



SUAAHARA II GOOD NUTRITION PROGRAM

ANNUAL SURVEY YEAR THREE (2019)



January 2020

This publication was produced for review by the United States Agency for International Development. It was prepared by Helen Keller International under the terms of cooperative agreement number AID-367-A-16-00006.

SUAAHARA II GOOD NUTRITION PROGRAM

Annual Survey Year Three (2019)

DISCLAIMER:

This report is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The content of this report is produced by Helen Keller International, *Suaahara II* Program and does not necessarily reflect the views of USAID or the United States Government.

Cover Picture: An enumerator interviewing a respondent in Kanchanpur. (Photo: Kenda Cunningham, Suaahara/USAID)

The *Suaahara II* Good Nutrition Program is supported by the United States Agency for International Development (USAID) under Cooperative Agreement No. AID-367-A-16-00006.

Suaahara II is managed by:

Helen Keller International	Helen Keller
(HKI)	INTERNATIONAL

In partnership with:

Cooperative for Assistance and Relief Everywhere, Inc. (CARE)	care
Family Health International 360 (FHI 360)	Thi 1360 THE SCIENCE OF IMPROVING LIVES
Digital Broadcast Initiative Equal Access (DBI EA)	DBI EA
Environmental and Public Health Organization (ENPHO)	ENPHO Creating Eco Societies
Nepali Technical Assistance Group (NTAG)	Asset Teories Angel Teories N T A C
Vijaya Development Resource Center (VDRC)	Road -

Contents

Li	st of	Tables	2
Li	st of	Figures	4
E	xecu	tive Summary	5
		eport Objectives	
Α	crony	yms	9
1.		Background	10
	1.1	Health and nutrition context in Nepal	
	1.2	Description of SII	10
	1.3	Structure of the baseline report	11
2.		Annual monitoring survey design	
	2.1	Survey objectives and description	
	2.2		
		2.1 Sample size and power calculations	
		2.2 Sampling methodology	
		Survey instruments	
		3.1 Household questionnaires	
		4.1 Training of personnel and testing of survey tools	
		4.2 Administration of survey questionnaires	
		4.3 Fieldwork challenges	
	2.5	Data management	
	2.	5.1 Data entry and cleaning	17
	2.	5.2 Statistical Analysis	17
3.	ı	Results: Background	19
4.	ŗ	Results: IR 1/Nutrition	23
5.	ı.	Results: IR 1/WASH	33
6.	ı	Results: IR 2/Health	39
7.		Results: IR 3/Agriculture and Enhanced Homestead Food Production	47
8.		Results: SBCC	59
9.		Results: GESI	69
Ο.	9.1	Empowerment in non-agricultural domains	
	9.2	Suaahara's ten key behaviors, disaggregated	
	9.3	Suaahara promoted 60 government health system contact points, disaggregated	
	9.4	Suaahara II coverage, disaggregated	87
1(ე.	Program Implications	92
1	1.	Annexes	97

List of Tables Figure 2 Sampling methodology......13 Table 2.2 Household questionnaire modules, 2019......15 Table 4.2 Breastfeeding knowledge among mothers......24 Table 4.4 Complementary feeding knowledge among household heads......25 Table 4.7 Child feeding during illness and recovery knowledge among household heads.......27 Table 4.8 Child feeding during illness and recovery knowledge among mothers......27 Table 4.9 Practice of child feeding during illness, among children ill in the last 2 weeks28 Table 4.12 Maternal nutrition knowledge among household heads.......30 Table 4.14 Dietary practices during pregnancy and lactation among mothers of children <2 years 30 Table 4.17 Dietary practices among female household heads, other than mothers.......31 Table 4.18 Nutrition-related decision-making power of male household heads, among those who Table 4.19 Nutrition-related decision-making power of mothers, among those who stated a Table 5.3 Drinking water treatment practices as reported by household heads......34 Table 5.4 Drinking water treatment practices as reported by mothers35 Table 5.5 Handwashing with soap and water knowledge among household heads......35 Table 5.8 Water user group available in the community reported by household heads37 Table 5.9 Water user group available in the community reported by mothers37 Table 5.12 Decision-making power on purchase and use of water treatment supplies among Table 5.13 Decision-making power on purchase and use of water treatment supplies among Table 6.1 Child vaccination and supplementation40

Table 6.5 Growth monitoring practices among children 0-2 years	
Table 6.6 Knowledge on maternal health among household heads	
Table 6.8 ANC, delivery, and PNC practices among mothers with children <2 years	
Table 6.9 Age at marriage, pregnancy and childbirth	
Table 6.10 Family planning/ healthy timing and spacing of pregnancy (HTSP) knowledge am household heads	44
Table 6.11 Family planning/ healthy timing and spacing of pregnancy (HTSP) knowledge am	ong
mothers	
Table 6.12 Family planning practices among non-pregnant mothers	45
Table 6.13 Interactions of household heads with health workers, in last 6 months	
Table 6.14 Interactions of mothers with health workers, last 6 months	
Table 6.15 Health-related decision-making power of male household heads, among those	
stated a decision was made	46
Table 6.16 Health-related decision-making power of mothers, among those who stated a decision-making power of mothers.	_
was made	
Table 7.1 Household food security status	
Table 7.2 Land ownership and use	
Table 7.3 Interactions between VMFs and homestead food production beneficiaries (HFPB).	
Table 7.4 HFP knowledge among household heads	
Table 7.5 HFP knowledge among mothers	
Table 7.6 Homestead gardening practices	
Table 7.7 Poultry ownership and management	
Table 7.8 Income, selling, and use of revenue from crop outputs in the last 12 months	
Table 7.9 Total income, selling, and use of revenue from poultry outputs in the last 12 month	
Table 7.10 Total income, selling, and use of revenue from HFP outputs (vegetables and chicke	
in the last 12 months	
Table 7.11 Interactions of household heads with agriculture FLWs	
Table 7.12 Interactions of mothers with agriculture FLWs	
Table 7.13 Groups available in the community, as reported by male household heads	
Table 7.14 Groups available in the community, as reported by mothers	
Table 7.15 Participation and decision-making of household heads in agriculture related activities.	
(among participants who stated a decision was made)	58
Table 7.16 Participation and decision-making of mothers in agriculture related activities (am	
participants who stated a decision was made)	_
Table 8.1 Awareness of <i>Suaahara</i> and interactions with FLWs among household heads	
Table 8.2 Awareness of <i>Suaahara</i> and interactions with FLWs among mothers	
Table 8.3 Interactions of household heads with FCHVs	
Table 8.4 Interactions of mothers with FCHVs	
Table 8.5 Participation in health mothers' groups	
Table 8.6 Male participation in <i>Suaahara</i> activities, reported by household heads	63
Table 8.7 Male participation in <i>Suaahara</i> activities, reported by mothers	03
Table 8.8 Radio listening device ownership and use among household heads	
Table 8.9 Radio listening device ownership and use among mothers	
Table 8.10 Bhanchhin Aama (BA) exposure among household heads	
Table 8.11 Bhanchhin Aama (BA) exposure among mothers Table 8.12 Phone access/use among household heads	oo
Table 8.13 Phone access/use among mothers	
Table 8.14 SMS exposure among household heads Table 8.15 SMS exposure among mothers	
Table 8.16 Phone ownership and SMS exposure among mothers of children 0-2 years	
Table 6. To Friend Ownership and Ownership arriving monitors of children 0-2 years	07

Table 8.17 Groups available in the community reported by male household heads	67
Table 8.18 Groups available in the community reported by mothers	
Table 9.1 Household heads' participation/ decision-making in non-agricultural hous	
productive activities, among those who stated a decision was made	
Table 9.2 Mothers' participation/ decision-making in non-agricultural household prod	
activities, among those who stated a decision was made	
Table 9.3 Maternal minimum dietary diversity (consuming foods from at least 5 out of 10	
groups in previous 24 hours) among mothers of children aged 0-23.9 months	
Table 9.4 Egg consumption among mothers of children aged 0-23.9 months	
Table 9.5 Meat consumption among mothers of children aged 0-23.9 months	
Table 9.6 Attended ANC at least four times	
Table 9.7 Took at least 180 IFA tablets during pregnancy	
Table 9.8 Use of modern method of family planning among mothers of children <2 years	
Table 9.9 Child minimum dietary diversity (consuming foods from 4 out of 7 food grounds)	
previous 24 hours) among children aged 6-23.9 months	
Table 9.10 Egg consumption among children aged 6-23.9 months	
Table 9.10 Lgg consumption among children aged 6-23.9 months	
Table 9.11 Meat consumption afficing children aged 0-23.9 months	
Table 9.13 Feeding more to sick children <2 years	
Table 9.15 Appropriate drinking water treatment among households with a child <2 years	
Table 9.16 Practiced handwashing at all six times among mothers with a child <2 years	
Table 9.17 Child minimum acceptable diet among children aged 6-23.9 months	
Table 9.18 Newborns receiving postnatal health check within 24 hours of birth	
Table 9.19 Taken at least 45 IFA tablets during postnatal period, among those who take an	
Table 9.20 Soap and water at hand washing station among households with children <2	-
Table 9.21 Sixty contact points: Mean ANC visits among mothers with children <2 years	
Table 9.22 Sixty contact points: Mean ANC visits among mothers with children <2 years Table 9.22 Sixty contact points: Mean PNC visits for mothers within 24 hours of birth, a	
	_
mothers with children <2 years	04
Table 9.23 Sixty contact points: Mean PNC visits for children within 24 hours of birth, a	.mong
mothers with children <2 years	
Table 9.24 Sixty contact points: Mean GMP visits in the last six months among mothers	S WILLI
children <2 years	86
Table 9.25 Sixty contact points: Mean HMG attendance in the last six months among mo	
with children <2 years	86
Table 9.26 Ever heard of <i>Suaahara</i> (among mothers with children <2 years)	
Table 9.27 Ever met Suaahara FLWs (among mothers with children <2 years)	
Table 9.28 Ever participation in <i>Suaahara</i> community activities, other than group med	
(among mothers with children <2 years)	
Table 9.29 Ever heard of Bhanchhin Aama (among mothers with children <2 years)	
Table 9.30 Ever listened to Bhanchhin Aama (among mothers with children <2 years)	
Table 9.31 Received health/nutrition SMS on own mobile phone in last month (among mo	
with children <2 years)	91
List of Figures	
	_
Figure 1 Annual Survey Districts	
Figure 2 Sampling methodology	13

Executive Summary

Nepal's reductions in maternal and child undernutrition since the mid-1990s have been remarkable, but the high burden persists. Among children under five years, 36% are stunted, 10% are wasted, and 27% are underweight. Additionally, 17% of women of reproductive age (WRA, 15-49 years) are underweight while 41% are anemic (Nepal DHS Survey, 2016). The Government of Nepal (GoN) is rolling out the second phase of their national Multi-Sector Nutrition Plan (MSNP), with support of external development partners (EDPs). Suaahara II (SII) is a USAID-funded multisectoral nutrition program, aligned with Nepal's MSNP, and is being implemented in all communities of 42 of Nepal's 77 districts from April 2016 to March 2021. SII's overall aim is to reduce the prevalence of stunting, wasting, and underweight among children under five years of age and to reduce the prevalence of anemia among WRA and children 6-59 months of age. SII works across thematic areas including nutrition, health and family planning (FP), water, sanitation and hygiene (WASH), agricultural/homestead food production (HFP), and governance, using a gender equality and social inclusion (GESI) approach for all interventions.

SII has a large, rigorous monitoring, evaluation, and research system. Annual monitoring surveys, a key component of SII's monitoring system, primarily serve to monitor progress over time related to key SII inputs, outputs, and outcomes in intervention areas. The first SII annual monitoring survey was conducted between June to September 2017 among a representative sample of households with a child under five years by New ERA, a local survey firm. At the household level, mothers were the primary survey respondents. A primary male (or female, if male unavailable) household decision maker, the youngest child's grandmother, and an adolescent girl (10-19 years), if residing in the same household, were also interviewed. Data was also collected from Female Community Health Volunteers (FCHVs) and 1 key informant from each health facility in the sampled areas. The household surveys included questions related to exposure, knowledge and practices for each of the thematic areas mentioned above. Anthropometric status was assessed for all female respondents and children. FCHV and health facility surveys collected information on exposure to training, motivation, supervision, and work-related activities. In 2017, the final survey sample included 3,642 households.

New ERA also carried out the second and third surveys between July and September 2018 and 2019 respectively, again among a representative sample of households with a child under five years in the same sample clusters. In the 2018 and 2019 surveys, only mothers as the primary survey respondents and a primary male (or female, if no males available) household decision maker were interviewed. Other household members, health facility workers and FCHVs were not interviewed and at the household level, anthropometry information was not collected. The final survey sample was 3,648 households in both 2018 and 2019.

Some variation in survey modules and questions existed across the 2017, 2018, and 2019 tools, mostly due to adding questions of important for program staff as activities implementing changed and dropping questions not needed to measure on an annual basis. Key modules and questions, however, needed for calculation of indicators along SII's primary pathways to impact remained unchanged. Trends in key indicators from 2017, 2018, and 2019 for all intervention areas - nutrition, health, FP, WASH, and agriculture - can be measured. To assess changes over time, comparison of results between years 1 and 2, years 1 and 3, and years 2 and 3 were done, with more significant p-values expected for the changes between years 1 and 3 due to a longer period of program exposure in the population. Changes in key indicators from 2017 to 2018 to 2019 are noted in Table 1.

Table 1 Key indicators from 2017, 2018, and 2019 surveys

Table 1 Key indicators from 2017, 2018, and 2019 surveys								
Indicators	2017	2018	2019	P-value 2017/	P-value 2017/	P-value 2018/		
indicators	Mean/%	Mean/%	Mean/%	2017/	2017/	2016/		
Maternal health and nutrition				2010	2010	2010		
Women's Dietary Diversity (10 food groups):								
Mean number of food groups consumed by	4.1	4.3	4.4	<0.001	<0.001	0.015		
women of reproductive age (N=3640, 3648,								
3648)								
Minimum dietary diversity among WRA (foods								
from 5 or more of 10 food groups) (N=3640,	35.6%	41.6%	45.3%	< 0.001	< 0.001	0.011		
3648, 3648)								
Women consuming all 180 tablets of Iron and								
folic acid (IFA) during pregnancy (N=1835,	52.4%	59.1%	53.9%	<0.001	0.391	0.002		
1899, 1820)								
Pregnant women weighed during most recent								
ANC visit, among those who received ANC	86.7%	93.4%	94.7%	<0.001	< 0.001	0.132		
(N=1772, 1855, 1775)								
Births receiving at least 4 ANC visits during	79.5%	85.5%	88.8%	<0.001	<0.001	0.001		
pregnancy (N=1850, 1910, 1825)	19.576	00.076	00.076	VO.00 1	VO.00 1	0.001		
Births attended by a skilled birth attendant	73.2%	77.2%	82.3%	0.004	<0.001	<0.001		
(N=1848, 1910, 1825)	70.270	77.270	02.070	0.004	\0.00 1	\0.00 1		
WRA in union who are currently using a modern	34.2%	33.2%	35.7%	0.400	0.194	0.020		
method of contraception (N=3642, 3648, 3648)	01.270	00.270		0.700	0.707	0.020		
Child health and nutrition								
Low birth weight (N=621, 702, 896)	11.1%	8.3%	9.5%	0.090	0.296	0.387		
Newborns receiving postnatal health check	73.5%	79.1%	83.0%	<0.001	<0.001	0.066		
within 24 hours of birth (N=1820, 1896, 1784)	7 0.070	, .	00.070	10.00	10.00	0.000		
Children 0-2 years weighed in the past month	17.8%	22.2%	26.3%	0.010	<0.001	0.048		
(N=1850, 1910, 1827)								
Children 0-2 years who were put to the breast	67.5%	69.3%	74.8%	0.030	<0.001	0.002		
within one hour of birth (N=1843, 1902, 1820)								
Exclusive breastfeeding of children under 6	62.9%	65.8%	68.9%	0.860	< 0.001	< 0.001		
months of age (N=455, 450, 431)								
Children 12–15 months of age who are	98.5%	99.6%	98.2%	0.230	0.0.821	0.178		
breastfed (N=201, 265, 222)								
Minimum acceptable diet among children 6-23	37.5%	45.7%	47.2%	<0.001	< 0.001	0.456		
months of age (N=1385, 1460, 1396) Minimum dietary diversity among children 6-23								
months of age (foods from 4 or more of 7 food	<i>16 7</i> 0/	E2 E0/	E7 E0/	0.001	-0.001	0.052		
	46.7%	53.5%	57.5%	0.001	<0.001	0.053		
groups (N=1385, 1460, 1396) Infants 6–8 months of age who receive solid,								
semi-solid or soft foods (N=214, 210, 204)	91.6%	88.1%	92.2%	0.260	0.848	0.220		
Breastfed and non-breastfed children 6–23								
months of age, who received solid, semi-solid,	91 20/	07 00/	95 <i>5</i> 0/	-0.001	0.004	0 121		
or soft foods (N=1385, 1460, 1396)	81.2%	87.8%	85.5%	<0.001	0.004	0.121		
Children 6–23 months of age who received an								
iron-rich food or iron-fortified food (N=1385,	84.2%	88.6%	89.8%	0.001	<0.001	0.300		
1460, 1396)	UT.Z /0	00.070	03.070	0.001	\U.UU1	0.300		
. 755, 7555)								

	2017	2018	2019	P-value	P-value	P-value
Indicators		Mean/%		2017/	2017/	2018/
	wean/%	wean/%	wean/%	2018	2019	2019
Sick children 6-23 months of age fed more	38.5%	38.8%	35.9%	0.900	0342	0.285
during illness (N=593, 541, 597)	00.070	00.070	00.070	0.000	0012	0.200
Children <5 years who had diarrhea in the prior	11.1%	9.1%	9.5%	0.010	0.062	0.629
two weeks (N=3642, 3648, 3648)	, 0	0,0	0.070	0.0.0	0.002	0.020
Sick children 6-23 months (diarrhea) given oral						
rehydration solution (ORS) and zinc (N=190,	20.0%	14.6%	19.3%	0.151	0.859	0.249
165, 176)						
Households with a child aged 0-2 years who had		50 50/	00.00/	0.000	0.004	0.400
contact with the FCHV in the previous month	52.5%	58.5%	60.9%	0.002	<0.001	0.199
(N= 1848, 1909, 1826) Water, sanitation and hygiene						
Households using an improved sanitation facility						
(N=3642, 3647, 3648)	86.6%	88.3%	84.1%	0.264	0.100	0.019
Households practicing correct use of household						
water treatment technologies (N=3629, 3646,	14.3%	19.0%	18.4%	<0.001	< 0.001	0.593
3647)						
Households with soap and water at a						
handwashing station commonly used by family	37.0%	48.5%	61.2%	<0.001	<0.001	<0.001
members (N=3629, 3646, 3647)						
Women practicing handwashing at 6 critical	7.8%	19.0%	9.8%	<0.001	0.161	<0.001
times (N=3640, 3648, 3648)						
Agriculture/Enhanced Homestead Food Produ	iction					
Households with homestead gardens meeting minimum criteria (N=986, 988, 988)	7.7%	22.3%	22.1%	<0.001	<0.001	0.938
Households with chickens (N=986, 988, 988)	42.9%	47.4%	43.4%	0.022	0.782	0.098
Number of chickens vaccinated against	42.9%	47.4%	43.4%	0.022	0.762	0.098
Newcastle disease (ND) (N=423, 468, 429)	1.0	0.1	3.2	0.263	0.215	0.052
Number of nutrient dense vegetable cultivated						
by households in previous year (N=986, 988,	8.2	9.9	11.6	0.001	< 0.001	<0.001
988)	0.2	0.0	11.0	0.007	\0.00 1	\0.00 1
Households with a child aged 0-2 years who						
received HFP inputs from village model farmers						
(VMFs) and/or graduated HFP beneficiaries	16.8%	27.2%	21.0%	0.003	0.127	0.084
(N=519, 552, 510)						
Households who sold surplus vegetable	22.22/	17.00 (10.001			
production in the past year (N=986, 988, 988)	20.9%	17.9%	19.9%	0.263	0.737	0.267
Number of eggs produced in the past month			40.0			
(N=423, 543, 513)	11.3	8.9	12.3	0.092	0.568	0.017
Households who sold surplus eggs produced in	4.00/	0.00/	0.40/	0.045	0.057	0.400
the past month (N=423, 543, 513)	4.3%	2.0%	3.1%	0.015	0.257	0.189
Households that used revenue earned by selling						
HFP surplus for nutrition, in the previous years	17.3%	31.1%	21.3%	0.015	0.373	0.032
(N=220, 180, 211)						

Report Objectives

The purpose of the annual survey report is to document and disseminate key results from the SII annual monitoring surveys related to the four key intermediate results' (IRs) themes – (i) household nutrition and WASH behaviors, (ii) use of nutrition and health services by women and children, (iii) access to nutrient rich foods by women and children, and (iv) accelerated roll-out of the MSNP through strengthened local governance. Each annual survey provides data on outcome variables for each IRs and is used to assess progress from the previous year and establish "baseline" levels for the following year. In addition to providing the results from the third annual monitoring survey, this year's report also analyzes and discusses trends over time by comparing results across the three annual surveys – 2017, 2018, and 2019 – and discuss the implications of these trends for program modifications or improvements.

Acronyms

AHW Auxiliary Health Worker

ANC Antenatal Care

ANM Auxiliary Nurse Midwifery

BMI Body Mass Index

DAG Disadvantaged Groups

EDP External Development Partner

EHFP Enhanced Homestead Food Production FCHV Female Community Health Volunteer

FLW Frontline worker
FP Family Planning
FS Field Supervisor

GESI Gender Equality and Social Inclusion
GMP Growth Monitoring and Promotion

GoN Government of Nepal
GPS Global Positioning System
HFP Homestead Food Production

HFPB Homestead Food Production Beneficiaries

HH Household

HKI Helen Keller International HMG Health Mothers' Group

HTSP Healthy Timing and Spacing of Pregnancy

IFA Iron and folic acid
IR Intermediate Result

IYCF Infant and Young Child Feeding
MER Monitoring Evaluation and Research

MSNP Multi-sector Nutrition Plan

NDHS Nepal Demographic and Health Survey

NHRC Nepal Health Research Council
NPC National Planning Commission

ODK Open Data Kit

ORS Oral Rehydration Solution

PNC postnatal care

PPS Probability Proportion to Size

SBCC Social and Behavior Change Communication

TOT Training of Trainers

USAID United States Agency for International Development

VDCs Village Development Committees

VMF Village Model Farmers

WASH Water, Sanitation and Hygiene WRA Women of Reproductive Age

1. Background

1.1 Health and nutrition context in Nepal

Nepal has witnessed substantial political, economic, and demographic changes over the last three decades. Years of armed conflict and political instability culminated in the formation of a democratic republic government in 2008. A new constitution was promulgated in 2015, replacing the interim constitution created in 2007. The related restructuring of administrative and geographic boundaries throughout Nepal included a transition from 75 to 77 districts organized into 7 provinces in 2017. Within the districts, rural and urban municipalities were allocated to replace and, in most instances, amalgamate the former village development committees (VDCs) and municipalities as the first sub-district unit, with wards now being the smallest formal administrative unit. At present, there are a total of 753 local government units (6 metropolitans, 11 submetropolitans, 276 urban municipalities and 460 rural municipalities) and 6743 wards operating under these districts in Nepal.

The Nepal Demographic and Health Survey (NDHS) 2016, found persistent high undernutrition prevalence rates among children under five years: 36% are stunted, 27% are underweight, and 10% are wasted. While national prevalence rates of stunting, underweight, and wasting have declined over the last 20 years, their current levels remain among the highest in the world. The NDHS 2016 also found 53% of children aged 6 to 59 months to be anemic based on HB<110g/L. Furthermore, it reported that 17% of women of reproductive age (WRA) (15-49 years) are thin/underweight (BMI<18.5) and 41% of WRA are anemic. These high levels of both child and maternal undernutrition highlight the need for continued investments and improvements in effective maternal and child nutrition programs in Nepal. Given the large socio-economic, caste/ethnicity, and agro-ecological variability in the country, it is no surprise that nutrition and health indicators also vary widely by these factors (NDHS, 2016).

The Government of Nepal (GoN), with support from external development partners (EDPs), is now implementing the second phase (2018-2022) of its multi-sector nutrition plan (MSNP) throughout the country. Health, education, federal affairs and local development, and the agriculture and development sectors are managing their own programs with multi-sector coordination. All nutrition-specific and nutrition-sensitive activities are coordinated by the National Planning Commission (NPC) at the central level. The MSNP's aim is for Nepal to significantly reduce malnutrition in the next decade and ensure that it no longer impedes development.

EDPs invest heavily in supporting the GoN to address persistent health and nutrition burdens and achieve goals outlined in Nepal's MSNP. *Suaahara II* (SII) is one such USAID-funded program, with an overall objective to reduce undernutrition among women and children, particularly those in the 1000-day period between conception and a child's second birthday and those residing in disadvantaged communities.

1.2 Description of SII

SII is a USAID-funded multisectoral nutrition program, being implemented in 42 of Nepal's 77 districts in 6 out of the 7 provinces from 2016 to 2021. SII builds and follows on the first *Suaahara* project (i.e. Phase 1) implemented from 2011-15. Helen Keller International (HKI) serves as the prime and lead organization for SII and partners with six consortium organizations to implement the program (CARE, FHI360, Digital Broadcast Initiative Equal Access (DBI EA), Environment and Public Health Organization (ENPHO), Nepali Technical Assistance Group (NTAG), Vijaya

Development Resource Center (VDRC)), and a Community-Based Organization (CBO) in each district, who implement activities within communities of the 42 districts. SII covers a total of 389 municipalities (262 rural municipalities and 127 urban municipalities) and 3353 wards in Nepal.

The primary aims of SII are to reduce the prevalence of stunting, wasting and underweight among children under five years of age and to reduce the prevalence of anemia among WRA and children 6-59 months of age. The program uses a multi-sectoral approach across four key intermediate results (IRs) themes: (1) improved household nutrition, sanitation and health behaviors; (2) increased use of quality nutrition and health services by women and children; (3) improved access to diverse and nutrient rich foods by women and children; and (4) accelerated roll-out of the MSNP through strengthened local governance. SII activities span health including family planning (FP), nutrition, agriculture/homestead food production (HFP); water, sanitation and hygiene (WASH); and nutrition governance. Diverse social and behavior change communication (SBCC) approaches are used, primarily to generate demand for access to improved services. Gender equality and social inclusion (GESI), in part by targeting women and disadvantaged groups (DAGs); public private partnership (PPP) to increase access to services and commodities by encouraging private sector investments; and monitoring, evaluation, and research (MER) for learning are cross-cutting themes for all SII implementation.

1.3 Structure of the baseline report

Following this introduction/background section (Chapter 1), this report will outline SII's 2019 annual survey methods including survey design, sampling and data collection, management, and analysis (Chapter 2). The results sections describe the survey sample (Chapter 3) and present key findings by IR theme: IR 1 – Nutrition (Chapter 4); IR 1 – WASH (Chapter 5); IR 2 – Health and Family Planning (Chapter 6) and IR 3 – Agriculture/Homestead Food Production (Chapter 7). Results for cross-cutting themes will then be presented: SBCC (Chapter 8) and GESI (Chapter 9) and finally, an assessment of program implications for 2020 and beyond (Chapter 10).

