			
	the applicable) $(\rightarrow 5.21)$						y	۲					,000	
5.21				Months				Weeks	3			Days		
	For how long were you assisted with Months your normal daily activities during the									- 1				
	time you or you	ır baby were ill? (-	→ 5.22)											
5.22		[present 5 blocks												
5.22	health, can you	i pick the number	r that repi	resents t	he i	<u>amo</u> i	unt of							
5.22	health, can you		r that repi	resents t	he i	<u>amo</u> i	unt of							
5.22	health, can you	i pick the number	r that repi	resents t	he i	<u>amo</u> i	unt of							
5.22	health, can you who assisted y	u pick the number ou? (Enter numbe	r that reported the thick that the thick the t	resents t s picked)	he ;) (→	<u>amo</u> i	unt of	<u>work</u>				pers		
5.22	health, can you who assisted y	i pick the number	r that repi	resents t s picked)	he i	<u>amo</u> i	unt of			e by	the	pers	sons -	
5.22	health, can you who assisted y	u pick the number ou? (Enter numbe	r that reported the thick that the thick the t	resents t s picked)	he ;) (→	<u>amo</u> i	unt of	<u>work</u>		e by	the Assist	pers 5 tance	sons	
5.22	health, can you who assisted y	u pick the number ou? (Enter numbe	r that reported the thick that the thick the t	resents t s picked)	he ;) (→	<u>amo</u> i	unt of	<u>work</u>		e by	Assist	5 tance	sons ed	
5.22	health, can you who assisted y	u pick the number ou? (Enter numbe	r that reported the thick that the thick the t	resents t s picked)	he ;) (→	<u>amo</u> i	unt of	<u>work</u>		e by	Assist	pers 5 tance	sons ed	
	health, can you who assisted you not not assisted me	u pick the number ou? (Enter number	r that represent of block	resents t s picked)	he ;) (→	<u>amo</u> i	unt of	<u>work</u>		e by	Assist	5 tance	sons ed	
5.22	health, can you who assisted you not not assisted me	u pick the number ou? (Enter numbe	r that represent of block	resents t s picked)	he ;) (→	<u>amo</u> i	unt of	<u>work</u>		e by	Assist	5 tance	sons ed	
6.	health, can you who assisted y	u pick the number ou? (Enter number ou?)	r that represent of block	resents t s picked)	he ;) (→	<u>amo</u> i • 6.1)	unt of	<u>work</u>		e by	Assist	5 tance	sons ed	
	health, can you who assisted y	i pick the number ou? (Enter number ou?) CONOMIC ACTIVITIES are members of years.	r that represent of block 2 ITIES our house	resents t s picked)	he i	ed in	unt of	4	done	e by	Assist ully c	5 tance overe	ed rities	
6.	health, can you who assisted y	u pick the number ou? (Enter number ou?)	r that represent of block 2 ITIES our house	resents t s picked)	he i	ed in	unt of	4	done	e by	Assist ully c	5 tance overe	ed rities	
6.	health, can you who assisted y	i pick the number ou? (Enter number ou?) CONOMIC ACTIVITIES are members of years.	r that represent of block 2 ITIES our house	resents t s picked)	he i	ed in	unt of	4	done	e by	Assist	5 tance overe	ed rities	

6A. HOUSEHOLD FARMING ACTIVITIES (continued)

We would like you to tell us about all field and garden crops that your household has grown in the past 12 months. Start with respondent.										
6.2 6.3 6.4 6.5 6.6 6.7 6.8 6.9 6.10										
List all crops grown by your household. (→ 6.3) (Code a)	Who is responsible for this crop? (→ 6.4) Enter ID	area is plante this	es es	Does the household own this land? 1=YES (→ 6.8) 2=NO (→ 6.6)	If no, how much was paid to rent it over the last year? ¢ (→ 6.7)	If sharecropping, what proportion of output goes to the landlord? % (→ 6.8)	How many household members worked on this crop? (State number) (→ 6.9)	Did [] hire any non-family labour to grow this crop? 1=YES (→ 6.10) 2=NO (→ 6.12)	How many people were hired? (→ 6.11)	
		No	Unit							

Code a: Crop

oodo di olop					
Cocoa	01	Millet	80	Pineapple	16
Coffee	02	Sorghum	09	Other	96
Coconut	03	Maize	10		
Oil Palm	04	Sweet potato	11		
Plantain	05	Potato .	13		
Cassava	06	Tomato	14		

Groundnut 07 Vegetable 15
6A. HOUSEHOLD FARMING ACTIVITIES (continued)

We would like you	to tell us about all field	and garden cro	ops that your ho	ousehold has gi	own in the la	ast year. Start v	vith respondent	t.		
List crop code	6.11		6.12			6.13		6.14 Quantity of total output. (→ 6.15)		
from 6.2	How much in total was paid for hired	How much fertilizer did you use for this crop? (\rightarrow 6.13)				other inputs did ucing this crop?				
	labour? (State amount) ¢ (→ 6.12)	A. Quantity	B. Quantity Code	C. Type	A. Quantity	B. Quantity Code	C. Type of input (Code d)	A. State quantity	B. Quantity code	
	(311=)		(Code e)	(Code c)		(Code e)		(no)	(Code e)	

