

INTERVIEWER: _____ [][][][]	CONFIDENTIAL	IDW: [][][][]
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EDITOR : _____ [][][][]

**EAST INDONESIAN FAMILY LIFE SURVEY 2012
HEALTH FACILITY**

**INTEGRATED COMMUNITY HEALTH POST
(POSYANDU)**

SECTIONS: LK, KR, A, B, C, D, SDP, PRP, CP

FACILITY CODE BOOKTYPE

NAME OF POSYANDU : _____ [][][][][] / **P P S** [][][][]

POSYANDU INTERVIEW BOOK

	INTERVIEW I	INTERVIEW II	INTERVIEW III		
DATE:	[][]/[][]/[][][][]	[][]/[][]/[][][][]	[][]/[][]/[][][][]	CK1. Interview was entirely/mostly conducted in what language? [][] Other	Interview language code : 00. Indonesian 12. Makassar 01. Javanese 13. Nias 02. Sundanese 14. Palembang 03. Balinese 15. Sumbawa 04. Batak 16. Toraja 05. Bugis 17. Lahat 06. Chinese 18. Other South Sumatra 07. Maduranese 19. Betawi 08. Sasak 20. Lampung 09. Minang 96. No other 10. Banjar 95. Other 11. Bima
DAY/MONTH/YEAR	DAY/MONTH/YEAR	DAY/MONTH/YEAR	DAY/MONTH/YEAR		
TIME BEGIN:	[][]/[][]	[][]/[][]	[][]/[][]	CK2. Other language used (if any): [][] Other	
HOUR/MINUTE	HOUR/MINUTE	HOUR/MINUTE	HOUR/MINUTE		
TIME FINISHED:	[][]/[][]	[][]/[][]	[][]/[][]		
HOUR/MINUTE	HOUR/MINUTE	HOUR/MINUTE	HOUR/MINUTE		
INTERVIEW RESULTS:	[]	[]	[]		
FP2. STATUS SAMPLING	FP3. INTERVIEW RESULTS CODE	FP4. REASON FOR C1 = "3" OR "2" IN FP3.	FP5. EDITING STATUS BY EDITOR	FP6. MONITORING BY LOCAL SUPERVISOR	
Is this facility listed in SD2 and selected as a sample? 1. Yes 3. No	1. Completed → FP5 2. Partially completed 3. Not completed	1. Respondent is traveling 2. Respondent is too busy 3. Refused	1. Edited, no correction necessary 2. Edited and corrected 3. Manual edit without CAFE 4. Entered, not edited _____	Yes No	
				a. Observed.....	1 3
				b. Edited	1 3
				c. Verified	1 3

SECTION KR : RESPONDENT'S CHARACTERISTICS

	RESPONDENT I	RESPONDENT II
KR01. Name of Respondent	_____	_____
KR02. Age	<u> </u> Years	<u> </u> Years
KR02a. Sex	Male..... 1 Female..... 3	Male..... 1 Female..... 3
KR03. Title/Position [...] in the Posyandu in the village	Head of Posyandu 1 Posyandu Cadre 2 Other 3	Head of Posyandu 1 Posyandu Cadre 2 Other 3
KR04. Length of tenure in the position	<u> </u> Years	<u> </u> Years
KR05. Highest level of education attended	01 02 03 04 05 06 11 12 13 14 15 17 60 61 62 63 72 73 74 90 98 95 _____	01 02 03 04 05 06 11 12 13 14 15 17 60 61 62 63 72 73 74 90 98 95 _____
KR06. Highest grade/class completed	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98
KR07. Length of time residing in this village	<u> </u> Years	<u> </u> Years

Code KR05

- 01. No school/Not yet at school
- 02. Elementary
- 03. Junior High – General
- 04. Junior High - Vocational
- 05. Senior High - General
- 06. Senior High - Vocational
- 60. D1, D2, D3 (Junior College)
- 61. University S1 (Bachelors)
- 62. University S2 (Masters)
- 63. University S3 (Doctorate)

- 11. Adult Educ. A (Kejar Paket A)
- 12. Adult Educ. B (Kejar Paket B)
- 13. Open University
- 14. Islamic School Pesantren
- 15. Adult Educ. C (Kejar Paket C)
- 17. School for the disabled
- 72. Islamic Elementary School (*Madrasah Ibtidaiyah*)
- 73. Islamic Junior High School (*Madrasah Tsanawiyah*)
- 74. Islamic Senior High School (*Madrasah Aliyah*)
- 90. Kindergarten
- 98. DON'T KNOW
- 95. Other _____

Code KR06

- 00. Never completed class I
- 01. 1
- 02. 2
- 03. 3
- 04. 4
- 05. 5
- 06. 6
- 07. Graduated
- 96. No school
- 98. DON'T KNOW

SECTION A: GENERAL

Now we would like to ask about the service and activity of this Posyandu.