2. Annual monitoring survey design

2.1 Survey objectives and description

The SII annual survey, a part of the SII monitoring, evaluation and research (MER) system, tracks key process and outcome indicators, at the individual, household and health system levels, that enable the project to identify implementation gaps and assess program performance in terms of intervention coverage and quality, with a focus on those indicators listed in the key indicator table (pages 2-3). The survey also aims to monitor progress over time (first and last years) in inputs, outcomes, and outputs at the health facility and FCHV level, given that SII uses these platforms for delivery of key interventions and that both are of crucial importance for maternal and child health and nutrition. The 2017 annual survey, the first in SII, had an additional objective of establishing baseline levels and targets for key indicators, including on the nutritional status of WRA and under five children, in a representative population of SII target beneficiaries. The objective of the 2018 and 2019 annual surveys have been to track the progress (or lack therefore) in key indicators.

The SII annual surveys use a repeat cross-sectional design involving multi-stage cluster sampling and returning to the same clusters each year. For the annual surveys, in 2017, 16 districts were randomly selected (Figure 1). Surveys are repeated each year in the same districts and clusters, but household sampling is based on a random selection of annually refreshed lists of eligible households in each cluster.



Figure 1 Annual Survey Districts

The SII annual surveys were approved by the Nepal Health Research Council (NHRC). Written informed consent was also obtained from each respondent included in the survey prior to beginning any interview, and verbal consent to continue the survey was obtained after the completion of each module in the questionnaire.

2.2 Survey design

2.2.1 Sample size and power calculations

Before the 2017 survey, sample size calculations were done in Stata13 SE, for each of the six-key anthropometric and hemoglobin outcomes: stunting, underweight, and wasting in children under five, anemia in children 6 to 59 months of age, and body mass index (BMI) and anemia in WRA. We used *Suaahara* I impact evaluation baseline data (2012) to establish the intra-cluster

correlation for each outcome and assumed a desired power of 0.80, in a two-arm cluster-designed study. Using these factors, along with the prevalence from NDHS 2016 and expected change over time, we calculated the sample sizes needed for each indicator (Table 2.1).

Table 2.1 Sample sizes needed for each indicator, by population type

Indicator	Population	Sample Size Needed
Stunting	Children <5 years	1728
Underweight	Children <5 years	980
Wasting	Children <5 years	980
Anemia	Children 6-59 months	3460
BMI	Women aged 15-49 years	2304
Anemia	Women aged 15-49 years	3072

Given the need for 3460 children between 6-59 months of age for measuring changes in anemia over time, and to allow for refusals, we decided to include at least 3600 households in the survey, estimating that some households would have a child 0-6 months of age but that some would also have two children.

2.2.2 Sampling methodology

The annual surveys (2017, 2018, and 2019) were designed using the new administrative units (e.g. urban and rural municipalities and wards), based on government request given that the transition happened during survey firm training for the first SII annual survey. We employed a multi-stage cluster sampling design (Figure 2.2) with the first-stage sampling unit as districts (n=16), the second-stage sampling unit as municipalities (1 urban and 1 rural per district, excluding the district headquarter municipality; n=32), the third-stage sampling unit as wards (3 per municipality, n=96), the fourth-stage sampling unit as "old" wards (2 per ward, n=192) as the new wards are too big to be a survey cluster, and the final-stage sampling unit as households with at least one child under five years (19 per cluster, n=3648). The first four stages were conducted using PPS techniques, based on total population sizes according to 2011 national census data. For the fifth stage, households with a child under five years and his/her mother in residence were selected randomly from a full listing done at the start of the survey field work.

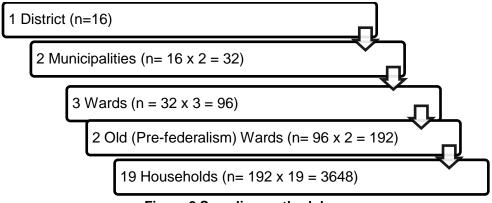


Figure 2 Sampling methodology

Household population data from the 2011 census was used to inform the PPS methods to select the sample districts, municipalities and clusters. Using the list of the districts and number of households per district, sampling interval (k) was obtained by dividing the total number of households in the district in each study arm (mature (22) and non-mature (18) SII districts) by the desired sample size of 8 per study arm. A random number (x) between one and the sampling interval (k) was chosen as the starting point, and the sampling interval (k) was added cumulatively and repeatedly (x+k)th, (x+2k)th, and so on, until the 8 districts were selected in each arm. The same process of listing, sampling interval and selection of the desired number of municipalities (1 urban and 1 rural per district), wards (3 per municipality) and clusters (2 per ward) was followed.

In the selected wards, a listing of households was conducted which contained information about the name of the household head, whether the household has a child under five years or not, and if yes, the name of the mother of the child. From the list of all households, a list of households having a child under five years of age and the child's mother residing together was prepared and 19 households were randomly selected for inclusion in the survey, by drawing names from a hat. If there was an insufficient number of eligible households in a survey cluster, the same procedures were followed in the adjoining (defined as shortest distance from working cluster) cluster (old "prefederalism" ward) to select the remaining required households. In 2017, this happened in 17 clusters and due to this, the same adjoining wards were selected in 2018 and 2019. Sampled households were also replaced if they were found to have a mother with any kind of disability (unable to speak/dumb), no children within the study age range, or if the mother/child were not available during data collection.

From each selected household, one child under five years was selected as the child of focus for the survey (reference child for questions re: young child). If more than 2 children under 5 years resided in the same household, the youngest child was selected. The mother of the selected child was the respondent for the mothers' questionnaire. A male (or female, if male unavailable) primary decision maker in the household was selected for the household questionnaire, with first preference given for the father of the child. In some cases (e.g. mother lived alone with child; of available adults, mother was the lead household decision maker), the mother also answered a shortened version of the household questionnaire which did not repeat modules she would have already answered in the mothers' questionnaire (i.e. empowerment or exposure to key messages).

Additionally, one FCHV was selected from each cluster. If there are more than one FCHV in one cluster only one FCHV was selected randomly. In case of health facility, one health facility was chosen from every two clusters randomly. From the selected health facility, the most senior ranking staff member was chosen for interview. The chain of command was followed if the senior staff member was unavailable.

2.3 Survey instruments

2.3.1 Household questionnaires

In 2019, the household level survey had two different respondents: 1) mother of the child under five years; and 2) household decision-maker (male, when possible). The modules of questions differed for each respondent (Table 2.3). Global Positioning System (GPS) coordinates including

altitude, latitude, and longitude of all sampled households were measured using Garmin eTrex 30x devices.

Table 2.2 Household questionnaire modules, 2019

Table 2.2 Household question	rable 2.2 flousehold questionnaire modules, 2013					
Women	Men/ Household Heads					
Child health and nutrition practices	Demographic information					
a. Child health and childcare	a. Household roster					
b. Child dietary recall	 b. Background information of respondents 					
c. Infant and Young Child Feeding (IYCF) practices*	2. Household economics					
Maternal health and nutrition	a. Socioeconomic status					
a. General health seeking practices	3. Food security and diets					
b. Antenatal Care (ANC)*	 a. Household food security 					
c. Delivery and postnatal care (PNC)*	b. Dietary recall					
Maternal dietary recall	Land use and agricultural practices					
4. Empowerment	5. Empowerment					
 a. Role in household decision-making 	 a. Role in household decision-making 					
b. Group membership	b. Group membership					
Agriculture/homestead food production	6. Integrated nutrition knowledge and exposure					
6. Water, sanitation, and hygiene	7. Self-efficacy					
7. Integrated nutrition knowledge and exposure	8. Suaahara exposure					
8. Self-efficacy	9. Observations					
9. Suaahara exposure						
 Adolescent mother-specific questions 						

^{*} Note: these modules were limited to the sample households with a child less than 2 years of age to avoid measuring behaviors that could have happened up to 5 years ago.

2.4 Training and fieldwork logistics

2.4.1 Training of personnel and testing of survey tools

New ERA recruited a team of 89 field staff, including 4 quality controllers, 17 supervisors, and 52 enumerators, to make up 17 teams of 1 male supervisor and 3 female enumerators each. Selecting from their pool of field researchers, criteria for the field staff included: prior work experience in similar surveys (*Suaahara* annual survey 2017/2018 or similar), work experience in rural communities, at least a bachelors' degree, fluency in a local language needed for the survey and rapport building skills, while also keeping gender and caste/ethnicity diversity in mind. The recruited field staff included an additional 10% for each position, who were invited to the training, so that there would be backup persons if needed. Each field staff was evaluated during the training and further screened to ensure quality before confirmation of selection as field staff for data collection. Further information regarding hired field staff is in annex A.

New ERA led a training of trainers (ToT) for the quality controllers and supervisors from June 2-5, 2019. This training included a brief overview of the revised tools of 2019's annual survey to supervisors and quality controllers. The ToT helped in checking inconsistencies and anomalies in the paper-based questionnaires and in the Open Data Kit (ODK) programming. Supervisors beta tested the ODK programming for all survey tools in Panauti, Kavrepalanchowk from June 6-7, 2019. Feedback from the field-testing was presented on June 9, 2019 and informed revisions to the surveys in preparation for the main training.

New ERA and SII staff trained the entire field survey team for 12 days from June 12-25, 2019 to familiarize the trainees with the survey objectives and tools. Role play and mock interviews with peers were used and the questionnaires were further checked for content, consistency, flow, validity and reliability. The training included detailed explanations of the survey objectives and design including multi-stage sampling and selection of households and appropriate informed

consent and interviewing methods. Every question of every module was discussed and skip patterns, filtering, and probing techniques were explained. They were also trained in how to collect data using Android phones. Roles and responsibilities of the field team members were clearly outlined and quality control elements by interviewers, supervisors and the quality controllers were highlighted. The training also went over important ethical concepts including referral for severely malnourished or ill persons found; confidentiality and privacy during the survey; and the importance of informed consent prior to the start of the interview.

All the questionnaires were tested multiple times in training and pre-testing before finalization. The 17 teams were sent to 4 different sites of Lamiung – Simpani (Khudi), Sundarbazar (Tarkughar), Parewadanda and Gausahar – from June 26-29 for a pilot test. This pilot test was practice for the data collectors to use the survey equipment in real field settings and the team tested all the tools including the questionnaires and GPS measurements. In two days of pretesting, each male supervisor was assigned to do four household head interviews, and each female supervisor/interviewer was assigned to interview one household head and two mothers. A review of the pre-test took place on July 1, 2019, with an additional two days of training on July 2-3 to address any issues encountered during the pre-test. After pre-testing, the survey tools were again revised and SII and New ERA re-checked and finalized the revised questionnaire.

2.4.2 Administration of survey guestionnaires

After completion of trainings, ethical approvals, and other logistics, data collection occurred during the rainy season (July 5-September 14, 2019), following 2017 and 2018 SII annual survey timing. During the training period, one supervisor and one enumerator left from the study team due to personal reasons. Thus, on July 5, 2019, 16 field teams of four members each (one male supervisor and three female enumerators) departed for data collection. Enumerators were responsible for household-level data collection and GPS data. Only female enumerators were allowed to interview mothers, due to the sensitive nature of some of the topics.

Each field team was provided with a field schedule before departure to assigned clusters. As the teams reached each district, they contacted the SII district office. After consultation with district level authorities (District health office) and the *Suaahara* district team, the field teams then moved to the assigned clusters, where again they met official municipality authorities prior to the start of data collection. New ERA core team and *Suaahara II* MER team members conducted periodic field monitoring and supervision, giving feedback on the interviews and verifying the consistency and accuracy of the completed questionnaires. The first round from New Era was from July 8th to 11th, 2019 in Nawalparasi and Dhading and the second round was conducted in Rupandehi, Bardiya, Kailali and Arghakanchi from July 13-23, 2019. Likewise, the *Suaahara II* MER team's first round of field monitoring was from July 17th to 21st, 2019 in Gorkha, Dhading, Dang and Salyan and the second round was conducted in Kailali, Dadeldhura and Bajhang from August 21-30. Fieldwork was completed on September 14, 2019.

2.4.3 Fieldwork challenges

Because data collection occurs annually during the rainy season, execution of the *Suaahara II* annual survey is always challenging. Geographical terrain and heavy rainfall, floods and landslides, illness and agricultural workloads due to paddy plantation timing all pose challenges. This year, 65 actual days were needed for fieldwork because of weather and the related need to take longer routes to avoid dangerous conditions, causing delays in reaching some clusters. Furthermore, due to difficult geographical terrain and no mobile network availability in Belapur and Sirsha clusters in Dadeldhura, it took the team two days (rather than the one planned) to complete the listing. One team member couldn't contribute to data collection for a few days in

Rupandehi due to illness. In addition to delays in data collection, field teams work outside of their schedule to interview respondents at alternate times (either in the early morning or late evening).

2.5 Data management

2.5.1 Data entry and cleaning

For the household questionnaires, data was collected on Android phones by the field staff, using Ona, an offline data collection application. Once the data was collected and reviewed by the supervisor, the enumerator synced the data to the Ona server. New ERA and SII MER staff in Kathmandu had access to the uploaded data. New ERA staff were responsible for downloading the data from the Ona server weekly, checking the quality and consistency of the data, and providing feedback to enumerators, as needed. All corrections were recorded by the New ERA staff who consequently updated the database and informed the SII MER team.

Immediately after mobilizing the field teams, a software package for data entry was developed by the data supervisor in New ERA's central office, for paper-based survey modules (e.g. 24-hour dietary recalls). Quality check mechanisms, such as range checks and skip instructions, were developed to help detect errors in data entry. Before data entry, each questionnaire was thoroughly checked by the coders and open-ended questions were coded. There was some overlap between field work and data management. Paper forms were maintained from each completed cluster to Kathmandu in files, labeled by location and cluster number.

New ERA completed the first round of data cleaning and verification and translated the data (e.g. other (specify) responses), into English, where necessary before sharing the cleaned raw data files in Stata to the SII MER team on September 26th, 2019 for further data cleaning. The SII MER team followed standard data cleaning procedures such as range checks and skip patterns, before starting the process of variable generation and tabulations. All data cleaning and variable generation was done using StataSE 14 from the first week of October to December 2019, including sharing early findings with thematic program teams in early November 2019, who provided feedback regarding additional checks that were needed.

2.5.2 Statistical Analysis

The SII MER team, supported by an intern from Johns Hopkins University, conducted the analyses using StataSE 14. The team generated results on means and proportions for the entire survey sample (or sub-sample, where appropriate, for example by age or geographic area) to examine descriptive trends. Some indicators were derived from NDHS data – for example, the equity quintiles (lowest, 2nd lowest, middle, 2nd highest, highest) were derived from NDHS 2016 data and followed guidance from www.equitytool.org.

To know if differences between 2017, 2018, and 2019 were meaningful, the SII MER team conducted tests of statistical significance for key indicators. Two statistical significance comparisons were conducted – between 2017 and 2019 and between 2018 and 2019 – adding to the comparisons conducted last year between 2017 and 2018. For these tests of statistical significance, binary logistic regression was used for dichotomous variables, linear regression was used for continuous variables, and ANOVA for variables with multiple categories. Standard errors were adjusted for sample clustering in all binary logistic or linear regression tests; other factors which may influence the differences found (e.g. socio-economic status, age, education) were not adjusted for in this descriptive analysis. In the tables in this report, all variables for which tests of significance were done are in italics and the P values are reported. Each test of statistical significance provided a p-value – our team interpreted p-values greater than or equal to 0.05 to

present no significant change. This means that the change between years, whether an increase or a decrease, is not significant and should instead be interpreted as "no change" since it is likely due to chance. Accordingly, p-values less than 0.05 indicated a significant change between years.

Statistical testing was only done on single indicator changes over time and not on disaggregated analyses. For example, the p-value presented for equity quintiles only presents change over time in each quintile. It does not compare the disaggregated categories against each other (i.e. highest quintile vs. lowest quintile).

It is important to note that these surveys were not powered to conduct sub-population analyses and thus, the smaller the sample size, the more challenging it is to confirm statistical significance or not of findings, regardless of whether the statistical testing was done. This is also a monitoring survey and thus, there is not a counter-factual (e.g. comparison) and attribution of changes to *Suaahara II* may be plausible but cannot be assumed.

3. Results: Background

The annual survey included 3642 households in 2017, 3648 households in 2018, and 3648 households in 2019, which represents response rates of 99.8%, 100%, and 100% respectively. This section presents results on the demographic characteristics of the sampled households (Table 3.1) followed by the sample household heads (Table 3.2), mothers (Table 3.3), and children (Table 3.4).

Equity quintiles, using the 2016 DHS data as a reference point, were calculated to understand the socio-economic status of the study population relative to Nepal's overall population. To calculate the equity quintile, a household's ownership of assets and home characteristics (e.g. roof/wall/floor materials) are used (for further details please see www.equitytool.org). The distribution of households across equity quintiles indicated that the sample mostly represented households belonging to the middle quintile or lower. Fewer than one-third of houses had a roof, floor, and walls made of improved materials. More than 6 in 10 households used firewood as a main source of energy for cooking across the three surveys. However, the prevalence of firewood used for energy decreased by 8% from 2017 to 2019 and the percentage of households from lower equity quintiles decreased from 22% in 2017 to 16% in 2019 (P:<0.001), both indicating improvements in socio-economic well-being in the survey areas (Table 3.1).

Most household heads were *Brahmin/Chhetri* in 2017, 2018, and 2019. The prevalence of household heads without any formal education declined from 34% in 2017 to 24% in 2019 (P:<0.001). Household head demographic data were further disaggregated into household heads that were mothers, fathers, and grandparents to highlight how age and gender of household head may influence household characteristics (Tables 3.2).

The demographic characteristics of mothers and children showed little variation among the three survey rounds. On average, the mothers were 26 years (Table 3.3) and their youngest child was 25 months (Table 3.4). Agriculture was reported to be the primary occupation for nearly two-thirds of mothers. Almost 1 in 5 reported living alone, more than 25% with only her husband and child, and slightly more than half living with extended family. The percentage of mothers who had never attended school declined from 21% in 2017 to 15% in 2019, and the percentage of mothers who had completed secondary school (grade 10) increased from 24% in 2017 to 29% in 2019 (P:0.016) (Table 3.3).

Table 3.1 Household socio-economic and demographic characteristics

			<u>J 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</u>			
	2017	2018	2019	- I		.
	All HH Heads N=3642 Mean (SD)/%	N=3648	N=3648	2017/ 2018	P-value 2017/ 2019	2018/ 2019
Equity quintile ¹				<0.001	<0.001	<0.001
Poorest	21.7%	17.1%	16.2%			
2nd Poorest	28.6%	24.8%	22.6%			
Middle	23.2%	24.9%	22.0%			
2nd Wealthiest	20.3%	24.9%	29.5%			
Wealthiest	6.2%	8.3%	9.8%			
Mean Equity Quintile Score	2.6 (1.2)	2.8 (1.2)	2.9 (1.2)	<0.001	<0.001	< 0.001

¹ Equity quintiles were updated since the Annual Survey Report 1. Previously they were based on the NDHS, 2011 but now based on NDHS, 2016; all in line with guidance provided by www.equitytool.org

19

	2017	2018	2019	Б.,	Б.,	D
	All HH Heads	All HH Heads	All HH Heads	P-value		
	N=3642	N=3648	N=3648	2017/	2017/	2018/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018	2019	2019
Mother headed households (N=1445, 1504, 1518)	2.5 (1.2)	2.7 (1.2)	2.8 (1.3)	<0.001	<0.001	0.120
Father headed households (N=937, 1311, 1328)	2.5 (1.2)	2.9 (1.2)	3.0 (1.2)	<0.001	<0.001	0.002
Grandparents headed households (N=900, 763, 746)	2.8 (1.1)	2.9 (1.1)	3.1 (1.2)	0.001	<0.001	0.031
Home characteristics: cement as n	nain material					
Floor	18.7%	26.0%	28.5%			
Exterior/outer wall	16.0%	21.2%	25.0%			
Roof	12.6%	13.0%	14.8%			
Main source of energy for lighting						
Electricity	70.8%	73.0%	77.7%			
Solar panel	23.4%	22.6%	19.6%			
Other (e.g. torch, kerosene,						
paraffin, gas, oil lamp, candles, open fire	5.8%	4.1%	2.5%			
Main source of energy for cooking						
Electricity	0.1%	0.0%	0.0%			
Firewood	76.5%	71.9%	67.9%			
Liquefied propane gas	17.1%	22.8%	27.4%			
Biogas	4.1%	3.9%	3.4%			
Animal dung	2.0%	1.2%	1.2%			

Table 3.2 Household heads' demographic characteristics

Table 5.2 House	acmograpm	c characterist	103			
	2017	2018	2019	D -1	D -1	D -1
	All HH heads	All HH heads	All HH heads			P-value
	N=3642	N=3648	N=3648	2017/	2017/	2018/
		Mean (SD)/%		2018	2019	2019
Gender: male	47.6%	49.2%	48.4%	0.206	0.521	0.504
Age	39.3 (15.1)	34.4 (13.3)	34.0 (13)	< 0.001	< 0.001	0.185
Age: Male respondents (N=1734, 1794, 1767)	43.8 (15.1)	37.7 (14.3)	36.8 (13.6)			
Age: Female respondents	35.1 (13.9)	31.3 (11.5)	31.4 (11.8)			
(N=1908, 1854, 1881)						
Mothers (N=1445, 1504, 1518)	29.5 (9.6)	26.7 (5.3)	26.6 (5.3)	0.049	0.858	0.075
Fathers (N=937, 1311, 1328)	32.7 (8)	30.7 (7.5)	30.5 (7.2)	< 0.001	< 0.001	0.314
Grandparents (N=900, 763, 746)	55.9 (9.3)	<i>55.3 (9.5)</i>	54.9 (9)	0.110	0.006	0.395
Agriculture as main occupation	64.7%	64.4%	62.0%	0.837	0.046	0.031
Mothers (N=1445, 1504, 1518)	65.6%	69.7%	66.0%	< 0.001	< 0.001	0.689
Fathers (N=937, 1311, 1328)	50.4%	47.8%	48.5%	0.245	0.394	0.722
Grandparents (N=900, 763, 746)	75.1%	81.1%	76.9%	0.003	0.316	0.039
Religion: Hinduism	89.8%	90.0%	90.7%			
Relation to the survey reference ch	nild					
Mother	39.7%	41.2%	41.6%			
Grandmother	12.4%	8.8%	9.3%			
Father	25.7%	35.9%	36.4%			
Grandfather	20.5%	12.1%	11.2%			
Other	1.7%	2.0%	1.5%			
Caste		·		< 0.001	< 0.001	0.323

	2017	2018	2019	ъ .	Б	Б.
	N=3642	All HH heads N=3648 Mean (SD)/%	N=3648	2017/ 2018	P-value 2017/ 2019	2018/ 2019
Socially evaluded (Dolit Muslim	WCarr (OD)/ 70	WCarr (OD)/ 70	WCarr (OD)/ 70			
Socially excluded (Dalit, Muslim, disadvantaged)	49.6%	21.9%	54.1%			
Brahmin/Chettri	39.3%	38.8%	37.1%			
Others (Newar, Gurung/Thakali, Non-dalit <i>Terai</i> caste)	11.1%	8.5%	8.8%			
Education levels						
Never attended school/ grade 1 not complete	34.1%	25.8%	23.7%	<0.001	<0.001	0.041
Some primary school (grades 1-4)	17.3%	14.9%	13.2%			
Completed primary school (grades 5)	8.7%	8.7%	8.4%			
Some secondary school (grades 6-9)	24.4%	29.5%	30.7%			
Completed secondary school (grade 10)	9.3%	11.4%	13.1%			
Completed class 12	4.7%	7.5%	7.9%			
Higher education	1.6%	2.2%	3.0%			
Completed secondary school (grade 10) or more	15.5%	21.2%	24.0%	<0.001	<0.001	0.002
Men (N=1734, 1794, 1767)	17.5%	25.1%	29.2%			
Women (N=1909, 1854, 1881)	13.8%	17.4%	19.1%			
Mothers (N=1445, 1504, 1518)	17.7%	21.1%	23.3%	0.005	< 0.001	0.109
Fathers (N=937, 1311, 1328)	25.5%	31.3%	35.3%	0.005	<0.001	0.031
Grandparents (N=900, 763, 746)	5.1%	4.2%	4.7%			

Table 3.3 Mothers' demographic characteristics

	2017	2018	2019	-D-value	P-value	D-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3642	N=3648	N=3648	2017	2017	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2013	2013
Age in completed years (range: 15-49y)	26.2 (5.5)	25.9 (5.4)	26.0 (5.3)			
Currently married	99.4%	99.4%	99.5%			
Currently pregnant	5.0%	5.0%	5.2%			
Agriculture as main occupation	62.6%	62.7%	60.5%			
Education						
Never attended school/grade 1 not complete	20.6%	17.4%	14.9%	<0.001	<0.001	0.001
Some primary school (grades 1-4)	13.9%	12.9%	11.7%			
Completed primary school (grades 5)	7.7%	7.5%	7.2%			
Some secondary school (grades 6-9)	34.1%	35.9%	37.7%			
Completed secondary school (grade 10)	12.6%	13.4%	14.3%			
Completed grade 12	9.2%	10.9%	11.7%			

	2017 Mothers N=3642 Mean (SD)/%	2018 Mothers N=3648 Mean (SD)/%	2019 Mothers N=3648 Mean (SD)/%	2017/	P-value 2017/ 2019	P-value 2018/ 2019
Higher education Completed secondary school	1.9% 23.7%	2.3% 26.3%	2.5% 28.5%	0.002	<0.001	0.016
(grade 10) or more Household structure		40.40/				0.400
Mother lives alone Mother, husband and child only Mother in extended family	19.4% 30.8% 49.8%	19.1% 26.6% 54.3%	19.8% 26.1% 54.1%	0.814 0.005 <0.001	0.808 <0.001 <0.001	0.469 0.643 0.872

Table 3.4: Children's demographic characteristics

rable 3.4. Children's demographic characteristics									
	2017	2018	2019						
	Children	Children	Children						
	N=3642	N=3648	N=3648						
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%						
Gender of youngest child: male	55.6%	54.7%	57.0%						
Age in completed months (range: 0-59)	24.8 (16.0)	24.6 (16.2)	25.4 (16.3)						
Age of youngest child (completed mon	ths)		_						
0-23.9	50.8%	52.4%	50.1%						
24-59.9	49.2%	47.6%	49.9%						
Age of youngest child (completed mon	ths)		_						
0-5.9	12.5%	12.3%	11.8%						
6-11.9	14.6%	13.7%	13.2%						
12-17.9	11.1%	13.0%	12.2%						
18-23.9	12.5%	13.3%	12.9%						
24-29.9	10.5%	10.8%	10.8%						
30-35.9	11.5%	9.8%	10.8%						
36-41.9	8.8%	7.7%	8.5%						
42-47.9	7.9%	8.3%	7.4%						
48-53.9	6.0%	5.3%	6.4%						
54-59.9	4.5%	5.7%	6.0%						

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

4. Results: IR 1/Nutrition

Among indicators of breastfeeding knowledge, between 2017 and 2019, household heads' correct knowledge improved by 18 percentage points for colostrum should be given (P:<0.001) (Table 4.1). The percentage of mothers who gave the correct definition of exclusive breastfeeding increased from 16% in 2017 to 24% in 2019 (P:<0.001). Similarly, the percentage of mothers who knew that the appropriate time to stop exclusive breastfeeding was 6 months increased from 80% in 2017 to 87% in 2019 (P:<0.001) (Table 4.2). While ever breastfed and colostrum feeding were nearly universal in all three survey rounds, early initiation increased from 68% in 2017 to 75% in 2019 (P:<0.001) (Table 4.3).