Code c: Fertilizers		Code d: Other i	inputs					Code e: Quantity	/ Code		
NPK 15-15-15	01	Karate	01	Of-nak	11	Bavistin	21	Pounds	01	Litre	11
NPK 23-15-5	02	Acellic	02	Atrazine	12	Aliete	22	Kilogram	02	Gallon	12
NPKMg 11-5-27-5	03	Dusban	03	Hynar X	13	Other	96	Ton	03	Beer bottle	13
Ammonia	04	Cymbush	04	Diuron	14	Don't know	98	Minibag	04	Bunch	14
Urea	05	Cymethoate	05	Gramoxone	15	Not applicable	99	Maxibag	05	Margarine tin	15
Lobi 44 (Urea)	06	Sumithion	06	Fusilade super	16			Basket	06	Other	96
Grofol (NPK)	07	Furadan	07	Roundup	17			Bowl	07		
K Fol (Potash)	80	Diazinon	08	Cocide	18			American tin	08		
Wuxal	09	Biobit	09	Champion	19			Bundle	09		
Other	96	Dipel	10	Topsin	20			Barrel	10		

Immpact Toolkit: a guide and tools for maternal mortality programme assessment

Don't know 99

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6B. FISHING & NON-FARM ENTERPRISES (continued)

We would like to ask you about income earning activities, such as fishing, fish processing, crafts, trading or other business, carried out by you or other members of your household. **Start with respondent.**

		ı	1			T
6.15	6.16	6.17	6.18	6.19	6.20	6.21
What business	Which member of	For how long has	How many other	How many of	How much money has	How many days per
activities are members	your household is	this activity been	people work on this	these people are	the household spent in	week do members of
of your household	responsible for this	operating in the last	activity?	members of your	the <u>last year</u> on items	the household work on
involved in? (\rightarrow 6.16)	activity	year?		h/hold	bought for this activity?	this activity? (aggregate)
(Business Code)	(→ 6.1 7)	(→ 6.18)	(→ 6.19)	(→ 6.20)	(→ 6.21)	(→ 6.22)
,	,	, ,	,	,	(State amount)	(State number)
	(State ID)	(State Months)	(State number)	(State number)	¢	,
						-
						-

Code a: Business Code

Construction (building, etc.) Carpentry	01 02	Retail business Mechanic (vehicle repair)	09 10
Metalwork (welding, etc.)	03	Fishing	11
Craft making	04	Fish processing	12
Tailoring/knitting	05	Communication centres	13
Vegetable/fruit vending	06	Services (tailoring, hairdressing, etc.)	14
Transport/vehicle hire	07	Other	96
Food trader	08		

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6B. FISHING & NON-FARM ENTERPRISES (continued)

We would like to ask you about income earning activities, such as fishing, fish processing, crafts, trading or other business, carried out by you or other member of the household. **Start with respondent.**

List	List person	6.22			6.23		
business	responsible	On average, how many	How muc	ch has [] earned fro		ctivity in the last m	onth. (→ 6.24)
activity code from 6.15		hours per day does [] work on this activity? (→ 6.23) Hrs	A. In cash State amount ¢	B. Item given in kind	C. Number of items given in kind	D. Units of items given in kind (Code c)	E. If [] sold the quantity they earned in kind, how much would they receive? ¢
			<i>r</i> 1				
							_

Code c: Units					
Pounds	01	American tin	08	Margarine tin	
Kilogram	02	Bundle	09	Other	
Ton	03	Barrel	10		
Minibag	04	Litre	11		
Maxibag	05	Gallon	12		
Basket	06	Beer bottle	13		

14

| H | Household Costs |
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15 96

07

Bunch

Bowl

6C. PAID EMPLOYMENT FOR HOUSEHOLD MEMBERS (continued)

We would like yo	ou to tell us about the jo	bbs (not business activities)	that household n	nembers have had	d over the past	year? Start wit	h respondent.	
6.24	6.25	6.26	6.	27	6.	28	6.29	6.30
Which	Is []'s employment	Is []'s employment	If temporary, ho	ow long has []	If [] duration	n is less than 1	What kind of	On an average
members	in the formal or	temporary or	been in	this job?	year give	start time	work does	week, how many
of your	informal sector?	permanent?	, ,		, ,		[] do?	days does []
household			$(\rightarrow 6$	6.28)	$(\rightarrow 0$	6.29)		work?
worked								
in wage employment	1=formal	1=permanent					(Work Code)	
last year?	2=informal	2=temporary					$(\rightarrow 6.30)$	(State number of
State ID	(→ 6.26)	(→ 6.27)					(* 0.00)	days)
$(\to 6.25)$, ,	, ,	Months	Years	Month	Year		(→ 6.31)
			onuic		in order	1 001		