Name _____	Position _____
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A1. What year did this Health Post begin operation ?	1. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 8. DON'T KNOW
A2. Before this Health Post was established, did this village have a Weighing Post, a FP Post, or some other community health post:	Yes 1 No 3
A2a. Is this Posyandu functioning as a Posyandu for the Elderly?	Yes 1 → A3a No 3
A2b. Is there any Posyandu for the Elderly in this village?	Yes 1 No 3
A3a. Is this Health Post open every month?	Yes 1 → A4 No 3
A3b. In the last year, how many times was the Health Post in operation?	<input type="text"/> times
A4. When the Health Post is operating, on average how many cadres are active?	<input type="text"/> cadres
A4a. Is the PPKBD always present at Posyandu activities?	Yes1 No3
A4b. Which classification matches this Health Post?	Pratama (lower level)1 Madya (middle level)2 Purnama (higher level)3 Self-sufficient4 Don't know8
A6. What are the opening and closing hours of this Health Post:	a. Opening time <input type="text"/> : <input type="text"/> b. Closing time <input type="text"/> : <input type="text"/>
A7. When the Health Post is not open, and someone needs OC pills or oralit, where can they get them? (CIRCLE ALL THAT APPLY)	Public Health Center A Public Health Subcenter B Hospital C Clinic D Pharmacy E Private Practice F Cadre's Home G Village Staff L PKK Meeting M Other V

A8. When a mother wants to use the FP method [...], where is she referred to? Public Health Center 01 Public Health Subcenter 02 Hospital 03 Clinic 04 Private Practice 05 KB Manunggal/Safari KB 06 Not referred 07 Other 95	a. IUD <input type="text"/> _____ b. Implant <input type="text"/> _____ c. Sterilization <input type="text"/> _____
A9. In general, where do mothers go for prenatal care in this village (note: past 12 months)? (CIRCLE ALL THAT APPLY)	Government Hospital A Private Hospital B Health Center C Village Maternity Clinic D Clinic/Private Doctor E Clinic/Private Midwife F Traditional Midwife's House G Health Post I Village Midwife J Other V
A10. In general where do mothers in this village give birth to their babies (note: past 12 months)? (CIRCLE ALL THAT APPLY)	Government Hospital A Private Hospital B Maternity Hospital C Health Center (Puskesmas) D Village Maternity Clinic (Polindes) E Clinic/Private Doctor F Clinic/Private Midwife G Traditional Midwife's House H Own home I Family's house J Other V

SECTION A: GENERAL

<p>A11. Usually, who assists the mothers in giving birth to their babies (note: past 12 months)?</p> <p>(CIRCLE ALL THAT APPLY)</p>	<p>Doctor A Midwife B Village Midwife C Nurse D Traditional Midwife (Dukun bayi) E No one assists..... G Posyandu Cadre I Other V</p>
<p>A11a. At this time how many traditional midwives (Dukun bayi) assist birth in this village?</p>	<p>NONE 6 → A12 <input type="checkbox"/> people 1 DON'T KNOW 8</p>
<p>A11b. In the last year, what percent of women in this village are assisted in childbirth by a traditional midwife?</p>	<p>≥ 75% 1 50 % - 74% 2 25 % - 49 % 3 < 25 % 4 DON'T KNOW 8</p>
<p>A12. Mention 3 (three) main problems faced by this Health Post in the last two years:</p>	<p>A. Lack of fund B. Lack of medical supply C. Lack of equipment D. Lack of active cadres E. Lack of support from puskesmas F. Lack of support from village / township G. No permanent place H. Lack of interest/ participation I. Lack of KIA training for cadres V. Others _____ W. NO PROBLEM</p>
<p>A13. Mention 3 (three) main problems that you faced in mother and child health, in the last two years:</p>	<p>A. Lack of fund B. Lack of medical supply C. Lack of equipment D. Lack of active cadres E. Lack of support from puskesmas F. Lack of support from village / township G. No permanent place H. Lack of interest/ participation I. Lack of KIA training for cadres V. Others _____ W. NO PROBLEM</p>

SECTION B : SERVICES AT THE POSYANDU

Now, we would like to ask about the services available in this Posyandu.