Complementary feeding knowledge, specifically appropriate timing of introduction (6-8.9 months) of all food items increased from 23% in 2017 to 36% in 2019 (P:<0.001) among household heads (Table 4.4) and from 43% in 2017 to 57% in 2019 (P:<0.001) among mothers (Table 4.5). Regarding complementary feeding practices, the average month for introduction of all food items to children declined from 6.5 in 2017 to 6.3 in 2019 (P:<0.001); the percentage of mothers reporting to have introduced all foods to children when 6-8.9 months increased from 33% in 2017 to 45% in 2019 (P:<0.001). Furthermore, the prevalence of, breastfed and non-breastfed children 6-23 months of age, who received solid, semi-solid, or soft foods (also including milk feeds for non-breastfed children) the minimum number of times or more increased from 81% in 2017 to 86% in 2019 (P:0.004). Consumption of iron-rich foods among these children also increased from 84% in 2017 to 90% in 2019 (P:<0.001) (Table 4.6).

Knowledge and practices on feeding a sick child were poor all three years. There was no progress between 2017 and 2019 on household heads and mothers' knowledge to give more food to a sick child. Household heads' knowledge that a sick child should be taken to a health facility or FCHV, however, increased from 57% in 2017 to 76% in 2019 (P:<0.001) (Table 4.7); maternal knowledge increased similarly from 54% in 2017 to 71% in 2019 (P:<0.001) (Table 4.8). There was no significant change in sick child feeding (Table 4.9).

Open-ended 24-hour recalls were used to collect foods consumed in the previous 24-hours, which were combined into food groups during analysis to assess dietary diversity. Dietary diversity scores for children were calculated out of 7 food groups: grains, pulses, dairy, flesh foods, eggs, vitamin-A rich fruits/vegetables, other fruits and other vegetables. Children 6-23.9 months meeting the minimum dietary diversity requirement (4 or more food groups) increased from 47% in 2017 to 58% in 2019 (P:0.001) with average individual dietary diversity score increasing from 3.4 in 2017 to 3.7 in 2019 (P:<0.001). Similarly, the percentage of those with a minimum acceptable diet increased from 38% in 2017 to 47% in 2019 (P:<0.001) (Table 4.10). The prevalence of children 24-59.9 months meeting the minimum dietary diversity requirement (4 or more food groups) increased from 60% in 2017 to 65% in 2019 (P:0.005) (Table 4.11)

Between 2017 and 2019, knowledge that pregnant women should consume more food than usual increased from 72% to 81% (P:<0.001) among household heads (Table 4.12) and from 86% to 91% (P:<0.001) among mothers (Table 4.13). In practice, the percentage of pregnant women that consumed more food than usual increased from 48% to 61% (P:<0.001) in 2019 (Table 4.14).

Dietary diversity score for women was calculated out of 10 food groups: grains, pulses, nuts and seeds, dairy, flesh foods, eggs, dark green leafy vegetables, vitamin-A rich fruits/vegetables, other fruits, and other vegetables. The individual dietary diversity score among mothers increased from 4.1 to 4.4 (P:<0.001), while the percentage of mothers meeting the minimum dietary diversity (5

out of 10 groups) increased from 36% to 45% (P:<0.001) between 2017 and 2019 (Table 4.15). Dietary scores were calculated for household heads in the same way. Male household heads saw a similar increase in individual dietary diversity score, from 4.1 in 2017 to 4.3 in 2019 (P:<0.001) in 2019, with an increase in meeting minimum dietary diversity from 37% to 42% (P:0.005) (Table 4.16).

There prevalence of mothers reporting to have input in all or nearly all decisions about her own diet and child feeding increased from 43% in 2017 to 79% in 2019 (P:0.005) and 92% in 2017 to 95% in 2019 (P:<0.001), respectively (Table 4.19). On the other hand, the prevalence of male household heads with this level of decision-making for child feeding decreased by 8% (P:<0.001) (Table 4.18).

Table 4.1 Breastfeeding knowledge among household heads

	2017	2018	2019	Divolue	Divolue	P-value
		All HH heads	All HH neads	2017/	P-value 2017/	2018/
	N=1898	N=2142	N=2130	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%			
Breastfeeding should be initiated within 1 hour	62.6%	65.0%	65.5%	0.160	0.128	0.826
Colostrum should be given to baby	76.1%	81.4%	83.5%	0.001	< 0.001	0.140
Exclusive breastfeeding characterist	tics					
Breast milk and nothing else (not even water)	11.4%	14.5%	13.8%	0.030	0.126	0.662
Don't know	62.4%	56.4%	49.2%	0.010	< 0.001	0.011
Appropriate timing to stop practices						
Breastfeeding (in months)	35.3 (12.7)	37.0 (13.6)	36.7 (12.7)	0.002	0.004	0.580
Exclusive breastfeeding: 6 months	62.9%	65.8%	68.9%	0.369	0.060	0.328

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.2 Breastfeeding knowledge among mothers

Table 4.2 Dreastreeding knowledge among mothers						
	2017	2018	2019	D value	P-value	D volue
	Mothers N=3640 Mean (SD)/%	Mothers N=3647 Mean (SD)/%	Mothers N=3647 Mean (SD)/%	2017/	2017/ 2019	2018/ 2019
Breastfeeding should be initiated within 1 hour	82.4%	83.9%	87.2%	0.135	<0.001	0.002
Colostrum should be given to baby	91.0%	93.2%	94.1%	0.500	<0.001	0.217
Exclusive breastfeeding characteristics						
Breast milk and nothing else (not even water)	16.4%	18.8%	23.5%	0.080	<0.001	0.013
Don't know	55.8%	50.3%	36.2%	0.010	< 0.001	<0.001
Appropriate timing to stop pract	tices					
Breastfeeding (in months)	38.6 (14.9)	38.1 (15.8)	<i>37.7 (14.1)</i>	0.171	0.051	0.440
Exclusive breastfeeding: 6 months	80.1%	86.0%	87.1%	<0.001	<0.001	0.269

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.3 Breastfeeding practices among children <2 years

2017	2018	2019	D volue	D volue	D volue
Mothers	Mothers	Mothers			2018/
N=1848	N=1910	N=1825			
%	%	%	2018	2019	2019
99.7%	99.6%	99.7%			
93.1%	95.9%	96.3%	0.001	<0.001	0.534
67.5%	69.2%	74.8%	0.030	<0.001	0.002
62.9%	65.8%	68.9%	0.860	<0.001	<0.001
98.5%	99.6%	98.2%			
93.8%	96.9%	95.4%			
	Mothers N=1848 % 99.7% 93.1% 67.5% 62.9% 98.5%	Mothers N=1848 N=1910 % Mothers N=1910 % 99.7% 99.6% 93.1% 95.9% 67.5% 69.2% 62.9% 65.8% 98.5% 99.6%	Mothers N=1848 N=1910 % Mothers N=1825 % Mothers N=1825 % 99.7% 99.6% 99.7% 93.1% 95.9% 96.3% 67.5% 69.2% 74.8% 62.9% 65.8% 68.9% 98.5% 99.6% 98.2% 93.8% 96.9% 95.4%	Mothers N=1848 N=1910 % Mothers N=1910 % Mothers N=1825 % P-value 2017/2018 99.7% 99.6% 99.7% 99.6% 99.7% 93.1% 95.9% 96.3% 0.001 0.001 67.5% 69.2% 74.8% 0.030 0.860 98.5% 99.6% 98.2% 98.2% 93.8% 96.9% 95.4% 95.4%	Mothers N=1848 N=1910 % Mothers N=1825 % Mothers 2017/2018 P-value 2017/2018 99.7% 99.6% 99.7% 93.1% 95.9% 96.3% 0.001 <0.001

Table 4.4 Complementary feeding knowledge among household heads

Table 414 Complemen	tary roouring is	no moago am	iong noacone	ia iioaa		
	2017	2018	2019	-D voluo	D value	P-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1898	N=2142	N=2142	2017	2017	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2013	2013
Appropriate age to introduce each li	iquid/food (in	months)				
Water/clear liquids	5.8 (2.2)	5.7 (1.7)	5.5 (1.5)			
Milk/milk products (excluding breast milk)	6.8 (3.9)	6.4 (3.0)	6.3 (2.8)			
Semi-solid foods	6.8 (2.9)	6.5 (1.9)	6.3 (1.6)			
Solid foods	8.7 (4.6)	7.9 (3.6)	7.6 (3.0)			
Eggs	9.7 (5.2)	8.7 (4.0)	8.3 (3.6)			
Animal meat/fish	10.9 (5.8)	9.7 (4.8)	9.4 (4.9)			
All food items	8.1 (3.0)	7.5 (2.3)	7.3 (2.0)	< 0.001	< 0.001	0.001
Appropriate age to give each liquid/	food: 6-8.9 m	onths				
Water/clear liquids	73.7%	77.7%	74.9%	0.020	0.481	0.061
Milk/milk products (excluding breast milk)	71.1%	76.6%	73.9%	<0.001	0.080	0.055
Semi-solid foods	80.4%	86.7%	84.8%	< 0.001	0.001	0.107
Solid foods	60.3%	70.1%	72.4%	< 0.001	< 0.001	0.126
Eggs	48.4%	59.2%	65.6%	< 0.001	< 0.001	< 0.001
Animal meat/fish	38.2%	48.3%	52.7%	< 0.001	< 0.001	0.006
All food items	23.4%	34.0%	36.4%	<0.001	<0.001	0.027

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.5 Complementary feeding knowledge among mothers

	,	amg mous	ge annenig me			
	2017	2018	2019	Divolue	Divolue	Divolue
	Mothers	Mothers	Mothers	2017/	2017/	P-value 2018/
	N=3640	N=3647	N=3647	2017/	2017/	2016/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Appropriate age to introduce each	liquid/food (i	n months)				
Water/clear liquids	5.8 (1.7)	5.8 (1.0)	5.8 (1.3)			
Milk/milk products (excluding breast milk)	6.3 (2.4)	6.1 (1.8)	6.2 (2.1)			
Semi-solid foods	6.3 (2.0)	6.1 (0.9)	6.1 (0.9)			
Solid foods	7.4 (2.8)	7.0 (2.3)	7.0 (2.6)			
Eggs	8.1 (3.4)	7.4 (2.5)	7.2 (2.7)			
Animal meat/fish	8.7 (4.1)	8.1 (3.3)	7.8 (3.2)			
All food items	7.1 (1.8)	6.8 (1.3)	6.7 (1.3)	< 0.001	<0.001	0.137
Appropriate age to give each liquid	d/food: 6-8.9 r	nonths				
Water/clear liquids	83.4%	87.0%	87.7%	< 0.001	< 0.001	0.477
Milk/milk products (excluding breast milk)	85.0%	89.3%	89.1%	<0.001	<0.001	0.826
Semi-solid foods	90.6%	93.7%	93.9%	< 0.001	< 0.001	0.751
Solid foods	74.6%	81.8%	81.4%	< 0.001	<0.001	0.766
Eggs	66.0%	74.9%	81.0%	< 0.001	< 0.001	< 0.001
Animal meat/fish	58.8%	65.3%	70.5%	< 0.001	< 0.001	0.001
All food items	42.7%	52.0%	57.3%	<0.001	<0.001	0.002

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.6 Complementary feeding practices for children <2 years

	2017	2018	2019	-D volue	P-value	D volue
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=1848	N=1910	N=1825	2018	2017	2010/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2010	2010
Introduction of solid, semi-solid or soft						
food of infant at 6-8.9m of age	91.6%	88.1%	92.2%	0.260	0.848	0.220
(N=214, 210, 204)						
Prevalence of breastfed and non-						
breastfed children 6–23 months of age, who received solid, semi-solid, or						
soft foods (but also including milk	81.2%	87.8%	85.5%	<0.001	0.004	0.121
feeds for non-breastfed children) the	01.270	07.070	00.076	CO.00 1	0.004	0.121
minimum number of times or more (6-						
23.9m, N=1385, 1460, 1396)						
Consumption of iron-rich foods (6-	04.00/	00.60/	00.00/	0.004	.0.004	0.000
23.9m) (N=1385, 1460, 1396)	84.2%	88.6%	89.8%	0.001	<0.001	0.300
Age in months of introduction, amor	ng those who	have been in	troduced alre	eady		
Water/other liquids (N=1502,	4.9 (1.8)	5.1 (1.6)	5.1 (1.6)	0.030	0.018	0.553
1550, 1498)	1.0 (1.0)	0.7 (7.0)	0.7 (7.0)	0.000	0.070	0.000
Milk/milk products (other than	5.2 (2.8)	5.2 (2.6)	5.4 (2.4)	0.790	0.044	0.093
breast milk) (N=1358, 1454, 1386)	- (-/	- (-/	- ()			
Semi-solid foods (N=1357, 1443,	5.9 (1.5)	5.8 (1.3)	5.9 (1.2)	0.170	0.720	0.052
1375) Solid foods (N=1392, 1456, 1409)	6.7 (1.9)	6.5 (1.7)	6.5 (1.7)	0.005	0.006	0.841
Eggs (N=1102, 1266, 1286)	7.6 (2.6)	7.1 (2.3)	6.9 (2.1)	<0.001		0.010
Animal meats (N=1217, 1304,			• •			
1292)	7.9 (2.8)	7.3 (2.4)	7.2 (2.1)	<0.001	<0.001	0.109
,						

	2017 Mothers N=1848 Mean (SD)/%	2018 Mothers N=1910 Mean (SD)/%	2019 Mothers N=1825 Mean (SD)/%	2017/	P-value 2017/ 2019	P-value 2018/ 2019
All food items (N=929, 1128, 1148)	6.5 (1.4)	6.3 (1.3)	6.3 (1.2)	<0.001	<0.001	0.961
Appropriate age (months) of introdu	iction, among	g those introdu	uced already	(6-8.9 m)	onths)	
Water/other liquids (N=1502, 1550, 1498)	58.5%	63.8%	64.9%	0.003	0.002	0.566
Milk/milk products (other than breast milk) (N=1358, 1454, 1386)	56.9%	63.6%	65.1%	<0.001	<0.001	0.424
Semi-solid foods (N=1357, 1443, 1375)	78.4%	82.1%	82.6%	0.020	0.007	0.749
Solid foods (N=1392, 1456, 1409)	75.7%	78.6%	78.4%	0.060	0.069	0.850
Eggs (N=1102, 1266, 1286)	65.1%	75.1%	78.6%	< 0.001	< 0.001	0.050
Animal meats (N=1217, 1304, 1292)	61.5%	70.7%	72.5%	<0.001	<0.001	0.330
All food items (N=929, 1128, 1148)	33.1%	42.1%	44.5%	<0.001	<0.001	<0.001

Table 4.7 Child feeding during illness and recovery knowledge among household heads

	2017	2018	2019	- D valua	D value	P-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1896	N=2142	N=2142	2017/	2017/	2019
	%	%	%	2010	2019	2019
Knowledge of appropriate feeding p	ractices durir	ng illness*				
Giving more food (extra meal,						
more food, more liquids, increase	40.7%	40.1%	37.7%	0.772	0.141	0.287
breastfeeding)						
Go to health facility/FCHV	56.7%	65.3%	76.2%	<0.001	<0.001	<0.001
Knowledge of appropriate feeding p	ractices durii	ng diarrhea*				
Giving more food (extra meal,						
more food, more liquids, increase	NA	31.2%	34.0%	NA	NA	0.122
breastfeeding)						
ORS	NA	73.2%	77.8%	NA	NA	0.002
ORS & Zinc	NA	11.2%	12.7%	NA	NA	0.229
Go to health facility/FCHV	NA	56.4%	67.0%	NA	NA	<0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.8 Child feeding during illness and recovery knowledge among mothers

rable no child recalling adming mines and receivery later medige among memore									
	2017	2018	2019	_					
		Mothers N=3647		P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019			
	%	%	%						
Knowledge of appropriate feeding practices duri	ng illnes:	S*							
Giving more food (extra meal, more food, more liquids, increase breastfeeding)	46.6%	32.2%	43.8%	0.041	0.131	0.511			
Go to health facility/FCHV	54.2%	63.8%	71.1%	< 0.001	< 0.001	0.001			
Knowledge of appropriate feeding practices during diarrhea*									

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

	2017	2018	2019			
		Mothers N=3647	Mothers N=3647	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
	%	%	%			
Giving more food (extra meal, more food, more liquids, increase breastfeeding)	NA	38.4%	42.6%	NA	NA	0.042
ORS	NA	78.7%	81.8%	NA	NA	0.056
ORS & Zinc	NA	18.3%	17.7%	NA	NA	0.731
Go to health facility/FCHV	NA	50.0%	60.1%	NA	NA	0.981

Table 4.9 Practice of child feeding during illness, among children ill in the last 2 weeks

	2017	2018	2019	.D. volue	Divolue	Divolue
	Mothers	Mothers	Mothers	2017/	2017/	P-value 2018/
	N=1400	N=1213	N=1329	2017/	2017/	2019
	%	%	%	2010	2019	2019
Offered to drink including breastmilk						
Less than usual	10.2%	12.1%	14.0%			
About the same as usual	52.5%	55.5%	51.8%			
More than usual	32.4%	28.2%	31.1%	0.040	0.480	0.133
Nothing	4.9%	4.2%	3.2%			
Offered to eat, excluding breastmilk						<u>.</u>
Less than usual	16.7%	16.3%	17.9%			
About the same as usual	52.3%	51.0%	52.0%			
More than usual	21.6%	23.0%	20.3%	0.394	0.446	0.129
Nothing: stopped foods	0.9%	0.7%	0.4%			
Nothing: doesn't yet eat foods	8.4%	8.9%	9.4%			
Sick children 6-23 months of age fed more during illness (N=593, 541, 597)	38.5%	38.8%	35.9%	0.899	0.342	0.285

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.10 Dietary practices among children 6-23.9 months

	<u>, , </u>					
	2017	2018	2019	- D. volue	Divolue	Divolue
	Children	Children	Children	2017/	P-value 2017/	2018/
	N=1385	N=1460	N=1396			
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018	2019	2019
Individual dietary diversity score (7 food groups)	3.4 (1.2)	3.6 (1.2)	3.7. (1.2)	<0.001	<0.001	0.051
Minimum dietary diversity (4+ of food groups)	46.7%	53.5%	57.5%	0.001	0.001	0.053
Minimum acceptable diet	37.5%	<i>45.7%</i>	47.2%	< 0.001	< 0.001	0.456
Vegetarian diet (no animal sourced foods given)	4.7%	2.7%	2.3%			
Consumption of specific food group	ps					
Grains (cereals and tubers)	96.9%	97.4%	97.8%			
Pulses (legumes and nuts)	72.0%	75.4%	79.2%			
Dairy	50.7%	48.2%	48.6%			
Flesh foods	17.9%	24.0%	23.3%	< 0.001	0.001	0.632
Eggs	10.6%	17.7%	23.1%	< 0.001	< 0.001	0.001
Vitamin A rich fruits and vegetables	32.0%	34.5%	36.3%	0.190	0.028	0.311

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

	2017	2018	2019	Divolue	Divolue	Divolue
	Children	Children	Children	2017/	P-value 2017/	2018/
	N=1385	N=1460	N=1396	2017/	2017	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2013	2013
Other fruits and vegetables	57.7%	64.8%	64.1%	0.001	0.001	0.745
Consumption of snack foods						
Any snack food	49.0%	45.3%	48.4%			
Commercial savory snacks	26.2%	23.2%	25.7%			
Commercial sugary foods	25.8%	24.9%	26.7%			
Commercial fizzy or sweetened drinks	5.1%	6.5%	7.2%			
MNPs/sprinkles/LBNS consumed	5.4%	7.7%	9.8%	0.050	<0.001	0.124
Times solid or semi-solid consumed	3.2 (1.3)	3.7 (1.6)	3.4 (1.3)	0.490	0.326	0.078
Times jaulo consumed	0.5 (0.9)	0.5 (0.9)	0.5 (1.1)			
Jaulo commercially sourced (N=384,404)	16.2%	18.6%	15.8%	0.210	<0.001	<0.00 1

Table 4.11 Dietary practices among children aged 24-59.9 months

Table 4.11 Dietaly	raotioes aine	ing onlineren eg	JCG 27 00.0 II	10111113				
	2017	2018	2019	-D volue	D volue	D volue		
	Children	Children	Children		P-value			
	N=1779	N=1738	N=1819	2017/	2017/	2018/		
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018	2019	2019		
Individual dietary diversity score (7 food groups)	3.8 (1.0)	3.9 (1.0)	3.9 (1.0)	<0.001	<0.001	0.703		
Minimum dietary diversity (4+ of food groups)	60.5%	65.4%	65.8%	0.010	0.005	0.866		
Vegetarian diet (no animal sourced foods given)	1.0%	1.4%	0.8%			_		
Consumption of specific food groups								
Grains (cereals and tubers)	99.9%	99.9%	99.9%					
Pulses (legumes and nuts)	75.9%	74.1%	79.3%					
Dairy	41.6%	41.6%	41.1%					
Flesh foods	25.4%	29.6%	29.0%	0.010	0.033	0.711		
Eggs	8.7%	15.3%	15.9%	< 0.001	< 0.001	0.595		
Vitamin A rich fruits and vegetables	42.2%	46.4%	43.7%	0.060	0.461	0.149		
Other fruits and vegetables	82.1%	83.8%	83.3%	0.200	0.412	0.733		
Consumption of snack foods (un-pr	obed, 24-houi	dietary recal	l)					
Any snack food	53.2%	53.6%	58.4%					
Commercial savory snacks	23.6%	24.2%	26.1%					
Commercial sugary foods	33.7%	33.6%	36.9%					
Commercial fizzy or sweetened drinks	7.8%	9.2%	10.8%					

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.12 Maternal nutrition knowledge among household heads

			0			
	2017	2018	2019	D value	P-value	D value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1898	N=2142	N=2130	2017/	2017/	2019
	%	%	%	2010	2019	2019
Diet during pregnancy						
Less than usual	6.2%	3.7%	3.6%			
Same as usual	20.0%	16.3%	14.8%			
More than usual	72.2%	78.6%	80.6%	< 0.001	< 0.001	0.143

Table 4.13 Maternal nutrition knowledge among mothers

		-			
2017	2018	2019	P-	P-	P-value
Mothers	Mothers	Mothers	value	value	2018/
N=3640	N=3647	N=3647	2017/	2017/	
%	%	%	2018	2019	2019
3.5%	2.1%	2.0%			
10.6%	7.5%	6.7%			
85.9%	90.5%	91.2%	<0.001	<0.001	0.485
	2017 Mothers N=3640 % 3.5% 10.6%	2017 2018 Mothers Mothers N=3640 N=3647 % 3.5% 2.1% 10.6% 7.5%	2017 2018 2019 Mothers Mothers Mothers N=3640 N=3647 N=3647 % % 3.5% 2.1% 2.0% 10.6% 7.5% 6.7%	Mothers Mothers Mothers value N=3640 N=3647 N=3647 2017/2018 % % 2018 3.5% 2.1% 2.0% 10.6% 7.5% 6.7%	2017 2018 2019 P- P- Mothers Mothers Mothers value value value N=3640 N=3647 N=3647 2017/2017/2017/2017/2018 2019 3.5% 2.1% 2.0% 10.6% 7.5% 6.7%

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.14 Dietary practices during pregnancy and lactation among mothers of children <2 years

	31 3 3 3					
	2017	2018	2019	D volue	D volue	D volue
	Mothers	Mothers	Mothers		P-value	
	N=1848	N=1910	N=1825	2017/	2017/	2018/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018	2019	2019
Amount ate during pregnancy						
Less than usual	18.2%	13.0%	13.2%			
Same as usual	33.4%	28.6%	26.3%			
More than usual	48.4%	58.4%	60.6%	< 0.001	< 0.001	0.198
Fasting during pregnancy						
Fasted at least 1 day during	14.6%	13.9%	13.8%			
pregnancy						
Number of days fasted during						
pregnancy, among those who	3.7 (6.2)	3.6 (6.5)	3.3 (5.4)			
fasted (N=267, 266, 251)						

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.15 Dietary practices among mothers

	, ,	•	,			
	2017	2018	2019	-D volue	Divolue	Divolue
	Mothers	Mothers	Mothers	P-value 2017/	2017/	2018/
	N=3640	N=3648	N=3648	2017/	2017/	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Individual dietary diversity score (10 food groups)	4.1 (1.2)	4.3 (1.2)	4.4 (1.2)	<0.001	<0.001	0.015
Minimum dietary diversity (5 of 10 food groups)	35.6%	41.6%	45.3%	<0.001	<0.001	0.011
Vegetarian diet (no animal sourced foods)	1.7%	1.8%	1.6%			

Consumption of specific food groups

	2017	2018	2019	-D-valuo	D-value	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3640	N=3648	N=3648	2017/	2017	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Grains, white roots and tubers, and plantains	100.0%	100.0%	100.0%			
Pulses (beans, lentils)	76.0%	76.5%	81.0%			
Nuts and seeds	3.5%	1.5%	1.7%			
Dairy	28.9%	26.2%	25.9%			
Meat, poultry, and fish	28.4%	31.3%	33.7%	0.02	< 0.001	0.027
Eggs	5.7%	10.2%	12.2%	< 0.001	< 0.001	0.009
Dark green leafy vegetables	44.6%	41.4%	<i>45.5%</i>	0.02	0.549	0.002
Other Vitamin A rich fruits and vegetables	6.5%	12.9%	8.6%	<0.001	0.109	<0.001
Other vegetables	86.2%	89.2%	89.4%	0.001	0.001	0.892
Other fruit	32.3%	40.7%	<i>4</i> 2.0%	< 0.001	< 0.001	0.407
Consumption of snack foods						
Any snack food	16.4%	18.0%	17.8%			
Commercial savory snacks	6.9%	8.7%	8.7%			
Commercial sugary foods	7.6%	7.4%	6.7%			
Commercial fizzy or sweetened drinks	3.9%	3.6%	4.7%			

Table 4.16 Dietary practices among male household heads

	<i>,</i> ,					
	2017	2018	2019	_		
	Male HH	Male HH	Male HH	P-value	P-value	P-value
	heads	heads	heads	2017/	2017/	2018/
	N=1733	N=1792	N=1765	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%			
Individual dietary diversity score (10 food groups)	4.1 (1.1)	4.2 (1.1)	4.3 (1.2)	0.506	<0.001	<0.001
Minimum dietary diversity (5 of 10 food groups)	36.5%	36.1%	42.3%	0.824	0.005	0.001
Among fathers (N=936, 1309, 1326)						
Individual dietary diversity score	4.1 (1.2)	4.2 (1.2)	4.4 (1.2)			
Minimum dietary diversity	36.8%	37.2%	44.1%			
Among grandfathers (N=745, 441, 4	107)					
Individual dietary diversity score	4.1 (1.1)	4.0 (1.1)	4.2 (1.2)			
Minimum dietary diversity	36.2%	33.3%	36.9%			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.17 Dietary practices among female household heads, other than mothers

rable in relations among remain incared, enter main memore							
	2017	2018	2019	_			
	Female HH	Female HH	Female HH	P-value	P-value	P-value	
	heads	heads	heads	2017/	2017/	2018/	
	N=164	N=350	N=362	2018	2019	2019	
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%				
Individual dietary diversity score (10 food groups)	4.3 (1.2)	4.1 (1.1)	4.2 (1.1)	0.036	0.334	0.141	
Minimum dietary diversity (5 of 10 food groups)	45.1%	30.0%	35.6%	0.001	0.051	0.132	
A	220\						

Among grandmothers (N=103, 322, 338)

	2017	2018	2019			
	Female HH	Female HH	Female HH	P-value	P-value	P-value
	heads	heads	heads	2017/	2017/	2018/
	N=164	N=350	N=362	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%			
Individual dietary diversity score	4.3 (1.2)	4.1 (1.1)	4.2 (1.1)			
Minimum dietary diversity	44.7%	30.1%	35.5%			

Table 4.18 Nutrition-related decision-making power of male household heads, among those who stated a decision was made

	2017	2018	2019			
	Male HH	Male HH	Male HH	P-value	P-value	P-value
	heads	heads	heads	2017/	2017/	2018/
	N=1733	N=1792	N=1767	2018	2019	2019
	%	%	%			
Own food consumption (N=17	727, 1790, 176	6)				
Little to no input	2.3%	2.5%	0.2%			
Input into some decisions	17.6%	16.2%	8.4%			
Input into most or all decisions	80.1%	81.3%	81.3%	0.453	0.848	0.380
Child feeding (N=1720, 1773, 1760)						
Little to no input	8.0%	11.9%	13.1%			
Input into some decisions	58.7%	56.4%	61.5%			
Input into most or all decisions	33.3%	31.7%	25.4%	0.455	<0.001	0.002

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 4.19 Nutrition-related decision-making power of mothers, among those who stated a decision was made

2017	0040	0040			
2017	2018	2019	- D volue	P-value	P-value 2018/
Mothers	Mothers	Mothers			
N=3642	N=3648	N=3648			2016/
%	%	%	2010	2019	2019
5, 3648)					
3.1%	2.6%	2.0%			
22.1%	20.6%	19.5%			
42.8%	76.8%	78.6%	0.178	0.005	0.175
0.6%	0.9%	0.3%			
7.1%	4.8%	4.6%			
92.3%	94.3%	95.2%	0.029	<0.001	0.166
	Mothers N=3642 % 5, 3648) 3.1% 22.1% 42.8% 0.6% 7.1%	Mothers Mothers N=3642 % % % % % % % % % % % % % % % % % % %	Mothers Mothers Mothers N=3642 N=3648 N=3648 % % % 5, 3648) 3.1% 2.6% 2.0% 22.1% 20.6% 19.5% 42.8% 76.8% 78.6% 0.6% 0.9% 0.3% 7.1% 4.8% 4.6%	Mothers Mothers 2017/ N=3642 N=3648 N=3648 2018 % % % 2018 5, 3648) 3.1% 2.6% 2.0% 22.1% 20.6% 19.5% 42.8% 76.8% 78.6% 0.178 0.6% 0.9% 0.3% 7.1% 4.8% 4.6%	Mothers Mothers N=3642 N=3648

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

5. Results: IR 1/WASH

The prevalence of knowledge on appropriate drinking water treatment methods (defined as naming at least 1 correct answer and no incorrect answers) has decreased from 87% to in 2017 to 82% in 2019 (P:<0.001) (Table 5.1). Among mothers, there was no significant change in knowledge between 2017 and 2019 (Table 5.2). Drinking water treatment practices, however, are improving. Households using an appropriate drinking water treatment method and no inappropriate methods increased from 13% to 16% (P:0.016) in 2019 and among those households who could be observed treating their drinking water, the increase in use of appropriate drinking water treatment methods was similar from 15% in 2017 to 18% in 2019 (P:0.008) (Table 5.3). The prevalence of household heads who reported that their household does not treat drinking water declined from 62% in 2017 to 58% in 2019 (P:0.029) (Table 5.3), which was consistent with the mothers' report of never treating drinking water declining from 60% in 2017 to 35% in 2019 (P:<0.001) and always treating drinking water increasing from 16% in 2017 to 21% in 2019 (P:0.014) (Table 5.4).

