##

## PROJECT-LEVEL WOMEN’S EMPOWERMENT IN AGRICULTURE INDEX

## OPTIONAL HEALTH AND NUTRITION MODULE (+HN)

## This survey module is for the optional health and nutrition module (+HN) of the project-level Women’s Empowerment in Agriculture Index (pro-WEAI). This module should be collected alongside the core pro-WEAI. Optional questions, which are not required to calculate the indicators, but may be of interest to some studies, are designated in purple text. Complete details on the development and validation of the module and its indicators can be found in the following open access journal article in *Maternal & Child Nutrition*.

Heckert, J., Martinez, E. M., Seymour, G., Pereira, A., Roy, S., Kim, S. S., Malapit, H., & Gender Assets and Agriculture Project Phase 2 (GAAP2) Health and Nutrition Study Team. (forthcoming). Development and validation of a health and nutrition module for the project-level Women’s Empowerment in Agriculture Index (pro-WEAI+HN). *Maternal & Child Nutrition*, *n/a*(n/a), e13464. <https://doi.org/10.1111/mcn.13464> (Early view, online version of record)

Pro-WEAI is a survey-based index for measuring empowerment, agency, and inclusion of women in the agriculture sector. It was developed jointly by the International Food Policy Research Institute (IFPRI), the Oxford Policy and Human Development Initiative (OHPI), and thirteen partner projects in the portfolio of the Gender, Agriculture, and Assets Project, Phase 2 (GAAP2). The tool helps agricultural development projects assess women’s empowerment in a project setting, diagnose areas of women’s disempowerment, design strategies to address deficiencies, and monitor project outcomes. Pro-WEAI is an adaptation of the Women’s Empowerment in Agriculture Index (WEAI), originally developed in 2012 by IFPRI, the United States Agency for International Development (USAID), and OPHI.

The pro-WEAI health and nutrition module helps agricultural development projects with nutrition-related objectives (e.g., nutrition sensitive agriculture projects) to understand how they empower women in the area of nutrition and health by measuring women’s health- and nutrition-related intrinsic agency. This module can be used to calculate seven indicators, some of which are specific only to women with young children (under age 2) or women who have been pregnant or given birth in the past two years. Details on these indicators are available in Table 5 of journal article listed above and on the online WEAI Resource Center.

## For more information about pro-WEAI or pro-WEAI+HN, please visit the WEAI Resource Center weai.ifpri.info or email the WEAI help desk at IFPRI-WEAI@cgiar.org.

**MODULE X. NUTRITION AND HEALTH**

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| Now I’d like to ask you some questions on making decisions about your health and nutrition.[Note for survey adaptation: Based on specific needs, projects may wish to provide more detailed response categories for **other non-household family members** (response code 96)listed for question GX.01 and GX.03. Example additions might include, RESPONDENT’S MOTHER (if outside household)…81; RESPONDENT’S MOTHER-IN-LAW (if outside household)…82; A SENIOR CO-WIFE (if outside household)…83; ABSENT HUSBAND…84. These response codes should be in the 80s.] | When decisions are made about [ACTIVITY], who normally takes the decision? **ENTER UP TO THREE (3) MEMBER IDs****IF RESPONSE IS MEMBER ID (SELF) ONLY** 🡪 ***GX.03*****OTHER CODES:**NON-HH, NON-FAMILY MEMBER 94Non-hh, FAMILY MEMBER (SPECIFY RELATIONSHIP TO RespONDENT) 96NOT APPLICABLE 98 >> NEXT Row | To what extent do you participate in decisions regarding [ACTIVITY]?**CIRCLE ONE** | How confident do you feel to make decisions about [ACTIVITY]?**CIRCLE ONE** | When decisions are made regarding [ACTIVITY], who would you prefer made the decision?**ENTER UP TO THREE (3) MEMBER IDs** **OTHER CODES:**NON-HH, NON-FAMILY MEMBER 95Non-hh, FAMILY MEMBER (SPECIFY RELATIONSHIP TO RespONDENT) 96NOT APPLICABLE 98 |
| **WOMAN’S HEALTH AND NUTRITION**  | **GX.01** | **GX.02** | **GX.03** | **GX.04** |
| **ID #1** | **ID #2** | **ID #3** | **ID #1** | **ID #2** | **ID #3** |
| **A** | Whether or not you consult a doctor or go to a clinic when you are ill? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **B** | How much you can rest when you are ill? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **C** | What foods to prepare every day?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **D** | What foods (available in the house) you can eat? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **E** | Whether or not you have a/another child? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **F** | Whether or not you use a contraceptive method (such as birth control pills, condoms, hormonal shot, or sterilization)? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **GX.05** Have you been pregnant or given birth within the past 2 years\*? (Includes currently pregnant women)[Note for survey adaptation: The timeframe highlighted for **GX.05** should be altered to reflect the program implementation period, such that women are only being asked this question if they were pregnant after the start of program implementation. Ideally, this same timeframe should be used at all surveys.] | YES ……..…….. 1NO……...……… 2 🡪 ***GX.06*** |
| **G** | Whether you consulted a doctor or went to a clinic during your current or most recent pregnancy? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **H** | How much you worked during your current or most recent pregnancy? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **I** | How much you could rest during your current or most recent pregnancy?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **J** | Whether you could eat eggs during your current or most recent pregnancy? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **K** | Whether you could consume milk or milk products during your current or most recent pregnancy? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **L** | Whether you could eat meat, poultry or fish during your current or most recent pregnancy? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **M** | How much you worked when your youngest child was being breastfed? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4Not APPLICABLE 98 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **N** | How much you could rest when your youngest child was being breastfed?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4Not APPLICABLE 98 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **O** | Whether you could eat eggs when your youngest child was being breastfed? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4Not APPLICABLE 98 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **P** | Whether you could consume milk or milk products when your youngest child was being breastfed? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4Not APPLICABLE 98 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **Q** | Whether you could eat meat, poultry or fish when your youngest child was being breastfed? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4Not APPLICABLE 98 | Not at all 1Somewhat 2Very confident 3 |  |  |  |