Name of Respondent : _____	Position : _____
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B0a. How much is the charge for each Posyandu visit?	_____,____ Rp
B0b. In comparison with last year, how much has the service charge changed?	1. Increase 2. No change 3. Decrease

B1.	B2.		B3a.		B4.			B5d.
TYPES OF SERVICES	Have you offered [...] services in the past 12 months?		Do you currently offer [...] services?		How many [...] in Posyandu in the last 3 months?			Additional service charges?
					a. 1 month ago	b. 2 months ago	c. 3 months ago	
A. Weighing of babies/children	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
B. Provision of supplementary food	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
C. Provision of Oralit	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ 3. No charge
D. Immunization service	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
E. Pregnancy examination	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
E1. Provision of iron vitamin supplements	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
E2. Provision of vitamin A supplements	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
F. Treatment of patients	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge
G. Child development (TKA)	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	
H. Mother and child health (KIA)	3. No ↓	1. Yes	3. No ↓	1. Yes	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1. ____ 8. DON'T KNOW	1.____,____ Rp 3. No charge

SECTION B : SERVICES AT THE POSYANDU

B6. Mention source of funds for Posyandu activities in the last 12 months!		Yes	No
	a. Monthly routine contribution of villagers	1	3
	b. Village/township budget	1	3
	c. Donation from Health Center (Puskesmas)	1	3
	d. Community Health Funds Contributions	1	3
	e. Contribution from certain donors	1	3
	v. Other	1	3

TYPES OF FAMILY PLANNING SERVICES	B8a.	B8b.	B10a.	B11.	B12.
	Have you offered [...] services in the past 12 months?	Do you currently offer [...] services?	Additional charges per unit	In comparison to the last year, have you seen a change in the number of clients using [...] service?	What factors account for the change in the number of clients using [...] service?
B7a. Oral contraceptive	3. No 1. Yes ↓	3. No 1. Yes ↓	_____, _____ Rp.	1. Increase 3. Decrease 2. No change ↓	A1 B1 C1 D1 E1 H1 I1 A2 B2 C2 D2 E2 H2 I2 F G J K Y V _____
B7b. Condom (per unit)	3. No 1. Yes ↓	3. No 1. Yes ↓	_____, _____ Rp.	1. Increase 3. Decrease 2. No change ↓	A1 B1 C1 D1 E1 H1 I1 A2 B2 C2 D2 E2 H2 I2 F G J K Y V _____
B7c. Injectable contraceptive	3. No 1. Yes ↓	3. No 1. Yes ↓	_____, _____ Rp.	1. Increase 3. Decrease 2. No change ↓	A1 B1 C1 D1 E1 H1 I1 A2 B2 C2 D2 E2 H2 I2 F G J K Y V _____
B7d. Overcoming side effects (per action)	3. No 1. Yes ↓	3. No 1. Yes ↓	_____, _____ Rp.	1. Increase 3. Decrease 2. No change ↓	A1 B1 C1 D1 E1 H1 I1 A2 B2 C2 D2 E2 H2 I2 F G J K Y V _____
B7e. Family Planning counseling	3. No 1. Yes ↓ SECTION C	3. No 1. Yes ↓ SECTION C		1. Increase 3. Decrease 2. No change ↓ SECTION C	A1 B1 C1 D1 E1 H1 I1 A2 B2 C2 D2 E2 H2 I2 F G J K Y V _____

CODE B12 :

A1. Increase in price of methods
 B1. Decrease in availability of methods
 C1. Clients can no longer afford
 D1. Switch to other method
 E1. High risk of side effect
 H1. Switch to other methods
 I1. Feel uncomfortable with the contraceptive

A2. Decrease in price of methods
 B2. Increase in availability of methods
 C2. Clients can no longer afford
 D2. Switch from other methods
 E2. Low risk of side effect
 H2. Switch from other methods
 I2. Feel comfortable with contraceptive

F. Free of charge from a government Program
 G. Improvement in awareness/knowledge of family planning
 J. The number of reproductive couple increase
 K. Routine counseling
 Y. DON'T KNOW
 V. Other _____

SECTION C: POSYANDU MANPOWER

Now, we would like to know about the cadre working for this Posyandu.

