			For parents of the c	child aged 25-60 months
		B2 Parenting		
1) In the past month, what type	of milk did you feed the child? (Check the	Roster,in case the child was not fed with bre	east milk, please skip to no.B)	
A: breast milk	1- yes (skip to B) 3- no			CC1A
A1- How old was the c	child when you stopped breast feeding? (record 2 digit number e.g. 1 month, record "(01")	CC1A1
B: Other milk	1- yes(in case of answer 1 in the Ros	ter, please skip to ask no. 2A)	3- no (skip to ask no. 3)	CC1B
B1- How old was the c	child when you started to feed him/her with	other milk? (record 2 digit number e.g. 1 mo	onth, record "01")	CC1B1
ask 2A-2C in each item and re	ecord in table 1			
2A) In the past week, what type o	of milk did you feed the child?	1-yes 3-no (skip to ask next	t item)	use CARD with interview
(including milk supplied at ch	nild center/school)			
2B) Specify average quantity of m	nilk per week (box/bag/bottle/glass)			

Table 1	In the past week	CC2A		CC2C
	Type of milk	Drink?	explain detials	unit
1 Powdere	ed milk			ounce
2 Bag milk	k/Pasteurized milk			bag/bottle
3 UHT mil	k (sterilize)			box
4 Soy milk				bag/bottle/box
5 Drinking	yogurt/Yakult			box/bottle
6 Sweet c	ondensed milk (as a substitute for	milk)		can
7 Evapora	ted milk (as a substitute for milk)			can
8 Yogurt				cup
9 Others				

For central staff	
CC2B	
average quantity	
per week	

3)	Do you think the child currently develops malnutrition?	1-yes	3-no (ski	p to ask 4B)					Γ		CC15
3A)	What do you do?				•						CC15A
4	Since last interview, has the child had vitamin or supplementary food?		1-yes	3-no (skip t	o ask 5B)						CC3
4B)	B) Since last interview, what kind of vitamin has the child had? (In case of none, record "0")									СС3В	
4C	Since last interview, has the child had supplementary food e.g. chicken esse	ence, bird's	nest ?(in	case of none,	record "0" i	n number	of times)	No. of time	s		CC3CA
	Frequency code 1- every day 3- every week 5- every month 7- every 6	6 months 9	9- every ye	ar 11- others			ССЗСВ	code			CC3CC
5B)	Since last interview, has the child regularly drunk boiled, filtered or bottled	water?			1-yes	3-no					CC4B
				_			•		_		
6A)	Since last interview, has your child eaten the following food?	s 3-no (skij	o to next it	em) 9- Others	(skip to D) and recor	rd details in int	terviewer rec	ord		
6B)	How many days per month did your child have the following food?							use CARD	with ir	nterview	
	In the past month						yes / no		c	day per m	onth
	1 vegetable (including cooked, dried, grilled, boiled vegetable))							CC5A	٨4		CC5B4
	2 Eggs, meat and meat products							CC5A	\ 6		CC5B6
	3 Seafood e.g. mackerel, squid							CC5A	١7		CC5B7
	4 Softdrink							CC5A	48		CC5B8