Knowledge of handwashing with soap and water at all six critical times has seen mixed results between 2017 and 2019. Among household heads, knowledge of handwashing with soap and water at all six critical times has had no overall progress from 2017 to 2019 (Table 5.5). Similarly, among mothers, the prevalence of correct knowledge increased from 3% to 6% from 2017 to 2019 (P:<0.001) (Table 5.6). Consistently, knowledge on handwashing before feeding, before eating, and before cooking, as well as after handling livestock, are lower than after defecation and after cleaning a child's feces. The practice of handwashing with soap and water at all six critical times among mothers saw a similar trend, increasing only from 8% to 10% in 2019, but no significant overall change between 2017 and 2019 (Table 5.7).

Presence of water user groups in the communities has increased significantly as reported by both household heads and mothers, increasing from 39% to 59% (P:<0.001) (Table 5.8) and from 35% to 57% (P:<0.001) (Table 5.9) between 2017 and 2019, respectively.

Observation of sanitation facilities and practices showed mixed results. The practice of covering drinking water pots showed no significant change between 2017 and 2019. The percentage of households with a handwashing station with soap and water, however, steadily increased from 37% in 2017 to 61% in 2019 (P:<0.001). The availability of improved toilets (at about 85%) and toilet cleanliness (slightly over 40%), however, did not change over time (Table 5.10). The use of commercial/disposable pads among mothers steadily increased from 20% in 2017 to 27% in 2019 (P:0.002) (Table 5.11).

When asked about decision-making on the purchase and use of water treatment supplies (in 2018 and 2019 surveys only), there was a decline in the prevalence of mothers having input into most or all decisions, from 58% in 2018 to 51% in 2019 (P:0.001) (Table 5.13), but no overall change in this for household heads (Table 5.12).

Table 5.1 Drinking water treatment knowledge among household heads

	2017	2018	2019	D volue	D volue	P-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1896	N=2141	N=2130	2018	2019	2019
	%	%	%	2010	2013	2013
Specific methods*						
Boil it	81.4%	81.4%	79.3%	0.990	0.131	0.155
Add bleach/chlorine	22.4%	16.9%	18.2%	< 0.001	0.002	0.310

	2017	2018	2019	D-value	P-value	D-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1896	N=2141	N=2130			
	%	%	%	2018	2019	2019
Filter it	59.1%	63.1%	72.6%	0.050	<0.001	<0.001
Solar disinfection/SODIS	8.4%	10.0%	13.2%	0.110	< 0.001	0.001
Let it stand/settle	15.7%	15.8%	11.0%			
Strain it through cloth	35.8%	36.2%	41.5%			
Warm it	NA	10.6%	17.9%			
Other	9.7%	7.2%	8.1%			
Any appropriate method (boil, chlorine, filter, SODIS)	90.9%	91.9%	93.4%	0.353	0.009	0.091
Any appropriate method and no inappropriate method	86.8%	83.8%	81.6%	0.020	<0.001	0.147

Table 5.2 Drinking water treatment knowledge among mothers

	2017	2018	2019			
				-P-value	P-value	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3640	N=3648	N=3647	2018	2019	2019
	%	%	%	2010	2013	2013
Specific methods*						
Boil it	82.8%	88.3%	84.8%	< 0.001	0.162	0.008
Add bleach/chlorine	13.1%	13.6%	15.0%	< 0.001	0.117	0.225
Filter it	55.2%	68.3%	74.8%	< 0.001	< 0.001	0.001
Solar disinfection/SODIS	8.9%	15.9%	17.6%	0.010	< 0.001	0.246
Let it stand/settle	14.8%	15.4%	12.0%			
Strain it through cloth	44.1%	47.9%	48.5%			
Warm it	NA	9.0%	15.2%			
Other	9.7%	5.8%	7.7%			
Any appropriate method (boil, chlorine, filter,	89.2%	93.3%	95.0%	<0.001	<0.001	0.054
SODIS)	00.2 /0	33.370	33.070	\0.001	\U.UU1	0.007
Any appropriate method and no inappropriate	85.5%	87.9%	86.9%	0.035	0.245	0.430
method	00.070	07.070	00.070	0.000	0.270	0.700

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 5.3 Drinking water treatment practices as reported by household heads

	2017	2018	2019	_	_	
	All HH heads	All HH heads	All HH heads	P-value 2017/	P-value 2017/	P-value 2018/
	N=3630	N=3646	N=3647	2018	2019	2019
	%	%	%	2010	2010	2010
Drinking water treatment (observ	ation)					
Boil it	8.3%	10.8%	8.9%	0.010	0.477	0.016
Add bleach/chlorine	0.1%	0.1%	0.2%	0.700	0.268	0.221
Filter it	6.6%	9.3%	10.4%	< 0.001	< 0.001	0.150
Solar disinfection/SODIS	0.2%	0.2%	0.3%	0.770	0.654	0.490
Let it stand/settle	10.9%	9.0%	5.3%			
Strain it through cloth	4.5%	5.9%	10.2%			
Other	0.2%	0.2%	0.2%			
Warm it	NA	0.5%	1.0%			
Do not treat water	62.2%	58.1%	58.0%	0.030	0.029	0.966

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question

	2017 All HH heads N=3630 %	2018 All HH heads N=3646 %	2019 All HH heads N=3647 %	-P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
Could not observe	9.3%	10.6%	10.3%			
Among all respondents						
Any appropriate method (boil, chlorine, filter, SODIS)	14.3%	19.0%	18.4%	<0.001	<0.001	0.593
Any appropriate method and no inappropriate method	13.2%	17.1%	15.9%	<0.001	0.016	0.193
Among those that could be obser	ved (N=3293,	3261, 3270)				
Any appropriate method (boil, chlorine, filter, SODIS)	15.8%	21.2%	20.5%	<0.001	<0.001	0.539
Any appropriate method and no inappropriate method	14.6%	19.2%	17.7%	<0.001	0.008	0.166

Table 5.4 Drinking water treatment practices as reported by mothers

	2017	2018	2019	-D volue	D volue	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3640	N=3648	N=3647	2017/	2017/	2016/
	%	%	%	2016	2019	2019
Frequency of treating drinking water						
Always	16.4%	23.2%	21.2%	< 0.001	0.014	0.300
Sometimes	23.5%	36.6%	34.1%	< 0.001	< 0.001	0.242
Never	60.1%	40.2%	34.9%	< 0.001	< 0.001	0.034

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 5.5 Handwashing with soap and water knowledge among household heads

	2017 All HH heads	2018 All HH heads	2019 All HH heads			P-value
	N=1896	N=2141	N=2130	2017/ 2018	2017/ 2019	2018/ 2019
	%	%	%	2010	2013	2013
All six critical times caretaker should wash hands (open-ended)	0.8%	12.8%	2.4%	<0.001	<0.001	<0.001
All six critical times caretaker should wash hands (with picture probe)	NA	NA	11.5%			
Specific times caretaker should wa	sh hands (op	en-ended)				
After defecation	81.3%	90.5%	81.4%	< 0.001	0.963	< 0.001
After cleaning the child's bottom	67.6%	83.6%	72.2%	< 0.001	0.027	< 0.001
After handling animals/livestock	37.1%	68.3%	53.7%	< 0.001	< 0.001	< 0.001
Before preparing food/cooking	10.7%	28.3%	15.5%	< 0.001	< 0.001	< 0.001
Before eating	37.6%	56.4%	44.3%	< 0.001	0.001	< 0.001
Before feeding the child	48.3%	56.8%	44.5%	< 0.001	0.045	< 0.001
Specific times caretaker should wa	sh hands witl	h probe (pictu	ıres)+			
After defecation	NA	NA	91.5%			
After cleaning the child's bottom	NA	NA	81.9%			
After handling animals/livestock	NA	NA	81.8%			
Before preparing food/cooking	NA	NA	64.3%			
Before eating	NA	NA	67.0%			
Before feeding the child	NA	NA	73.3%			

^{*}Note: These results will not add to 100% as additional responses were allowed for this question.

Table 5.6 Handwashing with soap and water knowledge among mothers

rabio die Hallawadilling wali deap and water knowledge allieng methole								
2017	2018	2019	P-value	P-value	P-value			
		Mothers			2018/			
					2019			
%	%	%	_0.0	_0.0	_0.0			
3 3%	0 1%	6 3%	-0.001	-0.001	0.015			
J.J/0	J. 1 /0	0.070	\0.001	\U.UU1	0.010			
ΝΔ	ΝΔ	16.0%						
INA	INA	10.070						
Specific times caretaker should wash hands (open-ended)								
78.1%	77.4%	77.3%	0.640	0.677	0.959			
84.7%	95.6%	88.5%	< 0.001	0.003	< 0.001			
43.1%	64.5%	58.6%	< 0.001	< 0.001	0.007			
13.0%	27.3%	26.2%	< 0.001	< 0.001	0.501			
32.3%	39.3%	41.5%	< 0.001	< 0.001	0.214			
60.1%	64.7%	60.0%	<0.001	0.954	0.022			
ith picture	e probe)							
NA	NA	91.6%						
NA	NA	87.4%						
NA	NA	82.2%						
NA	NA	70.5%						
NA	NA	65.8%						
NA	NA	79.5%						
	2017 Mothers N=3640 % 3.3% NA pen-ender 78.1% 84.7% 43.1% 13.0% 32.3% 60.1% vith picture NA NA NA NA NA	2017 2018	2017 2018 2019 Mothers Mothers Mothers N=3640 N=3648 N=3647 % % % 3.3% 9.1% 6.3% NA NA 16.0% pen-ended) 78.1% 77.4% 77.3% 84.7% 95.6% 88.5% 43.1% 64.5% 58.6% 13.0% 27.3% 26.2% 32.3% 39.3% 41.5% 60.1% 64.7% 60.0% vith picture probe) NA NA 91.6% NA NA 87.4% NA NA 87.4% NA NA 70.5% NA NA 70.5% NA NA 65.8%	2017 2018 2019 P-value 2017/ 2018 2017/ 2018 2017/ 2018 3.3% 9.1% 6.3% <0.001	2017 2018 2019 Mothers Mothers Mothers N=3640 N=3648 N=3647 % % % 3.3% 9.1% 6.3% NA NA 16.0% 100 16.3% 0.001 100 16.3% 0.001 16.3% 0.001 0.001 16.3% 0.001 0.001 16.3% 0.640 0.677 17.1% 17.4% 17.3% 0.640 0.677 18.4.7% 95.6% 88.5% 0.001 0.003 13.0% 27.3% 26.2% 0.001 0.001 13.0% 27.3% 26.2% 0.001 0.001 13.0% 27.3% 26.2% 0.001 0.001 160.1% 64.7% 60.0% 0.001 0.001 160.1% 64.7% 60.0% 0.001 0.001 17 16 16 16 16 16			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 5.7 Practice of handwashing with soap and water among mothers

		•				
	2017	2018	2019	D-value	P-value	D-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3640	N=3648	N=3648	2017/	2017/	2016/
	%	%	%	2010	2019	2019
Handwashing with soap and water all 6 critical	7.8%	19.0%	9.8%	<0.001	0.161	<0.001
times always	7.070	19.070	3.070	\0.001	0.101	\0.001
Handwashing with soap and water (open-ende	ed)					
After defecation	96.4%	97.8%	97.6%	0.01	0.006	0.953
After cleaning a young child's bottom	73.1%	84.6%	73.0%	< 0.001	0.957	< 0.001
After handling livestock/animals	61.0%	85.7%	68.3%	< 0.001	0.001	< 0.001
Before cooking/preparing food	21.5%	42.3%	35.5%	< 0.001	< 0.001	< 0.001
Before eating	46.0%	61.1%	53.7%	< 0.001	< 0.001	< 0.001
Before feeding children	22.1%	41.2%	22.1%	< 0.001	0.992	< 0.001
Handwashing with soap and water (closed-en	ded)					
After defecation	99.4%	99.8%	99.8%	0.005	0.011	1.000
After cleaning a young child's bottom	99.1%	99.4%	99.4%	0.085	0.177	0.794
After handling livestock/animals	94.2%	93.3%	86.1%	0.254	< 0.001	< 0.001
Before cooking/preparing food	85.2%	89.8%	90.5%	< 0.001	< 0.001	0.519
Before eating	87.6%	92.1%	91.4%	< 0.001	< 0.001	0.369
Before feeding children	87.9%	90.6%	90.2%	0.008	0.036	0.669
Handwashing with soap and water always (clo	sed-ende	d)				
After defecation	82.1%	94.3%	90.4%	< 0.001	< 0.001	< 0.001
After cleaning a young child's bottom	73.6%	89.5%	84.5%	< 0.001	< 0.001	< 0.001
After handling livestock/animals	39.3%	66.9%	49.9%	< 0.001	< 0.001	< 0.001
Before cooking/preparing food	14.0%	28.3%	16.9%	< 0.001	0.099	<0.001

			2019 Mothers N=3648 %	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
Before eating	13.3%	28.9%	18.6%	<0.001	0.003	<0.001
Before feeding children	13.9%	28.7%	18.7%	< 0.001	0.011	< 0.001

Table 5.8 Water user group available in the community reported by household heads

	2017	2018	2019			
	Male HH heads	Male HH heads	Male HH heads	P-value	P-value	P-value
	N=1733	N=1792	N=1767	2017/2018	2017/2019	2018/2019
	%	%	%			
Water users' group	39.1%	53.2%	59.1%	<0.001	<0.001	0.003

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 5.9 Water user group available in the community reported by mothers

	2017 Mothers N=3642 %	2018 Mothers N=3648 %	2019 Mothers N=3648 %	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
Water users' group	35.4%	49.0%	56.7%	< 0.001	< 0.001	< 0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 5.10 Household sanitation and hygiene facilities and practices

	2017	2018	2019	-D valua	D value	P-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=3644	N=3647	N=3647			
	%	%	%	2018	2019	2019
Usual cooking place: indoors in a separate kitchen room	50.4%	49.4%	48.5%			
Used for cooking: improved stove (closed with chimney)	10.2%	10.9%	10.8%			
Improved sanitation (toilet is: flush to piped sewer system, flush to septic tank, flush to pit latrine, composting toilet/eco-san, bio-gas toilet)	86.7%	88.3%	84.1%	0.264	0.100	0.019
All drinking water pots covered (N=3629, 3646, 3647)	42.4%	37.4%	44.9%	<0.001	0.102	<0.001
Clean toilets (N=3629, 3646, 3647)	42.4%	35.1%	40.6%	< 0.001	0.318	0.003
Handwashing station with soap & water (N=3629, 3646, 3647)	37.0%	48.5%	61.2%	<0.001	<0.001	<0.001

Table 5.11 Menstrual hygiene practices among mothers

	2017	2018	2019	Divolue	Dyoluo	P-value
	Mothers	Mothers	Mothers			
	N=3640	N=3648	N=3647	2017/	2017/	2018/
	%	%	%	2018	2019	2019
Pad use during menstruation						
Do not use anything	5.1%	5.3%	2.2%			
Commercial/disposable pad	20.2%	25.6%	26.8%	0.530	0.002	0.003
Old cloth	72.2%	67.5%	69.1%			
Reusable/homemade pad	2.4%	1.4%	1.7%			

Table 5.12 Decision-making power on purchase and use of water treatment supplies among household heads

	2018	2019	
	Male HH Heads	Male HH Heads	P-value
	N=1792	N=1767	2018/ 2019
	%	%	
Among those who stated a decision	was made (N=805, 898)		
Little to no input	20.6%	23.4%	
Input into some decisions	52.2%	49.4%	
Input into most or all decisions	27.2%	27.2%	0.987

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 5.13 Decision-making power on purchase and use of water treatment supplies among mothers

	2018	2019	
	Mothers	Mothers	P-value
	N=3648	N=3648	2018/ 2019
	%	%	
Among those who stated a decision was	s made (N=1795, 1870)		
Little to no input	10.8%	17.5%	
Input into some decisions	30.9%	31.8%	
Input into most or all decisions	58.3%	50.7%	0.001

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

6. Results: IR 2/Health

SII's IR 2 focuses on increased use of quality nutrition and health services by women and children. This section presents data on child and maternal health, including exposure to key messages and health-related knowledge and practices.

The prevalence of households who had their GoN vaccination cards for children under five years available to be seen increased from 55% in 2017 to 63% in 2019 (P:<0.001). Deworming in the last 6 months also increased from 63% in 2017 to 66% in 2019 (P:<0.001) (Table 6.1). The incidence of diarrhea among children in the two weeks preceding the survey, as well as treatment for diarrhea, showed no significant change over time. Among the sample of children with diarrhea, about 20% of mothers each year reported seeking no treatment and about two-thirds were seen by a health worker or FCHV in 2019. Among those children that were taken to a health worker/FCHV, only 13% were given ORS and zinc (Table 6.2). Among the sub-population of children under two years, the incidence of diarrhea in the previous two weeks and care was the same, except that the prevalence of giving ORS and zinc was slightly higher at about one in five children with diarrhea treated by a health worker (Table 6.3).

The prevalence of children being sick did not change over time (Table 6.4). The percentage of children under two years weighed in the previous month (recommendation as per Nepal protocol) increased from 18% in 2017 to 26% in 2019 (P:<0.001). Also, among mothers whose child was weighed in the previous month, the prevalence of being told about their child's growth in the last GMP session increased from 28% in 2017 to 43% in 2019 (P:<0.001) (Table 6.5).

Significant gains in maternal health knowledge were found. Among household heads, maternal knowledge is still very low, but between 2017 and 2019 the prevalence of maternal health knowledge changed: needing 4 ANC checkups increased from 31% to 34% (P:0.015), 180 iron and folic acid (IFA) tablets during pregnancy from 15% to 18% (P:0.015), 3 postnatal care (PNC) checkups from 17% to 13% (P:0.001) and 1 Vitamin A capsule post-partum from 7% to 9% (P:<0.001) (Table 6.6). Among mothers, there were similar significant increases from 2017 to 2019 in knowledgeable about: needing 4 ANC checkups from 70% to 77% (P:<0.001), 180 IFA tablets during pregnancy from 71% to 82% (P:<0.001), 45 IFA tablets post-partum from 55% to 65% (P:<0.001), and 1 Vitamin A capsule post-partum from 44% to 52% (P:<0.001) between 2017 and 2019. The prevalence of knowledge about the need for 3 postnatal care (PNC) checkups, however, declined slightly from 18% in 2017 to 16% in 2019 (P:0.054) (Table 6.7). ANC practices were high and improved between 2017 and 2019: any ANC increased from 96% to 97% (P:0.015), at least 4 ANC visits increased from 80% to 91% (P:<0.001), and weight taken during ANC from 87% to 95% (P:<0.001). There was no significant change in the percentage of mothers who took the recommended 180 IFA tablets during pregnancy between 2017 and 2019 (Table 6.8).

Delivery in the presence of a skilled birth attendant increased from 73% in 2017 to 82% in 2019 (P:<0.001). The average weight of the child at birth was 3 kg with 10% of low birth weight children, with no changes over time. PNC practices improved: the percentage of mothers receiving PNC on the first day increased from 73% in 2017 to 81% in 2019 (P:<0.001), children receiving PNC on the first day increased from 74% in 2017 to 82% in 2019 (P:<0.001), and mothers receiving breastfeeding support in the first hour after birth increased from 71% in 2017 to 86% in 2019 (P:<0.001) The prevalence of women who reported taking any IFA increased from 70% in 2017 to 79% in 2019 (P:<0.001). Similarly, taking IFA for the recommended 45 days or more post-partum increased from 36% in 2017 to 42% in 2019 (P:0.001) (Table 6.8).

The prevalence of mothers getting married at 20 years of age or older (government protocol) has increased from 25% in 2017 to 28% in 2019 (P:0.01) (Table 6.9). The prevalence of knowing that a woman should wait until 20 years of age to become pregnant has remained at about half of household heads and nearly 60% of mothers, with no change over time. Knowledge of modern FP methods, measured as naming *only* modern methods and no traditional methods when asked an open-ended question, declined slightly among household heads from 89% in 2017 to 86% in 2019 (P:0.012), with an even steeper regression among mothers from 93% in 2017 to 82% in 2019 (P:<0.001) (Table 6.10 and 6.11). Among non-pregnant mothers, avoiding pregnancy increased between 2017 and 2019 from 40% to 44% (P:0.001) as did the prevalence of mothers using a modern method of FP from 36% to 38% (P:0.168). When limiting the analyses to those living with their husband, more than 50% of mothers were using a modern method, with no significant changes over time (Table 6.12).

Health frontline workers interactions with household heads and mothers increased between 2017 and 2019 from 45% to 58% (P:<0.001) (Table 6.13) and 67% to 84% (P:<0.001) respectively (Table 6.14). Between 2017 and 2019, the prevalence of male household heads' having input into most or all decisions declined in several domains: use of FP methods from 58% to 51% (P:0.019), their own healthcare from 89% to 91% (P:0.054), and child healthcare from 62% to 52% (P:<0.001) (Table 6.15). Maternal input increased for making most or all decisions between 2017 and 2019 regarding their own health care from 87% to 93% (P:<0.001) and child healthcare from 91% to 94% (P:<0.001), with no significant change regarding input in FP method (Table 6.16).