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| The next set of questions asks about making decisions about your YOUNGEST child.[Note for survey adaptation: Based on specific needs, projects may wish to provide more detailed response categories for **other non-household family members** (response code 96)listed for question GX.05 and GX.07. Example additions might include, RESPONDENT’S MOTHER (if outside household)…81; RESPONDENT’S MOTHER-IN-LAW (if outside household)…82; A SENIOR CO-WIFE (if outside household)…83; ABSENT HUSBAND…84. These response codes should be in the 80s.] | When decisions are made about [ACTIVITY], who normally takes the decision? **ENTER UP TO THREE (3) MEMBER IDs****IF RESPONSE IS MEMBER ID (SELF) ONLY** 🡪 ***GX.08*****OTHER CODES:**NON-HH, NON-FAMILY MEMBER 95Non-hh, FAMILY MEMBER (SPECIFY RELATIONSHIP TO RespONDENT) 96NOT APPLICABLE 98 >> NEXT ROW | To what extent do you participate in decisions regarding [ACTIVITY]?**CIRCLE ONE** | How confident do you feel to make decisions about [ACTIVITY]?**CIRCLE ONE** | When decisions are made regarding [ACTIVITY], who would you prefer made the decision?**ENTER UP TO THREE (3) MEMBER IDs****OTHER CODES:**NON-HH, NON-FAMILY MEMBER 95Non-hh, FAMILY MEMBER (SPECIFY RELATIONSHIP TO RespONDENT) 96NOT APPLICABLE 98 |
| **CHILD HEALTH AND NUTRITION**  | **GX.06** | **GX.07** | **GX.08** | **GX.09** |
| **ID #1** | **ID #2** | **ID #3** | **ID #1** | **ID #2** | **ID #3** |
| **A** | Whether your child is taken to a clinic or a doctor is consulted when he/she is sick? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **B** | Whether your child gets vaccinations? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **C** | Whether your child visits the health clinic to see if he/she is growing well? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **D** | How to feed your child when he/she is sick?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **E** | Who will care for your child when you need to go outside the home for an extended period of time? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **F** | Sending your child to school?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **G** | (If child is >6 months of age:)Whether or not your child is offered eggs to eat? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **H** | (If child is >6 months of age:)Whether or not your child is offered milk or milk products, other than breastmilk?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **I** | (If child is >6 months of age:)Whether or not your child if offered meat, poultry or fish? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **GX.10** Do you have a child less than 2 years of age\*?[Note for survey adaptation: The timeframe highlighted for **GX.10** should be altered to reflect the program implementation period, such that women are only being asked this question if the child was born after the start of program implementation. Ideally, this same timeframe should be used at all surveys.] | YES ……..…….. 1NO……...……… 2 🡪 ***GX.11*** |
| **J** | Whether to breastfeed your child? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **K** | When to stop breastfeeding your child? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **L** | When to start giving foods and liquids (other than breastmilk) to your child? |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |
| **M** | (If child is >6 months of age:)Whether or not your child is fed foods prepared or bought especially for children that adult household members do not eat or drink, such as fortified cereals or baby foods?  |  |  |  | Not at all 1Small extent 2Medium extent 3To a high extent 4 | Not at all 1Somewhat 2Very confident 3 |  |  |  |

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| The next set of questions asks about making decisions and your ability to obtain the types of food, medicine and other items that you want for you and your child.[Note for survey adaptation: Based on specific needs, projects may wish to provide more detailed response categories for **other non-household family members** (response code 96)listed for question GX.09. Example additions might include, RESPONDENT’S MOTHER (if outside household)…81; RESPONDENT’S MOTHER-IN-LAW (if outside household)…82; A SENIOR CO-WIFE (if outside household)…83; ABSENT HUSBAND…84. These response codes should be in the 80s.] | When decisions are made whether or not to purchase [PRODUCT], who generally makes the decision?**ENTER UP TO THREE (3) MEMBER IDs****OTHER CODES:**NON-HH, NON-FAMILY MEMBER 95Non-hh, FAMILY MEMBER (SPECIFY RELATIONSHIP TO RespONDENT) 96NOT APPLICABLE 98 | You may acquire an item that you need in a variety of ways, such as purchasing or cultivating it or having someone purchase or cultivate it for you. When you need [PRODUCT], can you usually acquire it? |
|  | **GX.11** | **GX.12** |
| **ID #1** | **ID #2** | **ID #3** |
| **A** | Small amounts of food, for example smaller than 5 kg |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **B** | Larger amounts of food, for example larger than 5 kg |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **C** | Eggs |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **D** | Milk or milk products |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **E** | Meat, poultry or fish (including organ meats) |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **F** | Special foods for children (i.e., foods prepared or bought especially for children that adult household members do not eat or drink, such as fortified cereals or baby foodsthat programs or health workers tell you should be consumed |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **G** | Any nutritious foods that a program or health worker told you to eat or drink |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **H** | Medication, vitamins or supplements for children |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **I** | Medication, vitamins or supplements for yourself |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **J** | Clothing for children  |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |
| **K** | Clothing for yourself |  |  |  | YES 1NO 2NOT APPLICABLE 98 |
| **L** | Toiletries, such as soap and toothpaste |  |  |  | Yes 1NO 2NOT APPLICABLE 98 |