Code a: Work Code

Technical (electrician, mechanic, etc.)	01	Handlers	08
Administrative/managerial	02	Labourers	09
Sales (retail, vending, etc.)	03	Security (police, guard, soldier)	10
Clerical (administrative support)	04	Civil Service	11
Craft	05	Teacher	12
Machine operators	06	Medical (nurse, lab technician, etc.)	13
Transportation	07	Other	96

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6C. PAID EMPLOYMENT FOR HOUSEHOLD MEMBERS

We would like you to te	Il us about the jobs (not b	usiness activities) th	nat household members hav	ve had over the pas	t year. Start wit	h respondent.			
Which members of	6.31		6.32	6.33					
your household have	For how long does []	How much did [.] earn from this job? (→		If []'s paymen	t was in kind, give:	, give:		
had wage	work on a typical day?		6.33) (→ 7.1)						
employment in the		A.	B.	A.	B.	C.	D.		
last year?		State amount	Frequency of payment.	Quantity	State Items	Quantity Code	How much cash		
State ID						(where applic-	would you		
		98=don't know	1=daily			able)	receive if you		
	(State number of		2=weekly				sold the []		
	hours)	4	3=monthly	(Ctoto mumb on)			today		
	(→ 6.32)	¢	4=other	(State number)		(Codo b)	4		
						(Code b)	¢		

Code b: Quantity Code

Pounds	01	American tin	08	Margarine tin	15
Kilogram	02	Bundle	09	Other	96
Ton	03	Barrel	10		
Minibag	04	Litre	11		
Maxibag	05	Gallon	12		
Basket	06	Beer bottle	13		

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	Household Costs				

Bowl **07** Bunch **14**

Household Costs Household Costs Household Costs Household Costs Household Costs

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7. HOU	JSING AND ASSET OWNERSHIP						
7.1	Does your <u>household</u> own the house that you are staying in? 1=yes, $2=no (\rightarrow 7.2)$						
7.2	How many rooms does the house have (exclude bathroom or	kitche	e n) (→ 7.3)				
7.3	7.3 What is the <u>main</u> source of drinking water for members of your household? 1=piped water, 2=open well, 3=covered well/borehole, 4=surface water, 5=rainwater, 6=tanker/truck, 7=bottled water, 8=sachet water, 96=other (specify)						
7.4 What type of fuel does your household mainly use for cooking? 1=electricity, 2=LPG/natural gas, 3=biogas, 4=kerosene, 5=charcoal, 6=firewood/straw, 7=dung, 96=other (specify)							
7.5 What type of toilet do you use? 1=flush toilet, 2=pit latrine, 3=pan/bucket 4=KVIP 5=no toilet (bush/beach) 96=other (specify)							
7.6	7.6 What material is used to build the walls of your house? 1=wood/bamboo, 2=mud bricks, 3=concrete bricks, 4=stone, 5=metal sheets, 96=other (specify)						
7.7	What main material is used to construct the roof of your hous 1=wood/bamboo, 2=mud bricks, 3=concrete, 4=brick tiles, 5 7=asbestos sheets (slate), 96=other (specify)	=metal					
7.8	What is the main material used for the floor of your house? 1=earth/sand/mud, 2=mud and dung, 3=wood planks, 4=polish 6=cement, 96=other (specify) $(\rightarrow 7.9)$	ed wo	od, 5=ceramic tile,				
7.9	What is the main source of lighting for the household? 1=electricity, 2=lantern, 3=candle, 4=LPG/natural gas, 5=torch (specify)	light,	6=bobo, 96=other				
7.10	Does your household own any of the following:	b.	Radio				
	1=yes, 2=no (→ Section 8)	C.	Television				
		d.	Video deck				
		e.	Telephone				
		f.	Refrigerator				

| Household Costs |
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8. HOUSEHOLD EXPENDITURE (MONTHLY AVERAGE)

We would like you to tell us how much you spent <u>last month</u> on the following:

EXPENDITURE ITEM	AMOUNT SPENT ϕ
8.1 Food expenditure (actual)	,
8.2 Food expenditure (imputed – consumption from own farm)	
8.3 Expenditure on housing (actual and imputed)	
8.4 Non-food expenditure	
8.4.1 Education	
8.4.2 Health	
8.4.3 Water	
8.4.4 Lighting	
8.4.5 Garbage/refuse collection	
8.4.6 Toilet facility	
8.4.7 Transport	
8.4.8 Toiletries (soap, toilet paper, etc.)	
8.4.8 Funeral donations/gifts	
8.4.9 Other non-food expenditure – payments (as wages, etc.)	
8.4.9 Other non-food expenditure (specify) 1	
8.4.9 Other non-food expenditure (specify) 2	
8.5 Remittances sent out	
8.6 Total	

THANK YOU!!!

Time interview ended					am	pm
Interviewers' name	 	 	 	 	 	
Supervisor's name						

3. Interviewers' Manual for the Productivity Costs Questionnaire (example from Ghana)

1. INTRODUCTION

BACKGROUND

The Immpact (Initiative for Maternal Mortality Programme Assessment) project is a global research initiative whose ultimate aim is to improve maternal health and survival in developing countries by providing rigorous evidence on the effectiveness and cost-effectiveness of safe motherhood strategies. The programme is organized into programmes of work, one of which relates to economic outcomes (Economic Outcomes Work Programme, EOWP). One of Immpact's concerns is the identification and measurement of economic outcomes of safe motherhood strategies. Immpact is now undertaking research in Ghana to provide information on how best to measure losses in production arising from maternal ill health.