Table 6.1 Child vaccination and supplementation

Table of the trademation and dapprometration								
	2017	2018	2019	-P-value	D volue	D volue		
	Mothers	Mothers	Mothers	2017/	2017/	2018/		
	N=3642	N=3648	N=3648	2017/	2017/	2019		
	%	%	%	2010	2019	2019		
Vaccination: has card (seen)	55.1%	58.9%	63.1%	0.001	<0.001	0.001		
Vitamin A: received in most recent campaign (among children 6-59.9m, N=3173, 3177, 2992)	49.7%	63.0%	92.6%	<0.001	<0.001	<0.001		
De-worming: taken in last 6 months	63.2%	62.1%	66.2%	0.476	<0.001	<0.001		
Micronutrient powder: taken in last week (among children 6-23.9m, N=1394, 2460, 1396)	9.3%	11.4%	14.3%	0.160	0.003	0.088		

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.2 Child health: diarrhea and treatment, among children 0-5 years

Table 6.2 Office fleatiff: diarrica and freatment, among children 6-5 years										
	2017	2018	2019	- D valua	P-value	D value				
	Mothers	Mothers	Mothers	2017/	2017/	2018/				
	N=3642	N=3648	N=3648	2017/	2017/	2016/				
	%	%	%	2010	2019	2019				
Diarrhea in last 2 weeks	11.1%	9.1%	9.5%	0.010	0.062	0.629				
Among children who had diarrhea (N=404, 33)	2, 345)									
Blood in stools	11.9%	12.7%	10.7%							
Treatment for diarrhea (N=404, 332, 345)										
None	23.0%	22.6%	19.7%	0.884	0.294	0.352				
Health worker/FCHV at facility or at home	66.8%	67.2%	68.4%	0.923	0.650	0.724				
ORS and zinc	9.7%	7.8%	9.9%							
Given for diarrhea (among children who soug	ht treatme	ent for dia	rrhea, N=	311, 257	⁷ , 277)					
ORS Only	38.6%	38.1%	39.0%		•					
Zinc Only	6.8%	6.6%	5.8%							
ORS and Zinc	12.5%	10.1%	12.3%							
Among children treated by health worker/FCH	V for diar	rhea (N=2	258, 211, 2	218)	•					

	2017 Mothers N=3642	2018 Mothers N=3648	2019 Mothers N=3648	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
	%	%	%	2010	2010	2010
ORS Only	42.3%	40.8%	41.7%			
Zinc Only	7.8%	7.6%	6.9%			
ORS and zinc	13.2%	11.4%	12.8%	0.524	0.905	0.631
Homemade remedy	59.3%	57.8%	62.8%			
Antibiotics	NA	NA	39.5%			

Table 6.3 Child health: diarrhea and treatment, among children 0-2 years

Table 0.5 Office fleatiff: diarrica and treatment, among emidren 0-2 years									
	2017	2018	2019	- D-valuo	P-value	P-value			
	Mothers	Mothers	Mothers	2017/	2017/	2018/			
	N=1850	N=1910	N=1827	2017/	2017/	2018/			
	%	%	%	2010	2019	2019			
Diarrhea in last 2 weeks	11.1%	9.1%	12.4%	0.108	0.868	0.194			
Among children who had diarrhea (N=234, 20	8, 227)								
Blood in stools	9.0%	13.0%	10.6%						
Treatment for diarrhea (N=234, 208, 227)									
None	25.2%	26.4%	19.8%	0.758	0.161	0.101			
Health worker/FCHV at facility or at home	65.0%	67.3%	69.6%	0.681	0.264	0.597			
ORS and Zinc	16.8%	12.5%	15.0%	0.190	0.587	0.448			
Given for diarrhea (among children who sough	ht treatme	ent for dia	rrhea, N=	175, 153	3, 182)				
ORS Only	34.9%	36.0%	31.3%						
Zinc Only	7.4%	7.8%	6.6%						
ORS and Zinc	22.3%	17.0%	18.7%						
Among children treated by health worker/FCH	IV for diar	rhea (N=1	46, 133, 1	47)					
ORS only	38.4%	37.6%	33.3%						
Zinc only	8.9%	9.0%	7.5%						
ORS and zinc	23.3%	18.1%	19.1%	0.190	0.587	0.448			
Homemade remedy	52.7%	52.6%	55.1%						
Antibiotics	NA	NA	41.5%						

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.4 Child health: acute respiratory illness (ARI) and treatment

	2017	2018	2019	-P-value	D volue	D volue
	Mothers	Mothers	Mothers			
	N=3642	N=3648	N=3648	2017/	2017/	2018/
	%	%	%	2018	2019	2019
Any sickness (fever, cough, chest, or breathing)	34.5%	29.4%	32.3%	0.001	0.175	0.016
Any sickness among children 0-2 years (N=1850, 1910, 1827)	36.3%	31.1%	35.4%	0.006	0.648	0.012
Fever in last 2 weeks	26.1%	22.6%	24.5%	0.010	0.354	0.040
Cough in last 2 weeks	24.4%	20.4%	22.1%	0.002	0.097	0.123

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

Table 6.5 Growth monitoring practices among children 0-2 years

Table 0.3 Growth in	2017	2018	2019	-
-	Mothers	Mothers	Mothers	-P-value P-value P-value
	N=1850	N=1910	N=1827	2017/ 2017/ 2018/
		Mean (SD)/%		2018 2019 2019
Weight/height ever taken by				
professional/FCHV	89.3%	94.3%	95.7%	<0.001 <0.001 0.115
Children 0-2 years weighed in the				
past month	17.8%	22.2%	26.3%	0.009 <0.001 0.048
Told about child's growth in last GMP,				
among those whose height or weight				
was taken in the last month (N=1654,	28.4%	38.6%	43.0%	<0.001 <0.001 0.049
1626, 1748)				
In last 6 months, among total sample				
Weight was taken by		00.50/	00.70/	
professional/FCHV	71.9%	90.5%	90.7%	
Times weight taken by	NIA	0.0 (4.0)	0.0 (4.0)	
professional/FCHV (N=1907, 1826)	NA	2.3 (1.8)	2.6 (1.9)	
In last 6 months, among those whos	e height/weig	ght was ever t	aken	
Weight was taken by				
professional/FCHV (N=1652, 1801,	80.5%	90.0%	90.3%	
1748)				
Times weight taken by	NA	2 6 (2 6)	2 9 (2 0)	
professional/FCHV (N=1789, 1739)	INA	2.6 (3.6)	2.8 (2.9)	
In last 1 month, among those whose	height/weigl	ht was ever ta	ken (N=1644	, 1759, 1718)
Weight was taken by	00.40/	0440/	07.00/	0.000 0.001 0.000
professional/FCHV	20.1%	24.1%	27.9%	0.026 <0.001 0.080
Time (in months) since weight was	40 (45)	0.0 (0.0)	0.0 (0.0)	0.004 0.004 0.040
taken by professional/FCHV	4.0 (4.5)	3.2 (3.9)	2.8 (3.6)	<0.001 <0.001 0.013
Received any counseling during	00.00/	00.00/	40.00/	0.040 0.004 0.004
GMP (N=1654, 1626, 1748)	68.3%	62.3%	43.0%	0.016 <0.001 <0.001
Topics discussed during GMP, amor	ng those that	received cou	nseling (N=	1129, 1013, 751)
Maternal nutrition	7.5%	8.9%	13.1%	0.303 0.001 0.016
Maternal health	2.0%	3.6%	3.2%	0.020 0.098 0.704
Breastfeeding	9.0%	16.1%	25.6%	<0.001 <0.001 <0.001
Complementary Feeding	18.5%	28.6%	39.7%	<0.001 <0.001 <0.001
GMP	24.6%	29.8%	53.1%	0.063 < 0.001 < 0.001
Immunization	41.7%	43.6%	43.1%	0.494 0.622 0.871
Child nutrition	30.8%	40.1%	44.6%	<0.001 <0.001 0.135
Child health	18.7%	27.3%	22.5%	<0.001 0.104 0.072
WASH	5.1%	8.4%	18.0%	0.015 <0.001 <0.001
Family planning	2.2%	0.8%	3.3%	0.020 0.179 0.002
Note: Italics indicates that statistical testing	na was done to	test the differe	nces found in	this indicator's results in

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.6 Knowledge on maternal health among household heads

	N=1898	2018 All HH heads N=2142	N=2130	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
4 ANC checkups needed for pregnant woman	30.5%	% 34.0%	% 34.4%	0.020	0.015	0.771
180 days of IFA tablets need for pregnant woman	14.7%	14.5%	17.8%	0.880	0.015	0.013

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

	2017 All HH heads N=1898 %	2018 All HH heads N=2142 %	2019 All HH heads N=2130 %	-P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
45 IFA tablets needed for post partum woman	10.6%	10.9%	12.6%	0.700	0.066	0.123
3 PNC checkups needed for post- partum woman	17.0%	11.9%	12.8%	<0.001	0.001	0.419
1 Vitamin A capsule needed for post- partum woman	7.1%	7.5%	9.4%	0.180	<0.001	0.070

Table 6.7 Knowledge on maternal health among mothers

	2017	2018	2019	D value	P-value	D value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3640	N=3647	N=3647			
	%	%	%	2018	2019	2019
4 ANC checkups needed for pregnant woman	69.5%	75.2%	77.1%	<0.001	<0.001	0.279
180 days of IFA tablets need for pregnant woman	71.4%	75.1%	81.7%	0.02	< 0.001	< 0.001
45 IFA tablets needed for post-partum woman	55.1%	59.0%	65.0%	< 0.001	< 0.001	0.004
3 PNC checkups needed for post-partum woman	17.9%	20.6%	15.7%	0.01	0.054	< 0.001
1 Vitamin A capsule needed for post-partum woman	44.3%	46.8%	51.5%	0.16	<0.001	0.025

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.8 ANC, delivery, and PNC practices among mothers with children <2 years

		J			<u>, , , , , , , , , , , , , , , , , , , </u>	
	2017	2018	2019	-D-value	P-value	D-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=1848	N=1910	N=1825	2017/	2017	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
ANC practices						
Any ANC received	95.8%	97.1%	97.3%	0.040	0.015	0.802
4+ ANC checkups, among mothers	79.5%	85.5%	91.4%	-0.001	<0.001	0.001
who received any	79.570	00.070	91.470	\0.00 1	\0.00 1	0.001
Weight taken in most recent ANC,						
among mothers who received any	86.7%	93.4%	94.7%	<0.001	< 0.001	0.132
(N=1772, 1855, 1775)						
Iron/Folic acid tablets taken during	pregnancy					
None	6.1%	4.4%	3.6%			
1-60	10.4%	8.1%	6.2%			
61-120	11.8%	8.3%	7.8%			
121-140	1.2%	0.9%	1.1%			
141-160	9.5%	8.3%	8.6%			
161-179	9.1%	11.2%	19.0%			
180 and above	52.0%	58.8%	53.8%	<0.001	0.391	0.002
Delivery practices						
Delivery assistance: skilled birth	73.2%	77.2%	82.3%	0.001	<0.001	-0.001
attendance	73.2 /0	11.270	02.570	0.001	\0.00 1	\0.001
Child weight (for those with record) in	3.0 (0.5)	3.0 (0.5)	3.0 (0.5)			
kg (N=621, 702, 896)	3.0 (0.3)	3.0 (0.3)	3.0 (0.3)			
Low birth weight (N=621, 702, 896)	11.1%	8.3%	9.5%	0.090	0.296	0.387
PNC practices						
Received for mother within 1 day	72.6%	77.6%	80.8%	< 0.001	< 0.001	0.026

	2017	2018	2019	Divolue	Divolue	Divolue
	Mothers N=1848	Mothers N=1910 Mean (SD)/%	Mothers N=1825	2017/	P-value 2017/ 2019	2018/ 2019
Received for baby within 1 day	Weari (OD)/ 70	Weari (SD)/ /0	ivicali (OD)/ /)		
(N=1820, 1896, 1784)	73.5%	79.1%	83.0%	<0.001	<0.001	0.066
Vitamin A received in 6 weeks after delivery	63.1%	59.8%	59.7%	0.060	0.051	0.940
Breastfeeding support in first hour after birth	70.6%	83.8%	85.5%	<0.001	<0.001	0.212
Iron/Folic acid after delivery						
Any IFA taken	70.0%	73.8%	79.0%	0.010	< 0.001	< 0.001
Taken for at least 45 days	36.2%	39.4%	42.2%	0.042	0.001	0.083
Taken for at least 45 days (among	7					
those who took any, N=1293, 1410, 1442)	51.8%	53.3%	53.4%	0.420	0.438	0.971

Table 6.9 Age at marriage, pregnancy and childbirth

rable 0.5 Age at marriage, pregnancy and emidbrith										
	2017	2018	2019	P-value	P-value	P-value				
	Mothers	Mothers	Mothers	2017/	2017/	2018/				
	N=3642	N=3648	N=3648	2017/	2017/	2019				
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019				
Age at marriage	18.0 (2.8)	18.1 (2.8)	18.2 (2.9)							
Under 15 years	6.9%	5.9%	6.2%							
15-17.9 years	40.9%	40.4%	37.8%							
18-19.9 years	26.7%	28.0%	28.1%							
20+ years	25.4%	25.7%	27.9%	0.730	0.010	0.009				
Number of times pregnant	2.4 (1.6)	2.3 (1.6)	2.3 (1.5)							
Age at first pregnancy	19.5 (3.0)	19.5 (2.9)	19.7 (3.0)							
Age at first birth	20.1 (3.3)	20.1 (3.0)	20.3 (3.0)							

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.10 Family planning/ healthy timing and spacing of pregnancy (HTSP) knowledge among household heads

	0047	0040	0040			
	2017	2018	2019	-D-valua	P-value	P-value
	All HH heads	All HH heads	All HH heads			
	N=1898	N=2141	N=2130	2017/	2017/	2018/
	%	%	%	2018	2019	2019
	/0	/0	/0			
Age in years woman should first	51.6%	53.8%	52.9%	0.170	0.416	0.594
become pregnant: 20 years	31.0%	33.6%	32.9%	0.170	0.410	0.594
Months woman should wait between						
giving birth and becoming pregnant	13.4%	12.7%	15.0%	0.540	0.220	0.068
0, 0	13.470	12.770	10.070	0.070	0.220	0.000
again: 24 months						
Months woman should wait between						
miscarriage/abortion and becoming	13.9%	13.0%	1 4 .1%	0.420	0.858	0.349
pregnant again: 6 months						
Knowledge of only modern methods of						
FP, no traditional method	89.4%	91.0%	86.1%	0.303	0.012	0.001
r r , no traditional method						

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

Table 6.11 Family planning/ healthy timing and spacing of pregnancy (HTSP) knowledge among mothers

	2017	2018	2019	.D. voluo	D volue	P-value
		Mothers N=3647 %		2017/ 2018	2017/ 2019	2018/ 2019
Age when woman should first become pregnant: 20 years	58.2%	58.9%	59.1%	0.580	0.543	0.914
Months woman should wait between giving birth and becoming pregnant again: 24 months Months woman should wait between	12.3%	11.5%	15.6%	0.390	0.001	<0.001
miscarriage/abortion and becoming pregnant again: 6 months	17.9%	19.7%	19.6%	0.055	0.177	0.871
Knowledge of only modern methods of FP, no traditional method	92.9%	89.3%	81.5%	<0.001	<0.001	<0.001

Table 6.12 Family planning practices among non-pregnant mothers

rable of 12 raining practices among non-prognant meaners									
	2017	2018	2019	P-value	Divolue	Divolue			
	Mothers	Mothers	Mothers						
	N=3641	N=3645	N=3459	2017/	2017/	2018/			
	%	%	%	2018	2019	2019			
Doing anything to delay/avoid pregnancy	40.2%	39.1%	44.4%	0.330	0.001	<0.001			
Using modern method of FP (I.e. female/male									
sterilization, IUCD, injectable, implant, pills, condom,	36.0%	35.0%	37.6%	0.412	0.168	0.017			
diaphragm, foam jelly)									
Using modern method of FP among those living with spouse (N=1052, 916, 897)	58.4%	60.3%	61.3%	0.457	0.211	0.630			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.13 Interactions of household heads with health workers, in last 6 months

	2017	2018	2019		•	•
	All HH heads	All HH heads	All HH heads	P-value	P-value	P-value
	N=1894	N=2142	N=2129	2017/	2017/	2018/
	Moon (SD)/0/	Mean (SD)/%	Mean	2018	2019	2019
	Weari (3D)/%	iviean (SD)/%	(SD)/%			
Met Health assistant (HA)/ Auxiliary						
Health Worker (AHW)/ Auxiliary Nurse	44.8%	53.2%	57.8%	< 0.001	< 0.001	0.010
Midwife (ANM)*						
Number of times met HA/AHW/ANM	2.6 (2.0)	2.4 (1.8)	2.4 (1.7)			
(N=849, 1140, 1231)	2.0 (2.0)	2.4 (1.0)	2.4 (1.7)			

Table 6.14 Interactions of mothers with health workers, last 6 months

. 45.0 0			ronnono, labe o		•	
	2017	2018	2019	-D volue	D volue	P-value
	Mothers N=3637	Mothers N=3647	Mothers N=3646	2017/	2017/	2018/
			Mean (SD)/%	2018	2019	2019
Met HA/AHW/ANM*	67.4%	80.1%	84.0%	<0.001	<0.00	0.004

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

	2017	2018	2019	D volue	D volue	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3637	N=3647	N=3646	2017/	2017/	2016/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Number of times met HA/AHW/ANM	2.7 (2.1)	2.9 (1.9)	3.0 (1.8)			
(N=2452, 2921, 3064)	2.1 (2.1)	2.9 (1.9)	3.0 (1.0)			

Table 6.15 Health-related decision-making power of male household heads, among those who stated a decision was made

	2017	2018	2019	Divolue	Divolue	P-value
	Male HH heads	Male HH heads	Male HH heads	2017/	2017/	2018/
	N=1733	N=1792	N=1767	2017/	2017	2010/
	%	%	%	2010	2019	2019
Use of FP methods (N=1545,						
Little to no input	10.4%	6.4%	5.6%			
Input into some decisions	21.9%	32.6%	42.9%			
Input into most or all decisions	57.7%	61.0%	51.4%	0.203	0.019	<0.001
Own healthcare (N=1726, 178	9, 1765)					
Little to no input	1.0%	0.2%	0.2%			
Input into some decisions	10.2%	7.9%	8.4%			
Input into most or all decisions	88.8%	91.9%	91.3%	0.004	0.054	0.627
Child healthcare (N=1728, 179	90, 1765)					<u>.</u>
Little to no input	2.0%	2.5%	3.2%			
Input into some decisions	36.0%	39.1%	45.0%			
Input into most or all decisions	62.0%	58.4%	51.8%	0.075	<0.001	0.006

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 6.16 Health-related decision-making power of mothers, among those who stated a decision was made

	2017	2018	2019	-D volue	P-value	D volue
	Mothers	Mothers	Mothers			
	N=3642	N=3648	N=3648	2017/	2017/	2018/
	%	%	%	2018	2019	2019
Use of FP methods (N=3140, 2813, 3109)						
Little to no input	6.7%	6.8%	5.0%			
Input into some decisions	34.5%	36.7%	38.1%			
Input into most or all decisions	58.9%	56.5%	57.0%	0.330	0.419	0.817
Own healthcare (N=3630, 3648, 3648)						
Little to no input	0.9%	1.0%	0.4%			
Input into some decisions	12.2%	6.8%	6.6%			
Input into most or all decisions	87.0%	92.2%	93.0%	< 0.001	< 0.001	0.333
Child healthcare (N=3636, 3648, 3648)						
Little to no input	0.7%	0.8%	0.3%			
Input into some decisions	8.2%	4.9%	5.3%			
Input into most or all decisions	91.1%	94.3%	94.4%	<0.001	< 0.001	0.933

7. Results: IR 3/Agriculture and Enhanced Homestead Food Production

SII also has an enhanced homestead food production (EHFP) component in about half of its intervention areas. There are EHFP intensive districts where all areas of the district receive the EHFP interventions, and EHFP non-intensive districts where EHFP is only implemented in select VDCs (now within the new municipality and ward structure). The EHFP intervention was prioritized for areas classified by the government in 2010 as being remote, disadvantaged, and food insecure. The EHFP component, thus, was to support these populations with poor access to resources by providing inputs to 1000-day households to increase their agricultural production, dietary diversification and livelihoods opportunities. This section presents results for agriculture and food security related indicators, among EHFP-intervention areas. which were randomly selected into the annual monitoring survey. It is important, however, to note that these are not necessarily EHFP households, given that the intervention primarily targeted households who were in the 1000-day period at one point in time (varying across intervention areas)

In EHFP areas, the percentage of food secure households increased from 52% in 2017 to 73% in 2019 (P:<0.001). The overall household food insecurity score (1-4) also decreased from 2.6 in 2017 to 1.4 (P:<0.001) in 2019 (Table 7.1). Nearly all households own agricultural land. The majority of land owned, both agricultural and non-agricultural, was over 0.3 hectares, and the percentage of households using their owned land for kitchen gardens increased from 62% in 2017 to 78% in 2019 (P:<0.001) (Table 7.2).

Interactions between households, village model farmers (VMFs), and Homestead Food Production Beneficiaries (HFPB) saw mixed trends between 2017 and 2019. The percentage of mothers reporting an HFPB group to exist in their ward increased from 9% in 2017 to 12% in 2019, however the changes are not significant (P:0.343). The percentage of households who received EHFP inputs from a VMF and/or a graduated HFP beneficiaries increased from 17% to 24% (Table 7.3).

Household heads' HFP-related knowledge improved significantly: more recognized that improving diets of women and children is a benefit of both homestead gardens (from 48% in 2017 to 69% in 2019 (P:<0.001)) and small animal production (from 41% in 2017 to 67% in 2019 (P:<0.001)) (Table 7.4). Among mothers, a similar trend was seen (Table 7.5). Both mothers and household heads knew an average of 2 of 3 good poultry management practices by 2019, and 2 of 7 basic homestead garden planning practices (Table 7.4 and 7.5).

The percentage of households with vegetables growing on the roof, garden, etc. to be observed as a kitchen garden decreased from 87% in 2017 to 79% in 2019 (P:0.007). The length of time these gardens provide enough food for the family has increased from 5.8 to 7.1 months of the year between 2017 and 2019 (P:<0.001). Households with a homestead garden that meets minimum criteria, established by *Suaahara*, increased from 8% in 2017 to 22% in 2019 (P:<0.001). The mean number of nutrient dense vegetables cultivated in the previous year increased from 8.2 in 2017 to 11.6 in 2019 (P:<0.001) (Table 7.6). Poultry ownership saw no significant change, with about 43% of households owning at least one chicken. Among these households, almost none vaccinated their chickens against New Castle Disease. However, no action taken for sick chickens decreased from 59% in 2017 to 41% in 2019 (P:0.008) (Table 7.7).

Among those that produced vegetables from their homestead gardens, about one in five sold any in the past year in all three survey rounds. Among those who sold, about two-thirds of households reported to spend the extra money on food (staples) and WASH supplies (e.g. filters) (Table 7.8). About 18% of households in 2019 sold any chickens and about one-third of households with chickens, sold any in the last year. Among households that produced eggs, only 3% reported selling any surplus in the past month (Table 7.9). Similar patterns emerged for selling and use of revenue from other crop and animal production (Table 7.8 and 7.9). The overall trend among those that produced and sold any vegetables, chicken, or eggs saw only 22% of households using revenue for food, and nearly two thirds of revenue for WASH supplies (Table 7.10).

Interactions between household heads (Table 7.11) and mothers (Table 7.12) with agricultural FLWs (livestock and agricultural extension workers) saw no significant changes.

Availability of agricultural/livestock/fisheries producer groups increased from 2017 to 2019 as reported by both male household heads (Table 7.13) and mothers (Table 7.14), each from 20% to 38% (P:<0.001). A similar trend was seen for reported availability of land/forest users' groups, increasing from 65% in 2017 to 75% in 2019 (P:<0.001) among household heads (Table 7.13) and 60% to 75% (P:<0.001) among mothers (Table 7.14). Between 2017 and 2019, the percentage of male household heads participating in decision-making for both horticulture and poultry/processing increased from 46% to 68% (P:<0.001) and from 55% to 61% (P:<0.001) respectively, but saw declines in having input into most or all decisions in the two areas from 74% to 59% (P:<0.001) and 63% to 48% (P:<0.001), respectively (Table 7.15). Mothers also saw significant increases in participation in the decision-making process for both horticulture/high value crop farming and poultry/processing of milk/meat between 2017 and 2019, from 44% to 67% (P:<0.001) and 61% to 66% (P:<0.001) respectively. Similar to household heads, the percentage of mothers having input into most or all of the decisions in these two areas decreased from 52% to 43% (P:<0.001) and from 57% to 51% (P:<0.001), respectively (Table 7.16).

Table 7.1 Household food security status

	2017	2018	2019							
	All HH heads	All HH heads	All HH heads	P-value	P-value	P-value				
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/				
	N=987	N=987	N=988	2018	2019	2019				
	%	%	%							
Household food insecurity (in past	30 days) (HFI	AS)								
Food secure	52.4%	63.9%	72.7%	< 0.001	< 0.001	0.001				
Mildly food insecure	22.5%	20.6%	14.7%							
Moderately food insecure	22.0%	12.0%	11.2%							
Severely food insecure	3.1%	3.6%	1.4%							
Household food insecurity score	2.6 (3.7)	1.8 (3.1	1) 1.4 (2.9)	<0.001	<0.001	0.010				

Table 7.2 Land ownership and use

1.9	able 1.2 Land	wiici sinp and	u usc			
	2017	2018	2019			
	All HH heads	All HH heads	All HH heads	P-	P-value	P-value
	HFP areas	HFP areas	HFP areas	value	2017/	2018/
	N=988	N=986	N=987	2017/	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018		
Owns any agricultural land	98.0%	98.7%	99.0%	0.258	0.015	0.471
Size of land in hectares (among th	ose who own	any)				
Agricultural land size	NΙΛ	0.2 (0.5)	0.2 (0.4)			
(N=966, 971)	NA	0.3 (0.5)	0.3 (0.4)			
0-0.1 hectares	NA	24.4%	22.7%			
0.11-0.2 hectares	NA	24.4%	23.8%			
0.21-0.3 hectares	NA	15.8%	17.4%			
0.31+ hectares	NA	35.4%	36.2%			
Non-agricultural land size (N=973,	NA	0.4 (0.2)	0.1 (0.1)			
977)	INA	0.1 (0.2)	0.1 (0.1)			
0-0.1 hectares	NA	71.7%	77.1%			
0.11-0.2 hectares	NA	13.7%	9.8%			
0.21-0.3 hectares	NA	6.4%	6.7%			
0.31+ hectares	NA	8.2%	6.5%			
Total land size	0 5 (0 0)	0.4 (0.6)	0.4 (0.5)			
(N=968, 966, 971)	0.5 (0.9)	0.4 (0.6)	0.4 (0.5)			
0-0.1 hectares	16.0%	21.4%	20.9%			
0.11-0.2 hectares	21.8%	20.0%	18.9%			
0.21-0.3 hectares	17.8%	13.5%	14.5%			
0.31+ hectares	44.4%	45.1%	45.7%			
Use of land owned (N=788, 785)						
Cultivated Crops	93.9%	95.2%	94.6%			
Kitchen garden	61.8%	69.3%	78.1%	0.140	< 0.001	0.004
Livestock	4.1%	3.8%	5.4%	0.807	0.391	0.465
Decision maker on use of land, if	current use is	for agriculture	e (N=936, 957,	965)		
Male household member	52.1%	49.3%	53.1%	-		
Female household member	47.9%	50.7%	46.9%			
						_

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 7.3 Interactions between VMFs and homestead food production beneficiaries (HFPB)

	2017	2018	2019	_	-	
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	, D		
HFPB group in the ward	9.0%	16.6%	11.5%	0.051	0.343	0.089
Member of HFPB group (among						
those with HFPB in ward, N=89, 153,	36.0%	40.2%	26.3%	0.728	0.067	0.149
114)						
Ever received from graduated (prio	r) HFPBs					
Any input (seeds, chicks, info,	16.7%	15.7%	11.9%	0.702	0.051	0.222
other inputs)				0.702	0.007	O.LLL
Seeds	13.5%	9.7%	7.3%			
Chicks	6.7%	9.9%	6.8%			
Agriculture/HFP-related info	8.8%	4.8%	2.8%			
Other agriculture/HFP inputs	2.2%	1.9%	0.8%			
Households with a child aged 0-2 years who ever received HFP inputs	16.8%	27.2%	21.0%	0.003	0.127	0.084

	2017	2018	2019			
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	, D		
from VMFs and/or graduated HFP						
beneficiaries (N=519, 552, 510)						

beneficiaries (N=519, 552, 510)
Households who ever received HFP inputs from VMFs and/or graduated

16.7% 29.2% 24.1%

HFP beneficiaries

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 7.4 HFP knowledge among household heads

	2017	2018	2019			
	Male HH	Male HH	Male HH	-		
	heads	heads	heads	P-value	P-value	P-value
	HFP areas			2017/	2017/	2018/
				2018	2019	2019
	N=541	N=596	N=571			
Danafita of hamastand nandant	%	%	%			
Benefits of homestead garden*	0.4.404	00.407	= 0.00/			
Improve household food	84.1%	66.4%	50.3%			<0.001
Source of income	67.3%	80.0%	75.1%	0.002	0.032	0.154
Improve diets of children/women	48.4%	73.8%	69.0%	<0.001	<0.001	0.247
Advantages of producing small animals*						
Improve household food	67.8%	<i>54.5%</i>	38.9%	0.008	< 0.001	< 0.001
Source of income	98.5%	97.0%	95.6%	0.156	0.005	0.304
Improve diets of children/women	40.5%	71.8%	66.9%	< 0.001	< 0.001	0.255
Key points for planning a homestead gard	en*					
Proximity to home	N/A	51.3%	41.7%	N/A	N/A	0.049
Ease of watering	N/A	65.4%	65.2%	N/A	N/A	0.932
Plants that grow well in local conditions	N/A	13.8%	18.7%	N/A	N/A	0.125
Plants that improve household nutrition	N/A	7.7%	9.5%	N/A	N/A	0.417
Crops that bring in most income	N/A	10.1%	5.3%	N/A	N/A	0.009
Protection from animals	N/A	61.7%	73.4%	N/A	N/A	0.001
Available space	N/A	16.6%	15.6%	N/A	N/A	0.732
Mean score: homestead garden planning	A 1 / A	0.0 (4.0)	0.0 (4.0)	N I / A	N I / A	0.004
points (0-7)	N/A	2.3 (1.3)	2.3 (1.2)	N/A	N/A	0.801
Good poultry management practices *						
Keep chicken inside a coop	N/A	82.2%	90.4%	N/A	N/A	0.001
Provide quality food	N/A	63.3%	73.4%	N/A	N/A	< 0.001
Vaccinate regularly	N/A	15.4%	19.1%	N/A	N/A	0.228
Mean score: poultry management practices						
(0-3)	N/A	1.6 (0.9)	1.8 (0.7)	N/A	N/A	0.002

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

Table 7.5 HFP knowledge among mothers

Table 7.3 HFF	Kilowicage	, annong m	otilici 3			
	2017	2018	2019	_		
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=985	N=988	N=988	2018	2019	2019
	%	%	%			
Benefits of homestead garden*						
Improve household food	83.3%	62.8%	53.1%	< 0.001	< 0.001	0.018
Source of income	72.8%	81.2%	71.5%	0.033	0.673	0.012
Improve diets of children/women	49.1%	80.1%	67.4%	< 0.001	< 0.001	0.019
Advantages of producing small animals*						
Improve household food	70.0%	54.6%	36.8%	0.004	< 0.001	< 0.001
Source of income	98.3%	96.4%	95.2%	0.034	0.001	0.354
Improve diets of children/women	50.2%	78.3%	68.7%	<0.001	<0.001	0.002
Key points for planning a homestead						
garden*						
Proximity to home	<i>4</i> 5.9%	43.0%	30.6%	0.452	<0.001	0.002
Ease of watering	62.9%	74.7%	63.7%	0.001	0.791	<0.001
Plants that grow well in local conditions	7.6%	8.9%	13.1%	0.549	0.027	0.027
Plants that improve household nutrition	5.9%	7.6%	6.5%	0.253	0.646	0.409
Crops that bring in most income	4.6%	9.5%	4.6%	0.001	0.916	0.006
Protection from animals	56.2%	60.8%	69.7%	0.249	0.001	0.026
Available space	10.1%	15.9%	14.4%	0.040	0.140	0.638
Mean score: homestead garden planning	1.9 (1.2)	2.2 (1.2)	2.0 (1.2)	0.006	0.291	0.055
points (0-7)	1.5 (1.2)	2.2 (1.2)	2.0 (1.2)	0.000	0.231	0.000
Good poultry management practices *						
Keep chicken inside a coop	83.2%	85.4%	86.9%	0.266	0.158	0.534
Provide quality food	64.5%	67.9%	72.1%	0.322	0.012	0.119
Vaccinate regularly	13.9%	11.8%	15.0%	0.422	0.690	0.096
Mean score: poultry management practices (0-3)	1.6 (0.9)	1.7 (0.8)	1.7 (0.8)	0.529	0.042	0.093

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.
*Note: These results will not add to 100% as multiple responses were allowed for this question.