C1. Name (Initial)	C2. Highest level of education?	C4a. Since when did [...] have worked for this Posyandu ?	C2a. Has [...] ever had training?	C3. Training of Posyandu cadre		
				C3a. When was the last training? (year)	C3b. For how many days? (days)	C3c. What kind of training? Have [...] ever had training on Child Development (TKA)
a. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
b. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
c. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
d. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
e. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
f. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
g. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____
H. _____	01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 72 73 74 90 98 95 _____	____/_____ MONTH/YEAR	3. No 1. Yes ↓	1. Year _____ 8. DON'T KNOW	____ days	A. Child Development (TKA) B. Service for elderly C. Family Planning V. Other _____

Code C2 :

01. No school/Not yet
02. Elementary School
03. Junior High - General

04. Junior High - Vocational
05. Senior High – General
06. Senior High - Vocational

60. D1, D2, D3 (Junior College)
61. University S1 (Bachelors)
62. University S2 (Masters)

63. University S3 (Doctorate)
11. Adult Educ. A (Kejar Paket A)
12. Adult Educ. B (Kejar Paket B)

13. Open University
14. Islamic School Pesantren
15. Adult Educ. C (Kejar Paket C)

17. School for disable person
72. Islamic Elementary (Madrasah Ibtidaiyah)
73. Islamic Junior High School (Madrasah Tsanawiyah)
74. Islamic Senior High School (Madrasah Aliyah)

90. Kindergarten
98. DON'T KNOW
95. Other _____

SECTION C: POSYANDU MANPOWER

C4a1. In the last 12 months, did a PLKB staff visit this Posyandu?	No3→ C4c No PLKB6→ C4c Yes1
C4b1. How many times in the last 12 months did a PLKB staff visit this Posyandu?	□□□ times.....1 DON'T KNOW.....8
C4b3. Relative to previous years since 2007, has there been a change in the visits from PLKB changed?	Increased.....1 No change2 Decreased3
C4c. Is there a Bina Keluarga Balita (Child Development) program at this Posyandu?	No3→ C5 Yes.....1
C4d. Who implements the Bina Keluarga Balita program? (CIRCLE ALL THAT APPLY)	BKKBN officials.....A Petugas suka rela/kader.....B Bidan DesaC Staff Puskesmas.....D Other.....V
C4e. How many times in the last year was the Bina Keluarga Balita program conducted at this Posyandu?	□□□ times.....1 Never6 DON'T KNOW.....8

C5. How many times in the last year has this Posyandu been visited by staff from the Health Center (Puskesmas)?	Never 6→ C6a2 DON'T KNOW 8→ C6a2 □□□ times 1																		
C6. Who usually comes?	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>a. Nurse</td> <td>1</td> <td>3</td> </tr> <tr> <td>b. Midwife.....</td> <td>1</td> <td>3</td> </tr> <tr> <td>c. Immunization personnel</td> <td>1</td> <td>3</td> </tr> <tr> <td>d. Physician</td> <td>1</td> <td>3</td> </tr> <tr> <td>e. Other.....</td> <td>1</td> <td>3</td> </tr> </tbody> </table>		Yes	No	a. Nurse	1	3	b. Midwife.....	1	3	c. Immunization personnel	1	3	d. Physician	1	3	e. Other.....	1	3
	Yes	No																	
a. Nurse	1	3																	
b. Midwife.....	1	3																	
c. Immunization personnel	1	3																	
d. Physician	1	3																	
e. Other.....	1	3																	
C6a2. Relative to previous years since 2007, has there been a change in visits to this Posyandu from Puskesmas?	Increase 1 No change 2 Decrease 3																		