OBJECTIVE OF SURVEY

The following are the objectives of the survey:

- 1. To adapt methods that have been used in typical industrialized country contexts to measure and value production losses due to maternal ill health in Ghana.
- 2. To identify strategies that households use to minimize production losses arising from maternal ill health.
- 3. To estimate productivity costs due to maternal ill health using the household production function approach, which indirectly allows for coping strategies that households use to minimize production losses due to ill health.
- 4. To compare productivity cost estimates derived from methods currently tested in developed countries with estimates derived from the household production function approach.
- 5. To assess the distribution of productivity costs due to maternal ill health across populations of population sub-groups defined socially, economically and geographically.

In order to achieve the above objectives, data on the following needs to be collected:

- households' demographic characteristics;
- women's daily work activities;
- women's time lost due to ill health during pregnancy;
- women's time lost due to ill health in the puerperium stage;
- · households' economic activities;
- households' asset ownership; and
- households' expenditure.

1. YOUR ROLE AS INTERVIEWER

As an interviewer you contribute immensely to the above. The quality of your work will determine the quality of the data collected, which will guide this important work. It is therefore important that you work closely with your supervisors in order to ensure that our work will be of best possible quality.

We encourage you to work closely with your supervisors, informing them of any problems that you encounter during the fieldwork exercise and to suggest ways of how we can improve the work. Additionally, you are encouraged to closely follow all instructions contained in this manual.

CHECKING COMPLETED QUESTIONNAIRES

When you have completed each interview, you must check to ensure that all relevant sections of the questionnaire are filled correctly and legibly before leaving the household.

Never make any changes to answers given to any question before asking respondents the same question again.

At the end of each day, you should submit all completed questionnaires to your supervisor.

THE SUPERVISOR

The role of the supervisor will be as follows:

- To examine in detail all questionnaires completed by you to ensure that each interview was conducted properly.
- To advise you on changes you need to make in order to improve the quality of your work.

If not satisfied that an interview was correctly conducted, the supervisor may ask you to do the interview again. We should all endeavour to prevent this from happening.

2. INTERVIEWING PROCEDURE

CONTACTING RESPONDENTS

It is a requirement that we should first inform all respondents identified for the survey about the purpose of our work. After the respondents have understood what we are doing we should ask if they are happy to participate in the survey. In order to insure that this is done correctly an 'INFORMED CONSENT FORM' has been prepared and attached to each questionnaire. This form must be completed before any questionnaire is administered.

COMPLETING THE 'INFORMED CONSENT FORM'

The following are the steps you should follow when completing the 'INFORMED CONSENT FORM':

- A. Enter the Region Code, which will be 11 for Central Region.
- B. Enter District Code, see Coding manual
- C. Enter the Community Code, see Coding manual
- D. Enter date in eight digit format (ddmmyyyy)
- E. Read out Section E to inform the respondent about the aim of the survey as well as to ask them if they are willing to be interviewed.
- F. If the respondent is willing to be interviewed take their name in the space provided. Additionally, ask them to sign the 'INFORMED CONSENT FORM'.

You should only proceed to administer the questionnaire after you have completed the 'INFORMED CONSENT FORM'.

THE INTERVIEW

Because respondents may not be aware of everything that happened during the time they were ill or may not have information about other issues we are asking about, you should try by all means to conduct the interview in the presence of their spouse or other key adult members of the household.

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It is important that you closely follow the instructions contained in this manual and you must interpret questions as outlined. All relevant parts of the questionnaire must be filled in during the interview (NEVER SHOULD ANY INFORMATION BE RECORDED ANYWHERE OTHER THAN ON THE QUESTIONNAIRE).

It is important that you maintain the tempo of the interview and avoid dwelling on issues that are not in the questionnaire. Should you feel the respondent is drifting away from the interview, you should politely try to draw them to the questions that you are asking.

At the end of the interview and after you have checked that all sections of the questionnaire have been completed, you must thank all members of the household who took part in the interview.

CONDUCT OF THE INTERVIEW

It is important to observe the following:

- Be courteous towards everyone (respondent and her household and other members of community). Their attitude towards the survey will be influenced enormously by your behaviour, therefore, do not disturb or upset anyone by your behaviour.
- You must exercise patience and tact during interviews. At all times avoid being antagonistic to the respondent or any members of her household.

3. FILLING OUT THE QUESTIONNAIRE

Most questions in the questionnaire ask for numeric responses (e.g. work days lost due to ill health, amount of hours spent on daily work activities, etc.). Where questions do not ask for numeric answers, all responses have been assigned numeric codes.

QUESTIONS WITH NUMERIC RESPONSES

Answers to questions with numeric responses must be written in **figures** (that is numerals not words) in the spaces provided in the questionnaire.