Table 7.6 Homestead gardening practices

i abic i	.o Homestead	gardening p	actices			
	2017	2018	2019			
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	, D		
Vegetables growing in garden/roof/wall	86.7%	87.6%	79.4%	0.633	0007	0.001
Vegetables growing in other land except garden/roof/wall	NA	36.9%	37.4%			
Distance vegetables grown from home (minutes) (among those growing, N=730, 735)	2.9 (5.2)	2.7 (5.5)	2.6 (4.5)			
Arrangement of vegetable garden (among those a	able to observ	/e, N=900, 90	8, 877)		
All the garden is arranged into fixed plots	2.1%	2.9%	8.9%			
Some of the garden is arranged into fixed plots, but some is not	19.2%	29.0%	27.1%			
None of the garden is arranged into fixed plots	68.6%	63.4%	59.9%			

	2017	2018	2019			
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	
	N=986	N=988	N=988	2018	2019	2019
		Mean (SD)/%			2010	2010
Not able to observe	10.1%	4.7%	4.1%			
Length of time vegetable production	101170	111 70	11170			
from homestead garden provides food	5.8 (3.5)	6.2 (3.8)	7.1 (3.7)	0 122	<0.001	0.005
to family (months) (N=900, 914, 928)	0.0 (0.0)	0.2 (0.0)	(0)	0.722	10.007	0.000
Households with homestead gardens						
meeting minimum criteria	7.7%	22.3%	22.1%	<0.001	<0.001	0.938
Nutrient dense vegetables cultivated	d by househo	lds in the prev	vious vear (a	nvwhere	5)	
Vitamin A rich	23.9%	7.4%	6.3%		<0.001	0.450
Dark green leafy vegetable	80.6%	88.2%	86.9%		0.007	0.388
Other vegetable	90.6%	91.5%	91.4%	0.486	0.586	0.931
All nutrient dense vegetable	91.3%	93.0%	91.7%	0.125	0.794	0.250
Nutrient dense vegetable cultivated by		9.9 (5.9)	11.6 (6.5)		< 0.001	<0.001
households in previous year	(/	,	(/			
Crops/vegetables available, by obse	rvation (HFP:	N=808, 862, 8	838)			
Vitamin A rich	•	, ,	•			
Orange Fleshed Sweet Potato	0.3%	0.4%	0.0%			
Pumpkin/squash/pumpkin shoot	54.0%	66.7%	69.2%			
Dark green leafy vegetables						
Broadleaf mustard	7.1%	5.8%	11.9%			
Colocasia	35.5%	36.0%	48.2%			
Other vegetables						
Chili	70.1%	72.3%	79.2%			
Snake gourd	10.5%	15.4%	16.6%			
Brinjal	38.6%	30.3%	33.3%			
Four season beans	26.4%	27.7%	29.2%			
Okra	26.2%	26.8%	23.8%			
Cowpea	21.5%	21.4%	29.5%			
Bitter gourd	21.0%	25.3%	28.9%			
Sponge gourd	11.8%	16.4%	19.5%			
Bottle gourd	14.4%	15.7%	16.8%			
Radish	12.8%	11.8%	21.5%			
Fruits						
Tomato	23.6%	21.1%	23.2%			
White tubers/roots						
Potato	4.1%	6.0%	9.2%			

Table 7.7 Poultry ownership and management

	2017	2018	2019			
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%)		
Poultry ownership						
Has at least 1 chicken	42.9%	47.4%	43.4%	0.110	0.782	0. 098
Number of chickens in the househo	old (N=423, 468	8, 429)				
Less than 5	<i>4</i> 2.8%	37.6%	33.1%	0.144	0.013	0.211
5 to 10	33.8%	38.3%	39.2%	0.225	0.112	0.786
10 and above	23.4%	24.2%	27.7%	0.824	0.235	0.344

	2017	2018	2019			
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%)		
Vaccination with New Castle Disease						
(among those who have any chicken, N=423, 468, 429)	2.3%	1.3%	1.9%	<0.001	<0.001	0.588
Received a <i>Suaahara</i> chicken	16.6%	21.3%	14.5%			
Chicks hatched/regenerated using a Suaahara chicken (N=129, 210, 143)	13.3%	8.1%	10.0%			
Illness in poultry and management						
Any chickens sick in last 1 month						
(among those who have chicken,	19.2%	24.1%	19.7%	<0.001	0.306	0.098
N=423, 543, 513)						
Action for sick chickens						
(among those who had sick						
chickens, N=86, 131, 101)						
No actions	59.3%	46.6%	40.6%	0.135	0.008	0.299
Seek support from livestock service centers	15.1%	15.3%	23.8%	0.981	0.202	0.171
Poultry and production (N=423,						
543, 513)						
Household produced eggs in last 1 month	54.9%	37.9%	47.6%	0.010	0.765	0.004
Number of eggs produced by						
household in last 1 month (among those who produced any, N=232,	20.7 (15.7)	20.4 (16.1)	21.8 (21.0)	0.910	0.591	0.446
206, 245)*		. 4 - 4 - 4 4 1:6		-l : 4l-:- :		

Table 7.8 Income, selling, and use of revenue from crop outputs in the last 12 months

<u> </u>			•			
	2017	2018	2019			
	Mothers	Mothers	Mothers	P-value	P-value	P-value
	HFP areas	HFP areas	HFP areas	2017/	2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	%	%	%			
Vegetable sales in last 12 months among the	hose that p	roduced an	y (N=900, 9	14, 928)	
Sold any	22.9%	19.4%	21.8%	0.221	0.715	0.231
Income (in NPR) earned among those who	sold vegeta	ables (N=17	7, 197)			
0-1500	NA	28.3%	31.5%			
1501-5000	NA	40.7%	31.0%			
5001-9999	NA	6.8%	7.1%			
10000+	NA	24.3%	30.5%			
Use of revenue earned (N=206, 177, 197)						
Food security	60.7%	72.9%	65.5%			
Nutrient-dense food	16.0%	30.5%	19.8%			
Health/FP	13.6%	21.5%	22.3%			
WASH	43.7%	56.5%	55.8%			
Education	18.9%	20.9%	23.9%			
Saving	13.6%	19.8%	15.2%			
Buy clothes	9.2%	10.7%	22.3%			
Other Other	2.9%	3.4%	3.1%			

	2017	2018	2019			
	Mothers	Mothers	Mothers	Divolus	D volus	Divolue
	HFP	Mothers	Mothers			
	areas	HFP areas			2017/	2018/
	N=986	N=988	N=988	2018	2019	2019
	%	%	%			
Vegetable sales in last 12 months among the				01/ 028	1	
Sold any	22.9%	19.4%	21.8%		-	0 221
				0.221	0.715	0.231
Income (in NPR) earned among those who	_	•				
0-1500	NA	28.3%	31.5%			
1501-5000	NA	40.7%	31.0%			
5001-9999	NA	6.8%	7.1%			
10000+	NA	24.3%	30.5%			
Use of revenue earned (N=206, 177, 197)						
Food security	60.7%	72.9%	65.5%			
Nutrient-dense food	16.0%	30.5%	19.8%			
Health/FP	13.6%	21.5%	22.3%			
WASH	43.7%	56.5%	55.8%			
Education	18.9%	20.9%	23.9%			
Saving	13.6%	19.8%	15.2%			
Buy clothes	9.2%	10.7%	22.3%			
Other	2.9%	3.4%	3.1%			
Crop (other than vegetable) sales in last 12				ıced anı	, (N_Q)	5)
Sold any	NA	NA	15.6%	iceu arry) (I 1 –30	J)
Income (in NPR) earned among those who						
0-1500	NA	NA	14.2%			
1501-5000	NA	NA	28.4%			
5001-9999	NA	NA	12.1%			
10000+	NA	NA	45.4%			
Use of revenue earned	INA	INA	45.470			
Food security	NA	NA	58.2%			
Nutrient-dense food	NA	NA	25.5%			
Health/FP	NA	NA	27.0%			
WASH	NA	NA	52.5%			
Education	NA	NA	27.0%			
Saving	NA	NA	27.7%			
Buy clothes	NA	NA	19.2%			
Other	NA	NA	12.1%		/h	
Crop (other than vegetable) sales in last 12			-	iced any	/ (N=90	5)
Sold any	NA	NA (NA	15.6%			
Income (in NPR) earned among those who						
0-1500	NA	NA	14.2%			
1501-5000	NA	NA	28.4%			
5001-9999	NA	NA	12.1%			
10000+	NA	NA	45.4%			
Use of revenue earned						
Food security	NA	NA	58.2%			
Nutrient-dense food	NA	NA	25.5%			
Health/FP	NA	NA	27.0%			
WASH	NA	NA	52.5%			
Education	NA	NA	27.0%			
Saving	NA	NA	27.7%			
Buy clothes	NA	NA	19.2%			
Other	NA	NA	12.1%			

Table 7.9 Total income, selling, and use of	of revenue f	rom poult	ry outputs	in the last 12 months
	2017	2018	2019	
	Mothers HFP areas N=986	Mothers HFP areas	Mothers HFP areas N=988	P-value P-value P-value 2017/ 2017/ 2018/ 2018 2019 2019
	%	N=988 %	%	2010 2019 2019
Chicken sales in last 12 months	70	70	70	
Sold any	15.6%	18.5%	17.6%	
Sold any, among those with any chickens				
in the household (N=423, 468, 429)	33.6%	34.4%	35.9%	
Number of chicks/chickens sold in last 12		()	()	
months	7.9 (163.1)	2.7 (34.0)	5.7 (73.8)	
Income (in NPR) earned among those who	sold chicke	ns (N=183,	199)	
0-1500	NA	22.4%	21.3%	
1501-5000	NA	52.5%	40.8%	
5001-9999	NA	16.4%	17.8%	
10000+	NA	8.7%	20.1%	
Use of revenue earned (N=154, 183, 174)				
Food security	59.1%	62.3%	65.5%	
Nutrient-dense food	24.7%	26.8%	17.8%	
Health/FP	14.3%	18.0%	25.3%	
WASH	44.2%	42.6%	52.3%	
Education	20.8%	15.9%	24.1%	
Saving	12.3%	17.5%	24.1%	
Buy clothes	9.1%	9.3%	14.9%	
Other	3.9%	2.2%	8.6%	
Animal/poultry (non-chicken) sales in last 1				duced any (N=905)
Sold any	NA	ŇA	29.6%	,
Income (in NPR) earned among those that s		mal/poultr		
0-1500	NÁ	NA	´ 1.9% ´	
1501-5000	NA	NA	13.8%	
5001-9999	NA	NA	20.9%	
10000+	NA	NA	64.3%	
Use of revenue (N=268)				
Food security	NA	NA	53.4%	
Nutrient-dense food	NA	NA	17.5%	
Health/FP	NA	NA	22.4%	
WASH	NA	NA	42.2%	
Education	NA	NA	23.5%	
Saving	NA	NA	28.7%	
Buy clothes	NA	NA	25.8%	
Other	NA	NA	9.8%	
Egg sales in last month among those that p	roduced an			513)
Sold any	4.3%	2.0%	3.1%	,
Use of revenue (N=18, 11, 16)				
Food security	33.3%	54.6%	50.09	%
Nutrient-dense food	33.3%	18.2%	31.3	%
Health/FP	5.6%	0.0%	12.5	
WASH	33.3%	45.5%	43.8	
Education	16.7%	18.2%	18.8	
Saving	NA	0.0%	6.3%	
Buy clothes	5.6%	0.0%	6.3%	%

*Note: These sub-indicators will not add to 100% as this question allowed for multiple responses to be provided

Table 7.10 Total income, selling, and use of revenue from HFP outputs (vegetables and chickens) in the last 12 months

in t	ne last 12 n	nonths				
	2017	2018	2019			
	Mothers HFP areas N=986	Mothers HFP areas N=988	Mothers HFP areas N=988		P-value 2017/ 2019	P-value 2018/ 2019
	%	%	%			
Vegetable/chicken sales in last 12 months				(N-304	307)	
Income (in NPR) earned	, among the	osc that pro-	adoca arry	(14-50-	301)	
0-1500	NA	20.7%	21.5%			
1501-5000	NA	44.4%	35.5%			
5001-9999	NA	13.5%	12.4%			
10000+	NA	21.4%	30.6%			
Use of revenue (N=316, 304, 307)						
Food security	62.7%	72.4%	67.4%			
Nutrient-dense food	21.8%	31.3%	20.9%	0.050	0.815	0.010
Health/FP	14.6%	21.4%	25.7%			
WASH	45.3%	52.0%	57.3%			
Education	21.5%	20.4%	26.4%			
Saving	8.9%	11.5%	9.8%			
Buy clothes	9.8%	11.8%	22.2%			
Other	1.9%	2.0%	2.0%			
Vegetable/chicken/egg sales in last 12 mo	nths, amon	g those that	produced	any		
Use of revenue (N=321, 304, 311)						
Food security	62.6%	72.7%	66.9%			
Nutrient-dense food	22.7%	31.9%	21.5%	0.060	0.778	0.011
Health/FP	14.6%	21.4%	25.7%			
WASH	45.5%	52.0%	57.6%			
Education	21.5%	20.7%	27.0%			
Saving	8.9%	11.5%	10.0%			
Buy clothes	10.0%	11.8%	22.2%			
Other	1.9%	2.0%	2.3%			
Note: Italian indicator that statistical testing	+- +	+ +b d:ff		J : + : :	11 1	,

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 7.11 Interactions of household heads with agriculture FLWs

				-		
	2017	2018	2019	D volue	P-value	D value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1894	N=2142	N=2129	2017/	2017/	2016/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Met at all in last 6 months						
Livestock extension worker	25.6%	23.3%	23.7%	0.187	0.266	0.802
Agricultural extension worker	11.7%	8.9%	11.0%	0.005	0.563	0.073

Number of times met in last 6 months

	N=1894	2018 All HH heads N=2142 Mean (SD)/%	N=2129	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
Livestock extension worker (N=484, 499, 504)	2.0 (1.8)	1.9 (2.0)	1.8 (1.8)			
Agricultural extension worker (N=221, 191, 234)	2.5 (2.6)	1.8 (1.5)	1.8 (1.4)			

Table 7.12 Interactions of mothers with agriculture FLWs

	2017	2018	2019	D volue	P-value	D volue
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3637	N=3647	N=3646	2017	2017	2010/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Met at all in last 6 months						
Livestock extension worker	15.8%	15.7%	16.3%	0.904	0.733	0.656
Agricultural extension worker	7.3%	7.1%	6.7%	0.775	0.441	0.595
Number of times met in last 6 mon	ths					
Livestock extension worker (N=575, 572, 593)	1.6 (1.0)	1.4 (0.9)	1.5 (1.0)			
Agricultural extension worker (N=267, 260, 243)	1.9 (1.9)	1.7 (1.2)	1.6 (1.1)			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 7.13 Groups available in the community, as reported by male household heads

	2017	2018	2019						
	Male HH	Male HH	Male HH	P-value	P-value	P-value			
	heads	heads	heads	2017/	2017/	2018/			
	N=1733	N=1792	N=1767	2018	2019	2019			
	%	%	%						
Agricultural/livestock/fisheries producer									
group (including marketing groups but	19.7%	30.1%	37.6%	< 0.001	< 0.001	0.001			
excluding HFP beneficiary group)									
Land/forest users' groups	65.4%	74.3%	75.4%	<0.001	<0.001	0.517			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 7.14 Groups available in the community, as reported by mothers

2017	2018	2019	D value	D volue	D value
Mothers	Mothers	Mothers			2018/
N=3642	N=3648	N=3648			
%	%	%	2018	2019	2019
19.8%	29.3%	38.2%	< 0.001	< 0.001	< 0.001
59.5%	72.2%	74.7%	<0.001	<0.001	0.050
	Mothers N=3642 %	Mothers Mothers N=3642 % % 19.8% 29.3%	Mothers Mothers Mothers Mothers N=3642 N=3648 N=3648 % % %	Mothers Mothers Mothers N=3642 N=3648 N=3648 % Solution 19.8% 29.3% 38.2% <0.001	Mothers N=3642 % Mothers N=3648 % Mothers N=3648 % P-value 2017/ 2017/ 2018 19.8% 29.3% 38.2% <0.001

Table 7.15 Participation and decision-making of household heads in agriculture related activities (among participants who stated a decision was made)

(among participants who stated a decision was made)										
2017	2018	2019								
Male HH	Male HH	Male HH	P-value	P-value	P-value					
heads	heads	heads	2017/	2017/	2018/					
N=1733	N=1792	N=1767	2018	2019	2019					
%	%	%								
45.8%	74.5%	68.3%	< 0.001	< 0.001	0.006					
55.4%	60.9%	61.4%	0.001	< 0.001	0.803					
1335, 1206)									
2.0%	2.1%	3.0%								
23.7%	32.1%	37.8%								
74.2%	65.8%	59.2%	< 0.001	< 0.001	0.001					
gement (N	=953, 1087	7, 1079)								
4.2%	5.5%	6.5%								
32.4%	43.1%	45.2%								
63.4%	51.4%	48.3%	<0.001	<0.001	0.184					
	2017 Male HH heads N=1733 % 45.8% 55.4% 1335, 1206 2.0% 23.7% 74.2% gement (Nation of the second o	2017 2018 Male HH Male HH heads heads N=1733 N=1792 % % 45.8% 74.5% 55.4% 60.9% 1335, 1206) 2.0% 2.1% 23.7% 32.1% 74.2% 65.8% gement (N=953, 1087) 4.2% 5.5% 32.4% 43.1%	2017 2018 2019 Male HH Male HH Male HH heads heads heads N=1733 N=1792 N=1767 % % 45.8% 74.5% 68.3% 55.4% 60.9% 61.4% 1335, 1206) 2.1% 3.0% 23.7% 32.1% 37.8% 74.2% 65.8% 59.2% gement (N=953, 1087, 1079) 4.2% 5.5% 6.5% 32.4% 43.1% 45.2%	2017 2018 2019 Male HH Male HH Male HH P-value heads heads 2017/ N=1733 N=1792 N=1767 2018 % % % 45.8% 74.5% 68.3% <0.001	2017 2018 2019 Male HH Male HH Male HH P-value					

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 7.16 Participation and decision-making of mothers in agriculture related activities (among participants who stated a decision was made)

participante interestate a decision inde indee,									
	2017	2018	2019	D volue	P-value	D volue			
	Mothers	Mothers	Mothers	-r-value 2017/					
	N=3642	N=3648	N=3648		2017/	2018/			
	%	%	%	2018	2019	2019			
Participation on decision making process									
Horticulture/high value crop farming	43.7%	75.7%	67.2%	< 0.001	< 0.001	< 0.001			
Poultry and processing of milk and/or meat	60.7%	65.8%	65.8%	< 0.001	< 0.001	0.979			
Decision making in horticulture/high value cre	op farming	(N=1579,	2759, 245	2)		<u>.</u>			
Little to no input	7.5%	6.5%	7.4%						
Input into some decisions	40.3%	43.3%	49.1%						
Input into most or all decisions	52.3%	50.3%	43.4%	0.338	< 0.001	< 0.001			
Decision making in poultry rearing and mana	gement (N:	=2187, 239	2, 2388)						
Little to no input	7.8%	6.9%	7.0%						
Input into some decisions	35.6%	41.6%	42.5%						
Input into most or all decisions	56.6%	51.5%	50.5%	0.002	<0.001	0.534			

8. Results: SBCC

Awareness of *Suaahara* and platforms used for behavior change, is the first step to achieving key outcomes. Among household heads, the prevalence of having ever heard of *Suaahara* increased from 30% in 2017 to 60% in 2019 (P:<0.001) (Table 8.1) and among mothers from 41% in 2017 to 84% in 2019 (P:<0.001) (Table 8.2). The percentage of household heads reporting to have ever received a home visit by *Suaahara* between 2017 and 2019 increased from 7% to 13% (P:<0.001) (Table 8.1) and mothers from 9% to 21% (P:<0.001) (Table 8.2).

Mothers reporting to having met an FCHV/HMG representative in the last 6 months rose from 69% in 2017 to 80% in 2019 (P:<0.001), while household heads saw no significant change (Table 8.4 and Table 8.3) and ever visited at home increased from 50% in 2017 to 55% in 2019 (P:0.040) (Table 8.4), respectively. In the sub-group of mothers with children aged 0-2 years, there was significant change in the prevalence of mothers contacting FCHVs in the last month from 53% in 2017 to 61% in 2019 (P:<0.001) (Table 8.4). The percentage of mothers reporting availability of an FCHV-facilitated group (HMG or other) in the community increased from 65% in 2017 to 83% in 2019 (P:<0.001), while the percentage of mothers actively participating in the FCHV-facilitated group, among those who reported its existence, declined from 43% in 2017 to 30% in 2019 (P:<0.001) (Table 8.5).

The prevalence of household heads participating in *Suaahara* activities has increased from 3% to 5% in 2019 (P:<0.001), but overall remains incredibly low. However, about half of mothers reported to participate in *Suaahara* activities. Among them, the most common activity for participation in 2017, 2018, and 2019 was food demonstrations (Tables 8.6 and 8.7).

Radio ownership has declined to less than one in five household heads and even fewer mothers, and radio listenership at least once a month has similarly declined from 56% in 2017 to 51% in 2019 (P:0:003) among household heads (Table 8.8) with no real change among mothers (Table 8.9). Between 2017 and 2019, the percentage of household heads who had ever heard of Bhanchhin Aama increased from 21% to 44% (P:<0.001) and the prevalence of having ever listened to the program increased from 15% to 28% (P:<0.001). Among those who had ever heard of it, nearly two-thirds had listened and among those who have ever listened, 4 in 10 reported to listen monthly. We found similar trends although slightly higher, when limiting the sample to those who own a radio (Table 8.10). Among mothers, the prevalence of having ever heard of *Bhanchhin* Aama increased from 31% in 2017 to 68% in 2019 (P:<0.001), having ever listened to the program increased from 22% in 2017 to 51% in 2019 (P:<0.001), and listening once a month increased from 8% in 2017 to 20% in 2019 (P:<0.001). Among mothers who have heard about the program, three-fourths reported to have ever listened to the program in 2019 and among those who ever listened, about 4 of 10 listen monthly (Table 8.11). In the 2019 survey, we asked mothers and household heads specifically about the device used to listen to Bhancchin Aama, and the most common devices were their own household radio and their mobile phone (Table 8.10 and 8.11).

Almost all households now have mobile phone access, with mothers' sole personal ownership of a mobile phone having increased from 73% in 2017 to 88% in 2019 (P:<0.001) and the prevalence of owning her smartphone similarly increased from 50% in 2018 to 57% in 2019 (P:<0.001). The prevalence of mothers reporting having access to a smartphone increased from 52% in 2017 to 72% in 2019 (P:<0.001) (Table 8.13). Among household heads, mobile phone sole ownership increased from 62% in 2017 to 84% in 2019 (P:<0.001) and sole smart phone ownership from 44% in 2018 to 50% in 2019 (P:<0.0011) (Table 8.12). While very few mothers with children under two years reported receiving health/nutrition-related text messages on their own mobile in the last

month, the percentage increased from 2% in 2017 to 15% in 2019 (P:<0.001), with the average number of texts being 2 in the last month (Table 8.16). An even fewer number of household heads reported receiving health/nutrition-related text messages on their own mobile in the last month, but the percentage increased from 3% in 2017 to 5% in 2019 (P:<0.001) (Table 8.14).

Among household heads, reported availability of both credit/microfinance and civic/charitable groups increased significantly between 2017 and 2019, from 60% to 805 (P:<0.001) and from 20% to 40% (P:<0000), respectively (Table 8.17). Mothers reported similar increases in availability as well (Table 8.18). By 2019, both mothers and household heads reported an average of 4 out of 7 groups available in the community (Tables 8.17 and 8.18).