Category of Activities	C7.		C8.		
	Are there other visits from Health Center personnel outside Posyandu opening days, for the following activities:		How many visits in the last year?		
a. Information on immunization	3. No ↓	1. Yes	1. □□□ times	6. Never	8. DON'T KNOW
b. Information on KB	3. No ↓	1. Yes	1. □□□ times	6. Never	8. DON'T KNOW
c. Mobile Medical Team (TMK)	3. No ↓	1. Yes	1. □□□ times	6. Never	8. DON'T KNOW
d. Sanitation Program	3. No ↓	1. Yes	1. □□□ times	6. Never	8. DON'T KNOW
e. Information on Mother and Child Health (KIA)	3. No ↓	1. Yes	1. □□□ times	6. Never	8. DON'T KNOW
f. Services for Posyandu for the elderly	3. No ↓	1. Yes	1. □□□ times	6. Never	8. DON'T KNOW
	SECTION D				

SECTION D : HEALTH INSTRUMENTS

Kindly give information on health instruments at this Posyandu.

D1.	D2.	D3.	D4.
KINDS OF INSTRUMENTS	Are the [...] instruments here?	How many are there? (Existing stock at Posyandu)	In the last 6 months for how many weeks has [...] been out of stock?
a. Baby scales	1. Yes 3. No		
b. Height measuring device	1. Yes 3. No		
c. KMS cards	3. No → D4 1. Yes	□□□□ cards	1. □□□ weeks 6. Never available 8. DON'T KNOW
d. Pregnant Mother cards	3. No → D4 1. Yes	□□□□ cards	1. □□□ weeks 6. Never available 8. DON'T KNOW
e. Oral contraceptive pills	3. No → D4 1. Yes	□□□□ pill strip	1. □□□ weeks 6. Never available 8. DON'T KNOW
g. Demonstration tools/books	1. Yes → D4 3. No ↓		1. □□□ weeks 6. Never available 8. DON'T KNOW
h. Oralit	3. No → D4 1. Yes	□□□□ packages	1. □□□ weeks 6. Never available 8. DON'T KNOW
i. Iron tablets / Sulfas Ferosus	3. No → D4 1. Yes	□□□□ tablets	1. □□□ weeks 6. Never available 8. DON'T KNOW
j. Vitamin A	3. No → D4 1. Yes	□□□□ tablets	1. □□□ weeks 6. Never available 8. DON'T KNOW
k. Paracetamol/Other lowering fever medicine	3. No → D4 1. Yes	□□□□ tablets	1. □□□ weeks 6. Never available 8. DON'T KNOW
l. Children's toys	1. Yes 3. No		
m. Instruction book for the Bina Keluarga Balita program	1. Yes 3. No		
n. Adult scale	1. Yes 3. No		
o. Tensimeter	1. Yes 3. No		
p. Osteoporosis kit	3. No ↓ 1. Yes	□□□□ kits	
q. Cholesterol kit	3. No ↓ 1. Yes	□□□□ kits	
r. Stethoscope	1. Yes 3. No		
s. Thermometer	1. Yes → D4 3. No	□□□□ kits	1. □□□ weeks 6. Never available 8. DON'T KNOW

SECTION SDP : POSYANDU RESOURCES

Now, we would like to ask resources of this Posyandu.

<p>SDP00. INTERVIEWER CHECK A2a=1 (IS THIS POSYANDU IS FUNCTIONING AS ELDERLY POSYANDU?)</p>	<p>NO 3 → SDP02 YES 1</p>
<p>SDP00a. Can you separate the source of resource for Posyandu and Elderly Posyandu?</p>	<p>1. IF YES, SDP is only for POSYANDU 3. IF NO, SDP is both for POSYANDU AND ELDERLY POSYANDU</p>
<p>SDP02. What is the value per month of [...] provided by the community for this Posyandu?</p> <p>a. Cash</p> <p>b. Food</p> <p>c. Time spent by volunteers for Posyandu</p> <p>v. Other _____</p>	<p>a. , , Rp b. , , Rp c. 03. hours 05. Days v. , , Rp</p>
<p>SDP03a. In the last 12 months, has this Posyandu received any resources for preventing undernourished ?</p>	<p>No 3 → SDP03 Yes 1</p>
<p>SDP03b. How many times has this Posyandu received resources?</p>	<p> times</p>
<p>SDP03c. What is the source of the resources</p>	<p>A. Puskesmas/Pustu B. BKKBN/PLKB C. Village V. Other _____</p>
<p>SDP03d. What is the value of [...] received by Posyandu?</p> <p>a. Cash</p> <p>b. Food</p> <p>c. Time spent by volunteers for Posyandu</p> <p>v. Other</p>	<p>a. , , Rp b. , , Rp c. 03. hours 05. days v. , , Rp</p>
<p>SDP03. Does this Posyandu receive resources from other parties?</p>	<p>No 3 → SECTION PRP Yes 1</p>