Example 1: You ask a respondent how long she was not able to attend to her normal activities due to illness. If they reply 1 week and 2 days, you must fill in the questionnaire as follows:

4.8	For how long were you not	Months	0	0	Weeks	0	1	Days	0	2
	able to attend to your normal daily activities?									

Example 2: You ask a respondent how much money they paid the person who assisted with their daily activities when they were ill. If they paid ¢20,000 per day, you must fill in the questionnaire as follows:

4.14	If you hired someone to assist you during		¢	2	0	,000
the period you were ill, how much did you		2. Weekly	¢			,000
pay for it? (If payment was in kind ask for value, and only fill the applicable)	3. Monthly	¢			,000	
	value, and only in the applicable)					

You must write down all monetary responses in thousands. If $$\phi$20,000$ was paid per day, you must enter$ **2 0**as shown in the example above.

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QUESTIONS WITH PRE-CODED ANSWERS

Most questions with pre-coded answers have a single (one) response. Only a few questions have multiple (more than one) responses.

Example 3: You ask a respondent who assisted them with their daily activities during the time they were ill. If they answer that they were assisted by a relative or friend, you must complete the questionnaire as follows:

4.12	Who assisted you with your normal activities during the time you were ill?	0	2
	1=other household members (\rightarrow 4.13), 2=relative/friend (\rightarrow 4.13), 3=neighbours (\rightarrow 4.13),		
	4=hired someone (\rightarrow 4.14), 96=other (specify) (\rightarrow 4.13)		
	as canon (specing) (mis)		

SECTION 2: HOUSEHOLD ROSTER (ALL RESPONDENTS)

PURPOSE

The time lost by households due to maternal ill health is a result of multitudes of behavioural responses that are often influenced by households' demographic and socio-economic background. The purpose of the Household Roster is thus to collect household demographic data (age, sex and marital status) and other household socio-economic characteristics (economic activities and educational attainment), which can be used to explain productivity cost outcomes.

RESPONDENT

The respondents for the Household Roster are women who have been identified for the survey. However, if other members of the household are present, you may ask them to help by providing details for questions concerning them.

DEFINITIONS

HOUSEHOLD

This study assumes a standard operational definition of a household, that is, a group of people who have usually slept at the same dwelling and taken their meals together for at least nine of the 12 months leading to the interview. This may include a man, his wife, children and other relatives (father/mother, nephew etc).

Persons who have been away for more than three months in the period leading to the survey should not be included as members of the household except if they are newly born children or students living at school/college.

TENANTS

Please note that tenants or other people staying on the same homestead as the respondent but who do not sleep in same dwellings or eat together with her must not be included as household members.

COMPLETING THE HOUSEHOLD ROSTER

- Starting with the respondent, fill in the names of all members of the household in the column labelled 'Name'.
- Then for each of the named members of the household, ask questions 2.2 through to 2.7. Use codes at the bottom of the page for all the questions with non-numeric responses.
- Question 2.1: The codes are already on the Household Roster; you do not need to do anything.
- Question 2.2: Ask for the age of each member of the household at last their birthday.
- **Question 2.3:** Ask how each of the named household members is related to the woman respondent.
- Question 2.4: The main economic activity is the most important source of income or livelihood strategy for each of the household members. If any member of the household is not economically active

for any reason, enter the appropriate code.

- **Question 2.5:** Ask whether each household member is male or female.
- **Question 2.6:** Ask for the highest level of education attained by each member of the household. You must classify the different levels of education as follows:

None NONE, pre-school, kindergarten

Primary P1, P2, P3, P4, P5, P6
Middle/JSS M1, M2, M3, M4
Secondary S1, S2, S3, S4, S5
Post secondary PS1, PS2, PS3, A1, A2

Tertiary Polytechnic, teacher training, university education

- Question 2.7: Ask for the marital status of all members of the household above 15 years of age.
- Question 2.8: Ask if the key decision-maker in the household resides with the woman respondent.
- Question 2.9: If from 2.8 the key decision-maker in the household resides with the woman respondent,

ask for their name. From the Household Roster (Question 2.1), identify his/her ID number

and write it in the space provided.

4. SECTION 3: WOMAN'S WORK ACTIVITY (ALL RESPONDENTS)

Question 3.1: Ask the woman what time she normally wakes up on a typical day and enter the time in the space provided.

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Question 3.2: Ask the woman what time she normally goes to sleep on a typical day and enter the time in the space provided.

Question 3.3: First ask the women to list all activities they normally do from the time they wake up to the time they go to sleep (codes for work activities are provided at the bottom of the page). For each activity listed ask the respondent how much time she normally takes to complete it – enter hours and minutes in separate columns.

Question 3.4: Write down the current status of the respondent, i.e., whether she is pregnant or whether she has delivered at least three months prior to the survey. Depending on respondent's status, you may move to either Section 4 or Section 5.