Table 8.1 Awareness of Suaahara and interactions with FLWs among household heads

	2017	2018	2019	P-value	D_value	D-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1894	N=2142	N=2129	2017	2017	2010/
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Awareness						
Ever heard of Suaahara	29.6%	47.7%	60.3%	<0.001	<0.001	<0.001
Interpersonal communication: FLW e	xposure					
Met Suaahara FLWs (e.g. field						
supervisor, community nutrition/WASH	6.5%	10.0%	9.3%	0.010	0.056	0.465
volunteer, village model farmer) in the	0.570	10.070	9.570	0.010	0.000	0.400
last 6 months						
No. of times met with Suaahara FLWs	1.5 (1.0)	1.8 (1.4)	1.7 (1.1)			
in the last 6 months (N=123, 218, 197)	1.5 (1.0)	1.0 (1.4)	1.7 (1.1)			
Ever visited at home by Suaahara staff						
(Field Supervisor, community	6.8%	11.0%	13.3%	0.001	<0.001	0.102
nutrition/WASH volunteer, etc.)						
Number of times visited at home by						
Suaahara staff in the last 6 months	0.9 (0.8)	1.2 (2.4)	1.0 (3.5)			
(N=128, 236)						
Spoke with Suaahara staff during last	60.9%	69.1%	65.5%	0.090	0.410	0.351
visit (N=128, 236, 284)	00.570	03.170	00.070	0.000	0.410	0.001
Ever contact with Suaahara staff	4.0%	8.5%	10.9%	<0.001	<0.001	0.027
outside of home/HMG	4.070	0.070	10.070	\0.00 1	\0.00 1	0.027
Number of times contact with Suaahara						
staff other than home visit or HMG	1.1 (1.2)	1.9 (6.7)	1.2 (4.6)			
meeting in last 6 months (N=76, 181,	1.1 (1.2)	1.0 (0.7)	1.2 (4.0)			
232)		- 444ll: ff		- 41-1-1		

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.2 Awareness of Suaahara and interactions with FLWs among mothers

	2017	2018	2019	-D volue	D volue	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3637	N=3647	N=3646	2017/	2017/	2016/
	Mean (SD)/%	6 Mean (SD)/%	Mean (SD)/%	2010	2019	2019
Awareness						
Ever heard of Suaahara	40.8%	69.8%	84.0%	<0.001	< 0.001	<0.001
Interpersonal communication: FLW ex	xposure					
Met Suaahara FLWs (e.g. field supervisor, community nutrition/WASH volunteer, village model farmer) in the last 6 months	10.8%	24.8%	32.2%	<0.001	<0.001	0.001

	2017	2019	2010			
	2017 Mothers	2018 Mothers	2019 Mothers	P-value	P-value	P-value
	N=3637	N=3647	N=3646	2017/	2017/	2018/
			Mean (SD)/%	2018	2019	2019
No. of times met with Suaahara FLWs	iviean (SD)/ /o	ivicali (SD)/ /6	iviean (SD)/ /6			
in the last 6 months (N=393, 904, 1174)	1.5 (1.0)	1.9 (1.3)	1.9 (1.4)			
Ever visited at home by Suaahara staff (Field Supervisor, community nutrition/WASH volunteer, etc.)	9.1%	19.8%	21.4%	<0.001	<0.001	0.411
Number of times visited at home by						
Suaahara staff in the last 6 months (N=330, 721, 779)	0.9 (0.7)	1.0 (2.2)	0.7 (0.9)	0.265	0.010	0.018
Length of time (weeks) since last visited						
at home by <i>Suaahara</i> staff (N=330, 721, 779)	16.7 (19.6)	24.7 (18.7)	29.7 (19.6)			
Length of time spent last time a						
Suaahara staff visited at home	27.7 (28.0)	30.7 (26.6)	35.1 (30)			
(minutes) (N= 330, 721, 779) Spoke with Suaahara staff during last	vicit (N_220	721 770)				
Self	87.3%	92.4%	95.6%	0.020	<0.001	0.020
Spouse	16.7%	14.3%	93.0 <i>%</i> 14.1%	0.020	<0.001	0.020
Mother/mother in law	22.1%	25.7%	26.2%			
Father/father in law	10.9%	6.9%	11.0%			
Another adult HH member	5.5%	4.6%	6.7%			
Another child HH member	0.9%	0.3%	1.3%			
Adolescent	2.1%	1.3%	1.8%			
Spoke with any adult other than						
mother	45.2%	42.0%	43.1%	0.367	0.568	0.693
Ever contact with Suaahara staff	9.5%	19.4%	34.9%	<0.001	<0.001	<0.001
outside of home/HMG Number of times contact with Suaahara						
staff other than home visit or HMG						
	0.7 (1.0)	1.1 (1.2)	0.9 (1.8)			
meeting in the last 6 months (N=346, 706, 1274)						
Length of time (weeks) since last						
contact with Suaahra staff other than						
home visit or HMG meeting (N= 346,	41.6 (31.8)	24.6 (25.9)	28.5 (25.2)			
706, 1274)						

Table 8.3 Interactions of household heads with FCHVs

	N=1894	2018 All HH heads N=2142 Mean (SD)/%	All HH heads N=2129	P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
Met FCHV/HMG representative at all in last 6 months No. of times met with FCHV/HMG	32.5%	34.4%	36.0%	0.270	0.059	0.381
representative in last 6 months (N=616, 737, 766)	2.3 (2.2)	2.3 (1.7)	2.2 (1.6)			
Ever visited at home by FCHV	35.5%	42.3%	40.0%	0.001	0.043	0.314

Number of times visited at home by				
FCHV in last 6 months (N=672, 906,	1.7 (1.9)	1.5 (3.2)	1.3 (2.1)	
852)				
Spoke with FCHV during last visit	46.9%	54.0%	57.6%	
(N=672, 622, 852)	40.976	34.070	37.076	
Ever contact with FCHV outside of	27.7%	29.0%	37.7%	0.550 <0.001 <0.001
home/HMG	21.1/0	29.070	37.770	0.550 <0.001 <0.001
Number of times contact with FCHV				
other than home visit or HMG meeting	2.2 (3.8)	1.9 (5.0)	1.8 (5.1)	
in last 6 months (N=524, 621, 803)				
			•	11 (11 1 11 4 1

Table 8.4 Interactions of mothers with FCHVs

l able 8.4 Int	eractions of r	notners with	FCHVS			
	2017	2018	2019	D value	D value	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3637	N=3647	N=3646		2017/	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018	2019	2019
Met FCHV/HMG representative at all in	69.0%	74.2%	80.2%	-0.001	<0.001	0.001
last 6 months	09.076	14.2 /0	00.2 /0	<0.001	<0.001	0.001
No. of times met with FCHV/HMG						
representative in last 6 months (N=2509,	2.7 (2.0)	3.0 (2.2)	3.1 (2.3)			
2705, 2923)						
Ever visited at home by FCHV	50.4%	53.7%	54.8%	0.064	0.040	0.587
Number of times visited at home by						
FCHV in last 6 months (N=1832, 1957,	1.4 (1.5)	1.3 (1.3)	1.2 (1.3)			
1998)	` ,	` ,	` ,			
Length of time (weeks) since last visited	40.0 (00.0)	40.0 (00.4)	20.0 (24.2)			
at home by FCHV (N=1832, 1957, 1998)	18.9 (26.3)	19.6 (23.1)	20.6 (24.3)			
Length of time spent last time FCHV						
visited at home (minutes) (N=1832,	18.5 (20.3)	19.3 (18.7)	19.2 (18.6)			
1957, 1998)	,	,	,			
Spoke with FCHV during last visit						
(N=1832, 1957, 1998) *						
Self	93.5%	95.9%	96.9%			
Spouse	11.5%	12.4%	9.8%			
Mother/mother in law	29.6%	30.2%	29.8%			
father/father in law	7.1%	7.4%	8.3%			
Another adult HH member	3.5%	4.7%	5.7%			
Another child HH member	0.7%	1.2%	1.6%			
Adolescent	1.5%	1.2%	2.0%			
Spoke with any adult other than	40.40/	40.00/	40.40/	0.000	0.440	0.040
mother	<i>4</i> 2.1%	42.9%	40.4%	0.690	0.419	0.243
Ever contact with FCHV outside of	44.40/	E4 40/	CO 40/	.0.004	.0.004	.0.004
home/HMG	44.1%	51.1%	60.4%	<0.001	<0.001	<0.001
Number of times contact with FCHV						
other than home visit or HMG meeting in	2.0 (2.3)	2.1 (2.1)	1.9 (1.7)			
last 6 months (N=1602, 1865, 2201)	()	,	,			
Length of time (weeks) since last contact						
with FCHV other than home visit or HMG	11.3 (14.2)	12.1 (14.7)	13.1 (14.4)			
meeting (N=1602, 1865, 2201)	···-/	()	2 ()			
Mother with a child aged 0-2 years who						
had contact with the FCHV in the	52.5%	58.5%	60.9%	0.002	< 0.001	0.199
previous month (N=1848, 1909, 1826)	0070	22.070	22.070	0.002		000
provided month [11-1010, 1000, 1020]						

*Note: These results will not add to 100% as multiple responses were allowed for this question.

Table 8.5 Participation in health mothers' groups

i abio oio i ai aoipanoii iii iioanii iioanoi gi oapo							
	2017	2018	2019	.D. voluo	P-value	D value	
	Mothers	Mothers	Mothers	2017/	2017/	2018/	
	N=3642	N=3648	N=3646	2017/	2017/		
	%	%	%	2016	2019	2019	
FCHV facilitated group exists in the community	64.6%	72.3%	82.7%	<0.001	<0.001	<0.001	
Active member of the FCHV facilitated group (N=2353, 2639, 3015)	43.0%	37.7%	30.0%	0.002	<0.001	<0.001	
Active member ever participated in HMG group (N=994, 905)	NA	90.0%	96.7%	NA	NA	<0.001	

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.6 Male participation in Suaahara activities, reported by household heads

Table 0.0 Male participatio	II III Suaariara	activities, rep	ported by not	isenoiu	Heaus	
	2017	2018	2019	-D valua	P-value	D value
	All HH heads N=1894 %	All HH heads N=2142 %	All HH heads N=2129 %	2017/ 2018	2017/ 2019	2018/ 2019
Any male household member participated in any Suaahara activity	N/A	19.2%	21.6%	N/A	N/A	0.213
Participation in Suaahara activities, other than group meetings	2.6%	4.4%	5.0%	0.002	<0.001	0.438
Specific other activities						
Food demonstrations/Poshan Chauttari	1.5%	4.2%	4.6%			
Key life events	0.1%	0.5%	0.6%			
Triggering sessions	0.1%	0.1%	0.4%			
Day celebrations	0.2%	0.2%	0.1%			
Specific other activities, among tho	se who partic	ipated in any	(N= 50, 95, 10	6)*		
Food demonstrations/Poshan Chauttari	58.0%	87.5%	99.8%			
Key life events	2.0%	10.5%	11.3%			
Triggering sessions	2.0%	1.1%	7.6%			
Day celebrations	8.0%	4.2%	2.8%			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

*Note: These results will not add to 100% as multiple responses were allowed for this question.

Table 8.7 Male participation in Suaahara activities, reported by mothers

	2017 Mothers N=3637 %	2018 Mothers N=3647 %	2019 Mothers N=3646 %	-P-value 2017/ 2018	P-value 2017/ 2019	P-value 2018/ 2019
Any male household member participated in any Suaahara activitiy	NA	18.1%	18.4%	NA	NA	0.868
Participation in Suaahara activities, other than group meetings	14.3%	31.3%	47.4%	<0.001	<0.001	<0.001
Specific other activities Food demonstrations/Poshan Chauttari Key life events Triggering sessions	12.3% 0.4% 0.1%	30.7% 3.3% 0.8%	46.8% 5.2% 3.3%			

	2017	2018	2019	-D voluo	D valua	P-value
	Mothers	Mothers	Mothers		2017/	2018/
	N=3637	N=3647	N=3646	2017/		
	%	%	%	2018	2019	2019
Day celebrations	0.5%	1.3%	0.8%			
Specific other activities, among those who par	ticipated ir	n any (N=	519, 1142	2, 1727)	k	
Food demonstrations/Poshan Chauttari	86.1%	98.0%	98.7%	-		
Key life events	2.5%	10.6%	11.1%			
Triggering sessions	0.6%	2.6%	7.0%			
Day celebrations	3.3%	4.2%	1.6%			

Table 8.8 Radio listening device ownership and use among household heads

			•			
	2017	2018	2019	.D. voluo	D value	P-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1894	N=2141	N=2129	2017/	2017/	2019
	%	%	%	2016	2019	2019
Radio listening device ownership						
None	NA	22.5%	14.3%			
Radio	NA	23.3%	18.2%			
Mobile phone	NA	46.5%	57.4%			
Both radio and mobile phone	NA	7.4%	9.9%			
Other	NA	0.3%	0.2%			
Listen to the radio at least once a month	56.0%	45.0%	50.6%	<0.001	0.003	0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.9 Radio listening device ownership and use among mothers

	2017	2018	2019	D volue	P-value	D volue
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=3637	N=3647	N=3646	2017/	2017/	2016/
	%	%	%	2010	2019	2019
Radio listening device ownership						
None	NA	18.1%	12.0%			
Radio	NA	15.7%	12.5%			
Mobile phone	NA	58.6%	65.1%			
Both radio and mobile phone	NA	7.4%	10.1%			
Other	NA	0.2%	0.3%			
Listens to the radio at least once a month	44.9%	43.4%	48.0%	0.279	0.177	0.036

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.10 Bhanchhin Aama (BA) exposure among household heads

	2017	2018	2019	-P-value	Divolue	Divolue				
	N=1894	All HH heads N=2141	N=2129	2017/ 2018	2017/ 2019	2018/ 2019				
	%	%	%							
Exposure to BA										
Ever heard of BA	20.7%	32.8%	43.8%	< 0.001	< 0.001	< 0.001				
Ever listened to BA	15.3%	24.8%	28.3%	< 0.001	< 0.001	0.010				
Listened at least once a month	5.6%	10.7%	11.1%	< 0.001	< 0.001	0.659				

^{*}Note: These results will not add to 100% as multiple responses were allowed for this question.

	2017	2018	2019	-P-value	P-value	P-value
	All HH heads	All HH heads	All HH heads	2017/	2017/	2018/
	N=1894	N=2141	N=2129	2017/	2017	2019
	%	%	%	2010	2019	2019
Voltage drop in exposure						
Ever listened to BA among ever	70.00/	7 5 40/	04.00/	0.007	0.000	0.004
heard (N=391, 703, 933)	73.9%	75.4%	64.6%	0.667	0.003	<0.001
Listened at least once a month						
among ever listened (N=289,	36.7%	43.2%	39.3%	0.067	0.484	0.194
530, 603)						
Exposure, among those who own	ed radio lister	ning devices* ((N= 688, 1659,	1824)		
Ever heard of BA	31.7%	38.6%	47.9%	ŃÁ	NA	< 0.001
Ever listened to BA	24.7%	29.4%	31.7%	NA	NA	0.157
Listened at least once a month	10.8%	13.7%	12.8%	NA	NA	0.493
Voltage drop, among those who o	wn a radio lis	tening device				
Ever listened to BA among ever		_	00.00/	A / A	A / A	0.004
heard (N=218, 641, 873)	78.0%	76.1%	66.3%	NA	NA	<0.001
Listened at least once a month						
among ever listened (N= 170,	43.5%	46.5%	40.4%	NA	NA	0.056
488, 579)						
Listening to Bhanchhin Aama by	device (N=238	3)				
HH radio	NÀ	NA	60.1%			
Someone else /HMG radio	NA	NA	5.9%			
Mobile phone	NA	NA	38.2%			
Facebook	NA	NA	0.8%			
Encourage anyone to listen to BA in	NΙΔ	10.40/				
last 1 month (N=530, 603)	NA	10.4%	10.5%			

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.
*In 2017, questions related to access of specific radio listening devices were not asked; values are

Table 8.11 Bhanchhin Aama (BA) exposure among mothers

Table 6.11 Bhahamm Aama (BA) exposare among modicis						
	2017	2018	2019	D-value	P-value	D-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3637	N=3647	N=3646			
	%	%	%	2018	2019	2019
Exposure to BA						
Ever heard of BA	31.1%	52.9%	67.5%	< 0.001	< 0.001	< 0.001
Ever listened to BA	21.7%	39.0%	50.6%	< 0.001	< 0.001	< 0.001
Listened at least once a month	7.9%	18.3%	20.0%	< 0.001	< 0.001	0.275
Voltage drop for exposure						
Ever listened to BA among ever heard	69.8%	73.8%	74.9%	0.125	0.027	0.559
(N=1132, 1929, 2462)	09.07	73.0%	14.370	0.123	0.027	0.559
Listened at least once a month among ever	36.3%	46.9%	39.5%	<0.001	0.165	0.001
listened (N= 790, 1424, 1845)	30.3%	40.9%	39.5%	<0.001	0.103	0.001
Exposure, among those who owned radio lister	ning devic	es (N=298	86, 3207)			
Ever heard of BA	NA	58.1%	70.9%	NA	NA	<0.001
Ever listened to BA	NA	44.0%	54.4%	NA	NA	<0.001
Listened at least once a month	NA	21.8%	22.3%	NA	NA	0.797
Voltage drop, among those who own a radio lis	tening dev	/ice				
Ever listened to BA among ever heard	NA	75.6%	76.7%	NA	NA	0.570
(N=1736, 2272)	IVA	15.0%	70.7%	IVA	IVA	0.370

^{*}In 2017, questions related to access of specific radio listening devices were not asked; values are instead calculated based on household radio access. Due to the varied calculation, 2017 is not included in significance testing.

	2017	2018	2019	D-value	P-value	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3637	N=3647	N=3646	2017/	2017/	2019
	%	%	%	2010	2019	2019
Listened at least once a month among ever	NA	49.7%	40.9%	NA	NA	<0.001
listened (N= 1313, 1744)	IVA	49.7 /0	40.370	IVA	IVA	VO.001
Listening to Bhancchin Aama by device (N=613)					
HH radio	NA	NA	45.5%			
Someone else /HMG radio	NA	NA	7.2%			
Mobile phone	NA	NA	51.7%			
Facebook	NA	NA	0.8%			
Encourage anyone to listen to BA in last 1 month (N=1424, 1845)	NA	11.2%	12.3%			
·						

Table 8.12 Phone access/use among household heads

	2017	2018	2019	D volue	D volue	P-value					
	All HH Heads	All HH Heads	All HH Heads	2017/	2017/	2018/					
	N=1894	N=2141	N=2129	2017	2017	2010/					
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2010	2010					
Household mobile phone access	96.4%	99.2%	99.4%								
(N=1898, 3648, 3648)	61.5%	80.7%	84.3%	<0.001	<0.001	0.004					
Personal mobile phone ownership											
Access to a HH mobile	NA	72.2%	78.8%	NA	NA	<0.001					
Personal smartphone ownership	NA	43.8%	49.5%	NA	NA	0.001					
Smart phone access (own or HH member) (N=2242, 2617, 3626)	40.1%	35.8%	40.3%	0.005	0.926	<0.001					

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.13 Phone access/use among mothers

	2017	2018	2019	-P-value	D volue	D volue		
	Mothers	Mothers	Mothers	2017/	2017/	2018/		
	N=3642	N=3647	N=3646					
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2018	2019	2019		
Personal mobile phone ownership	72.9%	83.5%	88.2%	<0.001	<0.001	<0.001		
Access to a HH mobile	69.1%	61.9%	63.5%	< 0.001	< 0.001	< 0.001		
Personal smartphone ownership	NA	50.0%	56.5%	NA	NA	< 0.001		
Smart phone access (own or HH member) (N=2512, 3546, 3576)	51.7%	66.8%	71.8%	<0.001	<0.001	0.002		

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.14 SMS exposure among household heads

Table 6.14 Sino exposure among nousehold neads									
	2017	2018	2019	D volue	D volue	P-value			
	All HH Heads	All HH Heads	All HH Heads	2017/	2017/	2018/			
	N=1894	N=2141	N=2129	2017/	2017/	2010/			
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2013	2013			
Received any health/nutrition texts	in last 1 mont	:h							
On own mobile (N=1167, 1728, 1795)	2.6%	2.0%	5.1%	0.380	0.005	< 0.001			
On HH mobile (N=1962, 1967)	NA	1.2%	4.7%	NA	NA	<0.001			
Number of health/nutrition texts rec	eived in last '	1 month							
Own mobile (N=36, 35, 88)	2.5 (1.3)	1.9 (1.3)	1.7 (1.0)	0.090	0.001	0.276			
	2017	2018	2019	P-value	P-value	P-value			

	N=1894	N=2141	N=2129 Mean (SD)/%	2017/ 2018	2017/ 2019	2018/ 2019
HH member mobile (N=23, 84)	NA	1.9 (1.2)	1.7 (0.9)	NA	NA	0.808
Family member shared messages	NA	87.0%	85.0%	NA	NA	0.808

Table 8.15 SMS exposure among mothers

	2017	2018	2019	D volue	D volue	P-value
	Mother	Mother	Mothers	2017/	2017/	2018/
	N=2861	N=3046	N=3217	2017/	2017/	2019
	Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2016	2019	2019
Received any health/nutrition texts						
in last 1 month						
On own mobile	2.0%	4.5%	11.7%	< 0.001	< 0.001	< 0.001
On HH mobile (N=2771, 2618)	NA	0.9%	3.0%	NA	NA	<0.001
Number of health/nutrition texts red	eived in last	1 month				
Own mobile (N=55, 134, 377)	2.7 (1.5)	2.0 (1.3)	1.8 (1.1)	0.001	< 0.001	0.237
HH member mobile (N=26, 73)	NA	1.7 (0.8)	1.7 (0.9)			
Family member shared messages	NA	92.3%	93.7%	NA	NA	0.806

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.16 Phone ownership and SMS exposure among mothers of children 0-2 years

2017	2018	2019	D value	D value	D value		
Mothers	Mothers	Mothers			2018/		
N=1848	N=1909	N=1826			2019		
Mean (SD)/%	Mean (SD)/%	Mean (SD)/%	2010	2019	2019		
69.9%	82.7%	88.3%	<0.001	<0.001	<0.001		
NA	50.5%	56.9%	NA	NA	< 0.001		
Received any health/nutrition texts in last 1 month							
2.2%	6.1%	15.4%	< 0.001	< 0.001	< 0.001		
NA	1.4%	3.7%	NA	NA	0.101		
eived in last 1	month						
2.5 (1.1)	2.0 (1.4)	1.8 (1.2)	0.095	0.004	0.193		
NA	1.7 (0.8)	1.7 (0.9)	NA	NA	0.976		
NA	95.5%	94.1%					
	22.070	J 70					
	Mothers N=1848 Mean (SD)/% 69.9% NA in last 1 mont 2.2% NA ceived in last 1 2.5 (1.1)	Mothers Mothers N=1848 N=1909 Mean (SD)/% Mean (SD)/% 69.9% 82.7% NA 50.5% in last 1 month 2.2% 6.1% NA 1.4% ceived in last 1 month 2.5 (1.1) 2.0 (1.4) NA 1.7 (0.8)	Mothers Mothers Mothers N=1848 N=1909 N=1826 Mean (SD)/% Mean (SD)/% Mean (SD)/% 69.9% 82.7% 88.3% NA 50.5% 56.9% in last 1 month 2.2% 6.1% 15.4% NA 1.4% 3.7% ceived in last 1 month 2.5 (1.1) 2.0 (1.4) 1.8 (1.2) NA 1.7 (0.8) 1.7 (0.9)	Mothers Mothers P-value N=1848 N=1909 N=1826 2017/2018 Mean (SD)/% Mean (SD)/% Mean (SD)/% 88.3% <0.001	Mothers Mothers Mothers P-value P-value 2017/2017/2017/2018 N=1848 N=1909 N=1826 2018/2018 2019 Mean (SD)/% Mean (SD)/% Mean (SD)/% 88.3% <0.001 <0.001		

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 8.17 Groups available in the community reported by male household heads

rable 6.17 Groups available in the community reported by male household neads								
	2017	2018	2019					
	Male HH	Male HH	Male HH	P-value	P-value	P-value		
	heads	heads	heads	2017/	2017/	2018/		
	N=1733	N=1792	N=1767	2018	2019	2019		
	%	%	%					
Credit or microfinance group/ cooperative	59.4%	72.8%	80.2%	<0.001	<0.001	<0.001		
Civic or charitable group	18.9%	25.2%	37.8%	0.001	< 0.001	< 0.001		
Other (e.g. HFOMC, ward committee, WASH CC)	53.0%	48.1%	66.1%	0.117	< 0.001	<0.001		
Number of groups available in community (N=7)	3.1 (1.7)	3.7 (1.8)	4.3 (1.8)	<0.001	<0.001	<0.001		
Participation in credit or microfinance group/ cooperative (N=1029, 1305, 1417)	28.4%	28.3%	17.9%	0.958	<0.001	<0.001		

Table 8.18 Groups available in the community reported by mothers

	2017	2018	2019	-D valua	D value	P-value
	Mothers	Mothers	Mothers	2017/	2017/	2018/
	N=3642	N=3648	N=3648			
	%	%	%	2018	2019	2019
Credit or microfinance group/ cooperative	65.2%	78.2%	83.8%	<0.001	<0.001	<0.001
Civic or charitable group	14.2%	3.3%	32.3%	0.530	< 0.001	< 0.001
Other (e.g. HFOMC, ward committee, WASH CC)	47.1%%	46.7%	66.0%	0.893	< 0.001	< 0.001
Number of groups available in community (N=7)	3.1 (1.7)	3.6 (1.6)	4.3 (1.7)	<0.001	<0.001	<0.001
Participation in credit or microfinance group/ cooperative (N=2376, 2854, 3056)	45.9%	43.0%	32.2%	0.100	<0.001	<0.001

9. Results: GESI

GESI has many facts including empowerment, which in turn has many dimensions including group availability and participation, participation and decision-making. Similarly, GESI factors span various socio-economic and cultural domains, including one's socio-economic status (measured here by equity quintile), caste/ethnicity, and residency including remoteness (measured by urban/rural area and agro-ecological zones) and age (measured here by maternal age group). The empowerment findings related to the four thematic areas: nutrition, WASH, agriculture and SBCC have been presented in the respective sections. This section presents four sub-sections: 1) empowerment in non-agricultural domains for both male household heads and mothers; 2) Suaahara's ten key behaviors disaggregated; 3) Suaahara promoted sixty contact points with the government health system; and 4) Suaahara's reach through SBC approaches disaggregated.

9.1 Empowerment in non-agricultural domains

Participation among male household heads in wage and salary decision-making increased from 49% in 2017 to 60% in 2019 (P:<0.001) but remained at about 30% for non-farm economic activities with no real changes. Among those that reported a decision being made, all household heads reported having input into most or all of the non-farm economic decisions, decreased from 86% in 2017 to 81% in 2019 (P:0.038) (Table 9.1). Overall, mothers had lower rates of participation in decision-making, but still saw significant increases from 2017 to 2019 in both non-farm economic decisions (13% to 16% (P:0.001)) and wage and salary employment (18% to 21% (P:0.001)). Among those that did report a decision, mothers, however, saw significant declines in having input into most or all decisions – for non-farm activities (69% to 58% (P:<0.001)) and for wage and salary employment (86% to 77% (P:<0.001)) between 2017 and 2019 (Table 9.2).