SECTION SDP : POSYANDU RESOURCES

SDP04.	What kind of resources obtained from other parties, and who are those parties?	TYPES OF RESOURCES				
		A. Cash	B. Food	C. Vitamin	D. Vaccination	E. Other equipment
	CONTRIBUTING PARTIES					
a. Puskesmas	Ya..... 1 Tidak 3	Ya 1 Tidak..... 3	Ya 1 Tidak..... 3	Ya 1 Tidak..... 3	Ya 1 Tidak 3	Ya..... 1 Tidak 3
b. Other Posyandu	Ya..... 1 Tidak 3	Ya 1 Tidak..... 3	Ya 1 Tidak..... 3	Ya 1 Tidak 3	Ya 1 Tidak 3	Ya..... 1 Tidak 3
c. BKKBN/PLKB	Ya..... 1 Tidak 3	Ya 1 Tidak..... 3	Ya 1 Tidak..... 3	Ya 1 Tidak 3	Ya 1 Tidak 3	Ya..... 1 Tidak 3
v. Other _____	Ya..... 1 Tidak 3	Ya 1 Tidak..... 3	Ya 1 Tidak..... 3	Ya 1 Tidak 3	Ya 1 Tidak 3	Ya..... 1 Tidak 3

SECTION PRP: POSYANDU REVITALIZATION PROGRAM

Now, we would like to ask about the Posyandu Revitalization Program since 2000.

PRP00. Have you ever heard Posyandu revitalization program?	No3→SECTION CP Yes1
PRP01a. Has there been a Posyandu revitalization program since 2005?	No3→SECTION CP Yes1
PRP01b. When is the last time this Posyandu received revitalization program?	Year [][][][]

INTERVIEWER NOTE: ASK PRP01c AND PRP02 ACCORDING TO THE YEAR IN PRP01b TILL THE LAST LINE. CIRCLE OPTION OF 3 FOR THE YEARS WITH NO POSYANDU REVITALIZATION PROGRAM.

Now we would like to ask about the Posyandu Revitalization Program since 2005.

YEAR (PRPTYPE)	PRP01c. Was there PRP program in [...]?	PRP02. How much money did the Posyandu receive from the revitalization program in [...]?
A. 2012	3. No ↓ 8.DK ↓ 1.Yes	1. [] , [][][] , [][][] Rp. 8. DON'T KNOW ↓
B. 2011	3. No ↓ 8.DK ↓ 1.Yes	1. [] , [][][] , [][][] Rp. 8. DON'T KNOW ↓
C. 2010	3. No ↓ 8.DK ↓ 1.Yes	1. [] , [][][] , [][][] Rp. 8. DON'T KNOW ↓
D. 2009	3. No ↓ 8.DK ↓ 1.Yes	1. [] , [][][] , [][][] Rp. 8. DON'T KNOW ↓
E. 2008	3. No ↓ 8.DK ↓ 1.Yes	1. [] , [][][] , [][][] Rp. 8. DON'T KNOW ↓
F. 2007	3. No ↓ 8.DK ↓ 1.Yes	1. [] , [][][] , [][][] Rp. 8. DON'T KNOW ↓

PRP03a. Has half of the money received used for [...] :		1. Yes 3.No
	a. Introduce Education and Information Counseling (KIE) to community leader/head of village or township	1 3
	b. Train cadres	1 3
	c. Purchase cooking utensils	1 3
	d. Purchase other supplies for Posyandu	1 3
	e. Give transport money to cadres	1 3
	f. Supplementary food distribution program (PMT)	1 3

SECTION CP : INTERVIEW SESSION NOTE

	QUESTION NUMBER	NOTES
CP1. Questions with doubtful answers		
CP2. Questions needing conversion of unit of measurement		
CP3. Questions using secondary data source, data unclear		
CP4. Other problems		

INTERVIEWER NOTE