5. SECTION 4: PRODUCTIVITY COSTS - PREGNANT WOMEN

- **Question 4.1:** Ask the woman for the month and year when she first realized that she was pregnant. Enter the month and year in the space provided.
- **Question 4.2:** Ask the woman when she expects to deliver.
- **Question 4.3:** Ask the woman if she has ever been ill since the time she realized she was pregnant.
- **Question 4.4:** If the woman has been ill, ask her how many episodes of illness she has experienced.
- **Question 4.5:** Ask the woman for the main symptoms of the last condition. It is important to emphasize that you are only referring to the last episode of illness.
- **Question 4.6:** Ask the woman if she thinks the illness was a result of her pregnancy.
- **Question 4.7:** Ask the woman if she was able to attend to her normal activities during the time she was ill. Normal activities refer to domestic work and income generating activities.
- **Question 4.8:** Ask the woman if the pregnancy has affected her ability to attend to her daily work activities.
- **Question 4.9:** Ask the woman how long she was completely unable to attend to her daily activities.
- Question 4.10: If the woman had to work in a state of poor health, ask how long she did so.
- Question 4.11: Present woman with 5 blocks of wood and ask her to assume that they represent the amount of work she normally does in a state of good health. Ask her to pick the number of blocks that represents the amount of work that she managed to do during the time she worked in a state of poor health. Apply the visual analogue scale to make the question clearer.
- Question 4.12: Ask the woman if anyone assisted with her daily activities during the time that she was ill.
- **Question 4.13:** If the respondent was assisted during the time she was ill, ask who provided her with assistance.
- **Question 4.14:** If person(s) who assisted the woman are members of her household, ask for their name(s). Look up ID codes from the Household Roster and enter code in the space provided.
- **Question 4.15:** If the woman hired persons to assist her while she was ill ask how much she paid them. From the spaces provided enter the amount paid.
- **Question 4.16:** Ask the woman for how long she received assistance with her work during the time she was as unable to work due to conditions related to her pregnancy.
- Question 4.17: Present the woman with 5 blocks and ask her to assume that the blocks represent the amount of work she would normally do in a state of good health. Ask her to pick the number of blocks that represent the amount of work that was done by the persons who assisted her when she was ill.

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6. SECTION 5: PRODUCTIVITY COSTS - WOMEN WHO DELIVERED

- **Question 5.1:** Ask the woman when they delivered (date, month and year). If the woman cannot remember ask for the baby's birth records.
- **Question 5.2:** Ask the woman which type of facility she used for her delivery.
- **Question 5.3:** If the woman delivered at a health facility, ask her to name it. In the <u>Coding manual</u> you will find codes of all health facilities in Central Region that offer delivery services. In the space

provided, write down the code of the facility named.

- **Question 5.4:** If the woman delivered at a health facility (or institution), ask if this is where she first sought delivery care when she went into labour.
- **Question 5.5:** If the woman did not deliver at a health facility (or institution), ask for the main reason.
- **Question 5.6:** Ask the woman who attended to her while she delivered.
- Ask the woman how she delivered her baby: (1) whether she did not require assistance, (2) whether someone assisted manually to deliver the child, (3) whether any equipment was used to deliver the child or (4) whether she had a Caesarean section.
- **Question 5.8:** Ask the woman if she experienced any health problems at least a week after she delivered.
- **Question 5.9:** If from 5.8 the woman experienced any health problems ask her the main symptoms of the illness.
- **Question 5.10:** Ask the woman if she thinks that the illness was a result of her recent pregnancy or delivery.
- **Question 5.11:** Ask the woman if at least a week after she delivered, her baby experienced any health problems.
- **Question 5.12:** If from 5.10 the baby experienced health problems ask her the main symptoms.
- **Question 5.13:** Ask the woman if she has been able to attend fully to her main activities since the time she delivered.
- **Question 5.14:** If at any time the woman could not attend to her normal daily activities during the time she was ill, ask for how long she was unable to do so.
- **Question 5.15:** If the woman was able to attend to her normal daily activities during the time she or her baby was ill, ask her how long she did so.
- Question 5.16: Present the woman with 5 blocks of wood and ask her to assume that these represent the amount of work she would normally do in a state of poor health. Then ask her to pick the number of blocks that represent amount of work that her managed to do during the time she was ill. Also use the visual analogue scale to make the question clearer.
- Question 5.17: Ask the woman if anyone assisted her during the time that she was ill.
- **Question 5.18:** Ask for the person(s) who assisted the woman with her normal activities during the time that she was ill.
- **Question 5.19:** If person(s) who assisted the woman are members of her household, ask for their name(s). Look up ID codes from the Household Roster and enter them in the space provided.
- **Question 5.20:** If the woman hired person(s) to assist her when she was ill, ask how much she paid. From the spaces provided enter the amount paid.
- Question 5.21: Ask the woman how long she received assistance with her work during the time she was ill.
- Question 5.22: Present the woman with 5 blocks. Ask her to assume that the blocks represent the amount of work she would normally do in a state of good health. Then ask her to pick the number of blocks that represent the amount of work that was done by the persons who assisted her.

7. SECTION 6: HOUSEHOLD ECONOMIC ACTIVITIES

Question 6.1: Ask the woman to state the economic activities that members of her household are engaged in.