6A) How many hours per week doe	s the father take care of this	child? (In case the father lives outside the h	nousehold, record "NA".)	For central staff
Monday-Friday (might include	Sa Before going to school	(CC6AA) to (C	C6AB)	
	After school (until going to	bed) i <mark>ild moved</mark> I to	(CC6AD)	CC6A
Saturday-Sunday or Holidays	Since		(CC6AE)	
SB) How many hours per week doe	s the mother take care of thi	s child? (In case the m		
Monday-Friday (might include	Sa Before going to school	(CC6BA) to (C	C6BB)	
	After school (until going to	o bed) (CC6BC) to	(CC6BD)	CC6B
Saturday-Sunday or Holidays	Since		(CC6BE)	
6C) How many hours per week do	you take care of this child ?			
(In case the father or mother	of child is primary caregiver	and no other member is primary caregiver,	please record "NA" in CC6C)	
Monday-Friday (might include	Sa Before going to school	(CC6CA) to(C	C6CB)	CC6C
	After school (until going to	o bed) (CC6CC) to	(CC6CD)	
Saturday-Sunday or Holidays				
	no	o. 6A-6C excluding sleep time and	rest time of caregiver	
8 Ask A-H and record in table 2				
Apart from you, was the child t	aken care of by the following	g people?	Code: relationship with child	
A- At present, is the child recei	ving care from the following	people?	1-household head	21- grand parents : mother side
1-yes 3-no (skip to next p	person)		3- husband / wife	23- father/mother-in-law (paretnts of wife)
B- Identify Member ID of hous	sehold member (in case the	caregiver is one of the relatives.)	5- father / mother	25- father/mother-in-law (parents of husband)
C- specify relationship with the	child (see code)		7- son / daughther	27- son/doughter-in-law
D- When did the child strart to	receive care from that perso	n?	9- brother / sister / younger brother /	younger sister
DA- month			11- grand son / grand daughter	29- sister in law / brother-in-law
DB- year			13- cousin	31- grandson/grand daughter-in-law
E- How many hours per week of	does child receive care from	that person?	15- uncle, aunt : father side	33- cousin-in-law
F-What is the monthly average	amount the household mem	ber pays a caregiver or a childcare center?	17- uncle, aunt: mother side	35- relatives
(If none, record "0" and s	kip to HA)		19- grand parents : father side	37- non-relatives
G- Does the expense include lu	unch meal?	1-yes 3-no		

H- In case the child is enrolled in a childcare center, ask the following questions

HA- indentify total number of children in the classroom

HB- Identify number of teacher/caregiver in the classroom

Table 2	CC7	CC7A	СС7В	CC7C	code	CC7DA	CC7DB	CC7E	CC7F	CC7G	СС7НА	СС7НВ
	category	take care?	Member ID	relationship with the child	relationship	month	year	take care (hr/week)	payment (baht/month)	lunch	number of child	number of teacher
1. child	care center		NA	NA	NA							
2. baby	vsitter**		NA	NA	NA						NA	NA
3. relati	ves outside the household		NA								NA	NA
4. relati	ves inside the household								NA	NA	NA	NA
5. other	rs, specify										NA	NA
6. other	rs, specify										NA	NA
7. other	rs, specify										NA	NA
8. other	rs, specify										NA	NA
9. other	rs, specify										NA	NA
10. other	rs, specify										NA	NA

^{* &}quot;child care center" means a place to raise children ex. Nursery (excluding child development center, kindergarten)

^{**&}quot;babysitter" means the person who is hired to take care of child at home.(excluding nursery, relatives outside household)

Regarding the child's eating	behavior, do you still need to follow and	feed the child? 1- yes 3- no		CC10G
11) Media exposure and influence of n	nedia on children			
I: How often does the child wat	ch television while eating?	1- never 3- sometimes 5- often		CC11I
C : In the past week, did you res	trict the television programs for the child	1?		CC11C
1- yes (restricted) 3	- no (The child can watch any program)	5- The child did not watch television		
E: Does your household connec	t to the internet via computor, lpad, tebl	et, or mobile phone?	res 3-no	CC11E
The response of parents to the chi A: Since last interview, has the chi		noney is not considered as participating in child re	earing)	CC13A
1- never (skip to B)	3- sometimes	5- often		
If yes, please specify how				CC13A_des
B : Since last interview, have you 1- never (skip to H)	and your household members planned 3- sometimes	and discussed on good practice on child rearing 5- often	?	CC13B
If yes, please specify how?			•	CC13B_des
I: At present, how dangerous is	<u> </u>			CC13I
1- not at all	3- somewhat	5- much		
4) Interviewer's note				CC14