The administration of Questions 6.2 to 6.33 requires you to be very careful. It is really essential that you closely follow the following instructions. You may have to consult other members of the household to complete this section.

SECTION 6A: HOUSEHOLD FARMING ACTIVITIES

Question 6.2:	Ask the woman to list all crops grown by her household. Start with the crops which the
	woman is responsible for. In the column provided only write down the corresponding codes
	(see bottom of the table), then for each crop proceed to ask questions 6.3 through to 6.14.

- Ask the respondent who in her household is responsible for each of the listed crops. From the Household Roster enter the ID number for the members responsible against each of the crops. Immediately proceed to the next page and enter the ID codes in the first column following the same order as in this question.
- **Question 6.4:** Ask the respondent to give the amount of land that is planted with each of the crops listed.
- **Question 6.5:** Ask the respondent if the household owns the land on which each of the crops is being grown.
- **Question 6.6:** If the household is renting the land, ask how much money is paid each year for the land on which each of the crops is grown.
- **Question 6.7:** If household is on a sharecropping arrangement, ask what share of the output goes to the landlord as rent payment.
- **Question 6.8:** Ask the woman how many other members of her household are involved in growing each of the crops.
- **Question 6.9:** Ask the woman if any non-family labour was hired for the production of each of the crops.
- **Question 6.10:** If some labour was hired, ask the respondent how many people were hired for each of the crops.
- **Question 6.11:** If some labour was hired, ask the respondent how much in total was paid for the labour hired for each of the crops.
- Ask how much fertilizer was used for each of the crops. First ask for the quantity in kilograms (kg) and enter in the column labelled A. Then, ask for the quantity code (kg, maxibag, etc.) in the column labelled B. In column labelled C ask for type of fertilizer. All codes are at the bottom of the page.
- Ask which other inputs (not labour or fertilizer) were used in growing each of the crops. Enter quantity of input in the column labelled A. Enter the quantity code in the column labelled B, and the type of input in column labelled B. All codes are provided at the bottom of the table.
- **Question 6.14:** For each of the crops ask for the total output harvested. Enter quantity in column labelled A. Enter code for quantity in column labelled B.

SECTION 6B: FISHING AND NON-FARM ENTERPRISES

Question 6.15: Ask the respondent to list all small enterprises (e.g. fishing, fish processing, craft work, etc.)

that members of her household are involved in. Starting with activities that the woman is responsible for, list all activities in the column labelled 6.15. Then for each activity proceed

to ask questions 6.16 through to 6.23.

Question 6.16: Ask the respondent to name members of her household who are responsible for each of

the activities. From the Household Roster enter the ID number for the members responsible against each of the crops. Immediately proceed to the next page and enter the ID codes in

the first column, following the same order as in this question.

Question 6.17: Ask how many months each of the activities have been operating in the last year.

Question 6.18: Ask how many other people work on each of the activities.

Question 6.19: Of the people working on each of the activities, ask how many are members of the

woman's household.

Question 6.20: Ask how much money the household has invested on each of the activities in the last year.

Question 6.21: Ask the woman how many days a week members of her household work on this activity.

Question 6.22: Ask the woman the average number of hours that members of her household spend on

each of the activities each day.

Question 6.23: Ask respondent how much her household has earned from each of the activities in the last

month. Enter amount earned in cash in the column labelled A. Enter type of items received in kind in column labelled B. Enter the number of item(s) received in kind in column labelled C. Enter the unit for items received in kind in column labelled D (see the bottom of the page for codes). In Column labelled D ask the respondent how much she would earn if she sold

the item(s) received in kind.

SECTION 6C: HOUSEHOLD FARMING ACTIVITIES

Question 6.24: Ask the respondent to list all members of her household who have worked in wage

employment in the last year. From the Household Roster enter the ID numbers of the members starting with the woman. Immediately proceed to the next page and enter the ID

codes in the first column following the same order as in this question.

Question 6.25: Ask if each of the household members with wage employment worked in the formal or

informal sector. To determine whether people work in the formal or informal sector, ask if they make tax or pension contributions from their earnings. If they make tax or pension

contributions from their earnings record it as formal, otherwise enter it as informal.

Question 6.26: Ask if each of the household members with wage employment have a permanent or

temporary contract. To determine whether it is permanent or temporary employment, ask respondent if each of the members can continue to work on the job for as long as they

want. If yes, classify employment as permanent, otherwise classify as temporary.

Question 6.27: If a household member is in temporary employment, ask for how long he/she has been in

the same job. Enter the months in column labelled A, and enter the years in column

labelled B.

Question 6.28: If from question 6.27 the duration of employment is less than one year, ask for when the

respective members of the household started working. Enter month in column labelled A

and year in column labelled B.

Question 6.29: Ask what type of work each of the listed members do. Use codes provided at the bottom of

the page.

Question 6.30: Ask how many days each of the household members work on an average week.

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Question 6.31: Ask how many hours each of the listed household members work on a typical day.

Question 6.32: Ask how much each of the listed members earned from their employment. Enter amount

earned in column labelled A, and frequency of payment in column labelled B. Use the

codes provided for frequency of payment.

Question 6.33: If persons working received payment in kind ask the quantity received and enter it in

column labelled A. Ask respondent to state the item earned and write it in column labelled B. Ask respondent for quantity code and enter it in the column labelled C (use quantity codes at the bottom of the page). Lastly, ask respondent how much she would receive if

she sold the items received in kind and enter amount in column labelled D.

8. SECTION 7: HOUSEHOLD ASSET OWNERSHIP

Question 7.1: Ask the woman if any member of her household owns the house they are staying in.

Question 7.2: Ask the respondent how many rooms her household have for sleeping.

Question 7.3: Ask the respondent what the main source of drinking water is for members of her

household.

Question 7.4: Ask the respondent what the main type of fuel used by her household for cooking is.

Question 7.5: Ask the respondent what type of toilet is used by members of her household.

Question 7.6: Ask the respondent what material is used to build the walls of her house.

Question 7.7: Ask the respondent what material is used to build the roof of her house.

Question 7.8: Ask the respondent what material is used for the floor of her house.

Question 7.9: Ask the woman if any member of her household owns any of the assets listed.

9. SECTION 8: HOUSEHOLD EXPENDITURE

Question 8.1: Ask the respondent how much her household has spent on the items listed in the last month.

4. Coding Manual (example from Ghana)

District Code (DD)

District	Code
Awutu-Efutu Senya	10
Mfantseman	20
Twifo Hemang Lower Denkyira	30

Sub-district Code (CC)

Community	Code				
Awutu-Efutu Senya					
Winneba	11				
Awutu – Breku	12				
Awutu	13				
Bontrase	14				
Bawjiase	15				
Senya Breku	16				
Kasoa	17				
Mfantsem	nan				
Saltpond	21				
Mankessim	22				
Abeadze kyeakor	23				
Essuahyia	24				
Otuam	25				
Dominase	26				
Anomabu	27				
Biriwa	28				
Nanbeng	29				
Twifo Hemang Low	ver Denkyira				
Twifu Praso	31				
Twifo Hemang	32				
Twifo Mokwa	33				
Jukwa	34				
Frami	35				

Household Costs					

Health Facility Code

District hospital	Health Facility	Code				
District hospital						
Bethel Clinic & Maternity Home	District hospital	111				
Margo Maternity Home 114 Awutu Health Centre 121 Christy Maternity Home 131 Bontrase Health Centre 141 Adom Arakwa Maternity Home 151 Fausty's Maternity Home 152 Bawjiase Health Centre 153 Senya Breku Health Center 161 Central Kasoa Clinic 171 Jarzza Clinic 172 St. Jude Medical Centre 173 Mercy Maternity Home 174 Holy Family Maternity Home 175 Connie's Maternity 176 Justab Clinic and Maternity 177 Kasoa Health Centre 178 Mfantseman Government hospital 211 Fynba Hospital 221 Prince Charles Hospital 222 St. Anthony Maternity Home 233 El-Shaddai Mat. Home 231 Essuehyia Health Centre 251 Dominase Health Centre 261 Anomabu Health Centre 271 Biriwa Community Clinic 281		112				
Awutu Health Centre 121 Christy Maternity Home 131 Bontrase Health Centre 141 Adom Arakwa Maternity Home 151 Fausty's Maternity Home 152 Bawjiase Health Centre 153 Senya Breku Health Center 161 Central Kasoa Clinic 171 Jarzza Clinic 172 St. Jude Medical Centre 173 Mercy Maternity Home 174 Holy Family Maternity Home 175 Connie's Maternity 176 Justab Clinic and Maternity 177 Kasoa Health Centre 178 Mfantseman Government hospital 211 Fynba Hospital 221 Prince Charles Hospital 222 St. Anthony Maternity Home 223 EI-Shaddai Mat. Home 231 Essuehyia Health Centre 241 Otuam Health Centre 251 Dominase Health Centre 261 Anomabu Health Centre 271 Biriwa Community Clinic 281	Bethel Clinic & Maternity Home	113				
Christy Maternity Home 131 Bontrase Health Centre 141 Adom Arakwa Maternity Home 151 Fausty's Maternity Home 152 Bawjiase Health Centre 153 Senya Breku Health Center 161 Central Kasoa Clinic 171 Jarzza Clinic 172 St. Jude Medical Centre 173 Mercy Maternity Home 174 Holy Family Maternity Home 175 Connie's Maternity 176 Justab Clinic and Maternity 177 Kasoa Health Centre 178 Mfantseman Government hospital 211 Fynba Hospital 221 Prince Charles Hospital 222 St. Anthony Maternity Home 223 El-Shaddai Mat. Home 231 Essuehyia Health Centre 241 Otuam Health Centre 251 Dominase Health Centre 261 Anomabu Health Centre 271 Biriwa Community Clinic 281 Ekumf Nanabeng CHPS zone 291 <	Margo Maternity Home	114				
Bontrase Health Centre	Awutu Health Centre	121				
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