Table 9.1 Household heads' participation/ decision-making in non-agricultural household productive activities, among those who stated a decision was made

	2017	2018	2019			
	Male HH	Male HH	Male HH	P-value	P-value	P-value
	heads	heads	heads	2017/	2017/	2018/
	N=1733	N=1792	N=1767	2018	2019	2019
	%	%	%			
Participation in decision making						
Non-farm economic activities	27.5%	27.7%	29.4%	0.902	0.233	0.293
Wage and salary employment	48.5%	54.0%	60.4%	0.004	< 0.001	< 0.001
Decision in non-farm economic activities (N=4	77, 496, 51	19)				
Little to no input	1.3%	2.4%	1.5%			
Input into some decisions	12.6%	14.1%	17.7%			
Input into most or all decisions	86.2%	83.5%	80.7%	0.303	0.038	0.341
Wage and salary employment (N=840, 968, 106	57)					
Little to no input	0.0%	0.1%	0.3%			
Input into some decisions	7.9%	9.4%	10.5%			
Input into most or all decisions	92.1%	90.5%	89.2%	0.312	0.084	0.466

Table 9.2 Mothers' participation/ decision-making in non-agricultural household productive activities, among those who stated a decision was made

donvices, among those who stated a decision was made										
	2017	2018	2019	D value	P-value	D volue				
	Mothers	Mothers	Mothers	2017/		2018/				
	N=3642	N=3648	N=3648		2017/					
	%	%	%	2018	2019	2019				
Participation on decision making										
Non-farm economic activities	12.8%	16.0%	16.4%	0.003	0.001	0.710				
Wage and salary employment	17.5%	20.5%	21.1%	0.010	0.001	0.587				
Decision on non-farm economic activities (N=465,	582, 597)								
Little to no input	2.6%	7.0%	5.2%							
Input into some decisions	28.5%	37.6%	37.0%							
Input into most or all decisions	68.9%	55.3%	57.8%	< 0.001	< 0.001	0.441				
Wage and salary employment (N= 636, 748, 768)										
Little to no input	0.3%	0.7%	1.4%							
Input into some decisions	13.8%	21.8%	21.7%							
Input into most or all decisions	85.9%	77.5%	76.8%	< 0.001	< 0.001	0.770				

9.2 Suaahara's ten key behaviors, disaggregated

Findings related to *Suaahara's* key behaviors, disaggregated by socio-economic and demographic factors, are summarized here. It is important to remember that these are indicative trends of percentage point (pp) changes only, as the survey was not powered for this type of analysis and some sub-groups have quite small samples and thus, the change may be "real" but significance difficult to detect.

Maternal diet (among mothers of children aged 0-23.9 months):

- The prevalence of maternal minimum dietary diversity (consuming foods from at least 5 of 10 food groups in the previous 24 hours) increased by 13pp overall between 2017 and 2019. An increasing trend was found among almost all subpopulations. The largest increases in prevalence of meeting the minimum dietary diversity between 2017 and 2019 were found among the lowest equity quintile by 25 percentage points (pp) (P:<0.001) and those living in the mountains by 30pp (P:<0.001). The highest equity quintile was the only group to see no significant change, and the lowest absolute prevalence was seen among terai populations at 34% (all other sub-populations ranged from 44%-71%) (Table 9.3).
- The prevalence of maternal egg consumption increased by about 8pp (P:<0.001) between 2017 and 2019. Similar increasing trends were found among all subgroups, with the biggest changes being a 10pp increase among socially excluded (P:<0.001). The lowest absolute prevalence of consumption was among the lowest equity quintile at 7% (Table 9.4).</p>
- The prevalence of meat consumption among mothers increased by 7pp (P:<0.001) between 2017 and 2019. Several sub-groups also had significant increases: 9pp for the lowest equity quintile (P:0.003), 10pp among social excluded (P:<0.001), 8pp among those residing in rural areas, and 10pp among those in hill districts (P:<0.001). Similar to egg consumption, the lowest equity quintile saw the lowest prevalence of consumption in 2019, at 29% (Table 9.5).</p>
- ANC visits: The overall prevalence of mothers receiving at least 4 ANC visits increased between 2017 and 2019 by 9pp (P:<0.001). An increasing trend was found among all subpopulations, the majority significant. The largest significant increase in prevalence was a 12pp increase found among the 2nd lowest equity quintile (P:<0.001) and hill populations (P:<0.001).

Notably, the *terai* population saw no significant change and a lower absolute prevalence in 2019 at 30%, while the mountain and hill populations saw increases of 10*pp* (P:0.003) and 12*pp* (P:<0.001), with an absolute prevalence of 38% each (Table 9.6).

- **180 IFA during pregnancy**: The prevalence of mothers consuming 180 IFA during pregnancy saw no significant change between 2017 and 2019, remaining at 54% in 2019. Only a few sub-populations saw significant progress, among then the 2nd lowest equity quintile by 10*pp* (P:0.003) and mountain populations by 19*pp* (P:0.010). The agro-ecological zones saw significant variation, as the prevalence for both hill and *terai* populations were about 20*pp* lower than the mountain population in 2019 (Table 9.7).
- Modern method of family planning among mothers of children under 2 years of age did not change between 2017 and 2019. The overall prevalence of mothers using a modern method was 31% in 2019. No real changes were detected in sub-populations either, and prevalence in each ranged from 28%-33% (Table 9.8).

Child diet (among children aged 6-23.9 months)

- The prevalence of child minimum dietary diversity (consuming foods from at least 4 of 7 food groups in the previous 24 hours) increased by 11pp overall (P:<0.001) between 2017 and 2019, with the majority of sub-populations seeing significant gains as well. The largest gains were seen among the 2nd lowest equity quintile by 16pp (P:<0.001) and the mountain populations by 25pp (P:<0.001). All equity quintiles saw significant progress in meeting minimum dietary diversity other than the highest however, this quintile remained at a higher prevalence overall than other quintiles in 2019. The other caste group also saw much less progress than the socially excluded and *Brahmin/Chhetri* groups, with no significant change in prevalence between 2017 and 2019 (Table 9.9).
- Egg consumption prevalence among children increased by 12pp overall between 2017 and 2019, more than doubling in a two-year period. This sizeable progress was found among all sub-populations, the majority being significant. The largest increases in prevalence of egg consumption between 2017 and 2019 were found with 16pp among households in the second lowest equity quintile, 15pp among the socially excluded caste, 13pp among both urban and rural populations, and 17pp among children in the hills (all P:<0.001). The lowest equity quintile had the lowest absolute prevalence at 13% in 2019, but still doubled its value since 2017. Notably, Brahmin/Chhetri more than doubled its prevalence between 2017 and 2019 as well, despite cultural norms against egg consumption in this group. The terai population, while seeing significant progress, did not double its prevalence of consumption despite historical trends of having more food available in the region (Table 9.10).</p>
- Meat consumption prevalence among children aged 6-23.9 months increased by 5pp overall between 2017 and 2019 (P:<0.001). Only a few sub-populations saw a significant increase in consumption, among then the 2nd highest equity quintile by 7pp (P:0.024), the socially excluded caste groups and rural populations both by 8pp (P:0.001), and mountain and the mountain and hill populations by 9pp (P:0.04) and 7pp (P:0.002), respectively. Notably, meat consumption among the terai population saw the same lack of progress as egg consumption in the region (Table 9.11).
- The prevalence of consumption of iron-rich foods among children aged 6-23.9 months increased between 2017 and 2019 overall by 6pp (P:<0.001). A similar trend was found among the majority of sub-populations. The largest increase in prevalence was 15pp (P:0.001) among mountain populations. All populations saw a prevalence of 85% or greater by 2019 (Table 9.12).</p>

- **Sick child feeding:** The prevalence of feeding a child under 2 years of age more food during illness saw no real changes between 2017 and 2019 in the overall population. Similarly, no significant changes were seen in sub-populations (Table 9.13).
- Exclusive breastfeeding: The prevalence of exclusive breastfeeding of children under 6 months of age increased between 2017 and 2019, but these changes over time were insignificant (likely due to small sample size). A few sub-populations saw a significant change in this two-year period: the second lowest equity quintile by 20pp (P:<0.001), Brahmins/Chhetris by 18pp (P:0.001) and in the mountains by 33pp (P:<0.001) (Table 9.14).
- Appropriate drinking water treatment in households with children under two years increased in prevalence by 5pp between 2017 and 2019 (P:<0.001). The prevalence for this behavior matched this trend for many sub-populations. The largest significant increases overall found between 2017 and 2019 included a 9pp increase among the 2nd highest equity quintile (P:0.003) and a 8pp increase among Brahmin/Chhetri (P:<0.001). Among agroecological zones, both hill and terai populations saw significant increases of 7pp (P:0.002) and 4pp (P:0.081), respectively, while the mountain populations were an exception with no significant progress. This is likely due to market access issues of water treatment technology (Table 9.15).
- **Handwashing at all six critical times:** The prevalence for this key behavior among mothers with children under two years increased by 4pp (p:0.027) between 2017 and 2019. Very few sub-populations saw a significant change in the two-year period, among them mountain residents by 18pp (P:0003), Brahmin/Chhetri caste/ethnic groups by 10pp (P:<0.001), among the 2nd highest equity quintile by 9pp (P:0.001) and urban populations by 5pp (P:0.025), (Table 9.16).

A few additional variables were examined to understand progress by subpopulation:

- **Child minimum acceptable diet:** The prevalence of child minimum acceptable diet increased by 9pp overall (P:<0.001) between 2017 and 2019, with the majority of subpopulations seeing significant gains as well. The largest gains were seen in the mountain by 24pp (P:<0.001) and among the 2nd lowest equity quintile by 15pp (P:<0.001). All equity quintiles saw significant progress in in this indicator (Table 9.17).
- **Newborns receiving postnatal health check:** The prevalence of newborns receiving postnatal health check within 24 hours of birth increased by 10*pp* overall (P:<0.001) between 2017 and 2019, with the majority of sub-populations seeing significant gains as well. The largest gains were seen in the hills by 13*pp* (P:<0.001), among the 2nd lowest equity quintile by 11*pp* (P:<0.001) and Brahmin/Chhetri caste groups by 11pp (P:<0.001) (Table 9.18).
- **45 IFA during postnatal period:** The prevalence of mothers consuming 45 IFA during postnatal period saw no significant change between 2017 and 2019 in the overall population. Similarly, no significant changes were seen in sub-populations (Table 9.19).
- **Soap and water at hand washing station:** The prevalence of households having soap and water at a hand washing station increased by 25*pp* between 2017 and 2019 (P:<0.001) with the majority of sub-populations seeing significant gains as well. The largest significant increases included a 31*pp* in the mountains (P:<0.001), 29pp among urban residents and 28*pp* among the 2nd highest equity quintile (P:<0.001). (Table 9.20).

Table 9.3 Maternal minimum dietary diversity (consuming foods from at least 5 out of 10 food groups in previous 24 hours) among mothers of children aged 0-23.9 months

groupo in provid	201		20		201		P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	IN	%	IN	70	IN	2018	2019	2019
Total	35.2%	1850	42.2%	1910	47.8%	1827	<0.001	<0.001	0.002
Equity quintile									
Lowest	26.6%	388	37.0%	343	51.9%	287	0.009	< 0.001	0.006
2nd lowest	25.4%	528	37.6%	471	44.2%	425	0.520	0.007	0.050
Middle	38.4%	430	46.5%	488	44.9%	405	0.018	0.045	0.650
2nd highest	37.5%	389	41.8%	<i>455</i>	51.1%	536	0.205	<0.001	0.003
Highest	43.5%	115	55.6%	153	46.6%	174	0.038	0.640	0.100
Caste/ethnicity									
Socially excluded (Dalit,	31.1%	897	39.3%	992	43.3%	972	<0.001	<0.001	0.043
Muslim, disadvantaged)									
Brahmin/Chhetri	41.1%	740	47.1%	766	55.6%	673	0.040	<0.001	0.010
Others (Newar,									
Gurung/Thakali, Non-	31.9%	213	36.2%	152	42.9%	182	0.373	0.014	0.159
dalit Terai caste)									
Urban/rural residence									
Urban	34.9%	934	43.1%	951	48.4%	930	0.001	<0.001	0.060
Rural	35.5%	916	41.3%	959	47.3%	897	0.022	<0.001	0.009
Agro-ecological zone									
Mountain	41.2%	238	56.1%	237	71.0%	238	0.009	< 0.001	0.056
Hill	37.8%	1018	43.3%	1090	50.3%	1017	0.027	< 0.001	0.002
Terai	28.3%	594	34.5%	583	33.9%	572	0.031	0.034	0.814

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.4 Egg consumption among mothers of children aged 0-23.9 months

	2017		20	18	201	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Total	6.2%	1850	10.3%	1910	14.3%	1827	<0.001	<0.001	0.001
Equity quintile									
Lowest	1.2%	388	7.0%	343	7.0%	287	< 0.001	0.001	0.989
2nd lowest	3.0%	528	9.3%	471	12.2%	425	< 0.001	<0.001	0.202
Middle	7.7%	430	10.9%	<i>4</i> 88	16.5%	405	0.067	< 0.001	0.010
2nd highest	12.6%	389	13.9%	<i>455</i>	16.8%	536	0.631	0.110	0.216
Highest	9.6%	115	16.3%	153	18.4%	174	0.125	0.021	0.668
Caste/ethnicity									
Socially excluded (Dalit, Muslim, disadvantaged)	5.4%	897	12.3%	992	14.8%	972	<0.001	<0.001	0.065
Brahmin/Chhetri Others (Newar,	6.4%	740	8.6%	766	13.7%	673	0.123	<0.001	0.002
Gurung/Thakali, Non- dalit Terai caste)	9.4%	213	13.8%	152	13.7%	182	0.189	0.147	0.983
Urban/rural residence									
Urban	6.0%	934	10.3%	951	14.5%	930	0.001	< 0.001	0.006
Rural	6.4%	916	11.6%	959	14.1%	897	< 0.001	< 0.001	0.080
Agro-ecological zone									
Mountain	7.6%	238	11.8%	237	13.9%	238	0.094	0.027	0.337

	20	2017		2018		2019		P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	IN	70	IN	70	IN	2018	2019	2019
Hill	6.1%	1018	11.1%	1090	15.2%	1017	<0.001	<0.001	0.003
Terai	5.9%	594	10.3%	583	12.8%	572	0.004	< 0.001	0.229

Table 9.5 Meat consumption among mothers of children aged 0-23.9 months

	201	17	201	8	201	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
							2018	2019	2019
Total	28.9%	1850	31.8%	1910	35.9%	1827	0.061	<0.001	0.010
Equity quintile									
Lowest	19.9%	388	22.2%	343	29.3%	287	0.422	0.003	0.046
2nd lowest	29.0%	528	31.6%	471	36.5%	425	0.389	0.019	0.130
Middle	31.2%	430	30.9%	488	35.8%	405	0.948	0.201	0.165
2nd highest	34.5%	389	35.6%	<i>4</i> 55	39.6%	536	0.737	0.096	0.217
Highest	32.2%	115	45.1%	153	33.9%	174	0.024	0.735	0.030
Caste/ethnicity									
Socially excluded (Dalit,	37.0%	897	41.5%	992	46.5%	972	0.069	<0.001	0.036
Muslim, disadvantaged)	37.0%	097	41.5/0	992	40.576	912	0.009	<0.001	0.030
Brahmin/Chhetri	16.5%	740	19.5%	766	20.5%	673	0.145	0.059	0.624
Others (Newar,									
Gurung/Thakali,	38.0%	213	30.3%	152	35.7%	182	0.205	0.676	0.290
Non-dalit Terai caste)									
Urban/rural residence									
Urban	27.8%	934	33.8%	951	33.6%	930	0.008	0.016	0.925
Rural	30.0%	916	29.8%	959	38.2%	897	0.923	<0.001	<0.001
Agro-ecological zone									
Mountain	25.6%	238	30.0%	237	38.2%	238	0.203	0.003	0.056
Hill	28.4%	1018	32.6%	1090	38.2%	1017	0.042	<0.001	0.008
Terai	31.1%	594	31.1%	583	30.8%	572	0.972	0.900	0.023

Table 9.6 Attended ANC at least four times

	201	17	201	18	2019		P-value P-value		P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	/0	IN	/0	IN	/0	IN	2018	2019	2019
Total	79.5%	1850	85.5%	1910	88.8%	1825	< 0.001	<0.001	0.001
Equity quintile									
Lowest	76.3%	388	79.0%	343	84.3%	287	0.343	0.007	0.091
2nd lowest	72.9%	528	80.7%	471	85.1%	424	0.005	<0.001	0.088
Middle	83.5%	430	87.5%	488	91.4%	405	0.050	0.001	0.057
2nd highest	85.1%	389	91.4%	455	91.6%	535	0.001	0.004	0.923
Highest	86.1%	115	90.9%	153	90.8%	174	0.230	0.253	0.989
Caste/ethnicity									
Socially excluded (Dalit,	75.5%	897	83.5%	992	86.6%	972	<0.001	<0.001	0.043
Muslim, disadvantaged)	75.576	097	03.570	992	00.070	912	<0.001	<0.001	0.043
Brahmin/Chhetri	83.9%	740	89.2%	766	93.6%	672	0.003	<0.001	0.001
Others (Newar,	80.8%	213	80.3%	152	82.9%	181	0.922	0.658	0.559

	2017		2018		2019		P-value P-value		P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Gurung/Thakali,									
Non-dalit Terai caste)									
Urban/rural residence									
Urban	77.1%	934	82.7%	951	87.4%	928	0.004	<0.001	0.005
Rural	81.9%	916	88.1%	959	90.3%	897	< 0.001	<0.001	0.100
Agro-ecological zone									
Mountain	82.8%	238	90.7%	237	91.6%	238	0.013	0.012	0.781
Hill	76.5%	1018	84.3%	1090	88.6%	1016	< 0.001	<0.001	0.001
Terai	83.2%	594	85.6%	583	88.1%	571	0.282	0.027	0.234

Table 9.7 Took at least 180 IFA tablets during pregnancy

	201	7	201	18	201	19	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
							2018	2019	2019
Total	52.4%	1835	59.1%	1899	53.9%	1820	<0.001	0.391	0.002
Equity quintile									
Lowest	48.8%	385	49.4%	342	49.1%	287	0.685	0.735	0.940
2nd lowest	46.2%	522	55.5%	465	55.8%	423	0.001	0.003	0.925
Middle	56.7%	427	61.7%	485	54.1%	405	0.140	0.465	0.021
2nd highest	58.8%	386	65.0%	454	56.2%	532	0.060	0.429	0.011
Highest	58.3%	115	66.7%	153	49.7%	173	0.170	0.127	0.003
Caste/ethnicity									
Socially excluded (Dalit,	48.7%	888	56.2%	982	52.1%	969	0.003	0.175	0.072
Muslim, disadvantaged)	40.7 /0	000	JU.Z /0			909	0.003	0.175	0.072
Brahmin/Chhetri	58.0%	736	63.5%	765	59.9%	670	0.018	0.509	0.164
Others (Newar,									
Gurung/Thakali,	48.3%	211	55.9%	152	41.4%	181	0.209	0.253	0.014
Non-dalit Terai caste)									
Urban/rural residence									
Urban	49.1%	928	55.6%	949	52.8%	925	0.002	0.164	0.215
Rural	55.7%	907	62.6%	950	55.1%	895	0.010	0.806	0.001
Agro-ecological zone									
Mountain	51.1%	237	64.8%	236	70.3%	236	0.010	< 0.001	0.141
Hill	50.3%	1006	56.7%	1086	52.0%	1016	0.004	0.468	0.026
Terai	56.4%	592	61.4%	577	50.5%	568	0.090	0.040	0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.8 Use of modern method of family planning among mothers of children <2 years

	2017		201	2018		2019		P-value	P-value
	0/	N.I	0/	NI.	0/	NI	2017/	2017/	2018/
	%	N	%	N	%	N	2018	2019	2019
Total	30.5%	1850	30.3%	1910	30.7%	1827	0.892	0.944	0.819
Equity quintile									_
Lowest	30.2%	388	26.0%	343	30.0%	287	0.230	0.955	0.245
2nd lowest	33.7%	528	30.6%	471	27.4%	<i>4</i> 25	0.290	0.065	0.314
Middle	30.0%	430	33.4%	488	31.6%	405	0.300	0.632	0.598

	201	17	201	18	2019		P-value P-value F		P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	/0	IN	/0	IN	/0	IN	2018	2019	2019
2nd highest	28.3%	389	29.9%	455	33.2%	536	0.610	0.120	0.244
Highest	27.0%	115	30.7%	153	29.3%	174	0.500	0.641	0.802
Caste/ethnicity									
Socially excluded (Dalit,	33.6%	897	33.9%	992	34.5%	972	0.894		
Muslim, disadvantaged)	00.070		00.070		01.070	-	0.00 .	0.685	0.790
Brahmin/Chhetri	28.5%	740	26.1%	766	24.5%	673	0.332	0.107	0.460
Others (Newar,									
Gurung/Thakali,	24.9%	213	28.3%	152	33.0%	182	0.462	0.046	0.306
Non-dalit Terai caste)									
Urban/rural residence									
Urban	30.3%	930	29.1%	951	29.6%	930	0.600	0.702	0.872
Rural	30.8%	916	31.5%	959	31.9%	897	0.780	0.623	0.851
Agro-ecological zone									
Mountain	42.0%	238	40.1%	237	39.1%	238	0.700	0.445	0.811
Hill	28.7%	1018	28.0%	1090	30.2%	1017	0.740	0.488	0.227
Terai	29.1%	594	30.7%	<i>5</i> 83	28.0%	572	0.610	0.670	0.351

Table 9.9 Child minimum dietary diversity (consuming foods from 4 out of 7 food groups in previous 24 hours) among children aged 6-23.9 months

% N % N % N 2018 2019 2	2018/ 2019 0.053 0.031
% N % N % N 2018 2019 2	2019 0.053 0.031
2018 2019 2	0.053 0.031
Total 46.7% 1385 53.5% 1460 57.5% 1396 0.001 <0.001 0	0.031
Equity quintile	
Lowest 41.9% 279 43.8% 258 54.5% 224 0.660 0.016 (
2nd lowest 42.4% 394 50.0% 348 58.4% 310 0.041 <0.001 (0.070
Middle 49.1% 332 58.2% 380 57.4% 298 0.025 0.039 (0.850
2nd highest 50.3% 290 58.5% 354 57.6% 424 0.044 0.047 (0.766
Highest 60.0% 90 55.0% 120 60.0% 140 0.494 1.000 (0.455
Caste/ethnicity	
Socially excluded (Dalit, 42.7% 667 50.9% 755 55.6% 742 0.006 <0.001	0.072
Muslim, disadvantaged)	0.072
Brahmin/Chhetri 52.6% 559 58.3% 583 62.6% 522 0.051 0.005 (0.232
Others (Newar,	
0	0.915
Non-dalit Terai caste)	
Urban/rural residence	
Urban 45.3% 704 50.3% 716 57.9% 710 0.101 <0.001 (0.012
Rural 48.2% 681 56.6% 744 57.0% 686 0.001 <0.001 0	0.880
Agro-ecological zone	
Mountain 44.0% 175 56.4% 179 68.7% 185 0.026 <0.001 (0.096
Hill 49.9% 762 55.5% 816 61.4% 765 0.027 <0.001 (0.020
Terai 42.4% 448 48.8% 465 46.0% 446 0.087 0.256 0	0.395

Table 9.10 Egg consumption among children aged 6-23.9 months

	201		201		201		P-value	P-value	P-value
	%	N	%	N	%	NI	2017/	2017/	2018/
	%	IN	%	IN	%	N	2018	2019	2019
Total	10.6%	1385	17.7%	1460	23.1%	1396	< 0.001	<0.001	0.001
Equity quintile									
Lowest	5.4%	279	8.9%	258	13.4%	224	0.071	0.001	0.137
2nd lowest	7.9%	394	14.9%	348	24.2%	310	0.007	<0.001	0.003
Middle	12.1%	332	23.2%	380	24.2%	298	< 0.001	<0.001	0.768
2nd highest	15.5%	290	20.9%	354	25.9%	424	0.101	0.001	0.139
Highest	17.8%	90	18.3%	120	25.0%	140	0.910	0.229	0.193
Caste/ethnicity									
Socially excluded (Dalit,	11.1%	667	20.9%	755	25.8%	742	<0.001	<0.001	0.029
Muslim, disadvantaged)	11.170	007	20.970	755	25.070		<0.001	<0.001	0.029
Brahmin/Chhetri	8.2%	559	13.7%	583	19.5%	522	0.008	<0.001	0.010
Others (Newar,									
Gurung/Thakali,	17.0%	159	17.2%	122	21.4%	131	0.956	0.349	0.385
Non-dalit Terai caste)									
Urban/rural residence									
Urban	8.1%	704	15.9%	716	20.7%	710	< 0.001	<0.001	0.022
Rural	13.2%	681	19.5%	744	25.5%	686	0.004	<0.001	0.014
Agro-ecological zone									
Mountain	13.1%	175	16.8%	179	23.8%	185	0.338	0.011	0.155
Hill	10.9%	762	20.2%	816	26.8%	765	< 0.001	<0.001	0.002
Terai	9.2%	448	13.8%	465	16.4%	446	0.075	0.002	0.349

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.11 Meat consumption among children aged 6-23.9 months

	201	17	201	18	201	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	/0	IN	/0	IN			2018	2019	2019
Total	17.9%	1385	24.0%	1460	23.3%	1396	<0.001	0.001	0.632
Equity quintile									
Lowest	17.6%	297	21.3%	258	21.4%	224	0.239	0.232	0.975
2nd lowest	18.0%	394	23.3%	<i>34</i> 8	23.6%	310	0.079	0.077	0.936
Middle	16.9%	332	25.3%	380	23.2%	298	0.010	0.047	0.587
2nd highest	17.6%	290	25.1%	354	25.0%	424	0.027	0.024	0.963
Highest	23.3%	90	25.0%	120	20.7%	140	0.780	0.616	0.426
Caste/ethnicity									
Socially excluded (Dalit,	24.4%	667	32.3%	755	32.3%	743	0.003	0.001	0.995
Muslim, disadvantaged)			02.070						0.550
Brahmin/Chhetri	9.8%	559	13.7%	583	10.9%	522	0.022	0.521	0.150
Others (Newar,									
Gurung/Thakali,	18.9%	159	22.1%	122	21.4%	131	0.550	0.580	0.872
Non-dalit Terai caste)									
Urban/rural residence									
Urban	17.6%	704	24.3%	716	20.7%	710	0.002	0.169	0.092
Rural	18.2%	681	23.8%	744	26.0%	686	0.010	0.001	0.352
Agro-ecological zone				·				·	
Mountain	17.1%	175	27.9%	179	26.0%	185	0.007	0.040	0.622
Hill	18.9%	762	24.0%	816	25.8%	765	0.011	0.002	0.410

	201	2017		2018		2019		P-value P-value P-value		
		NI	%	N	%	N	2017/	2017/	2018/	
	70	IN	70	IN			2018	2019	2019	
Terai	16.5%	448	22.6%	465	17.9%	446	0.032	0.622	0.115	

Table 9.12 Consumption of iron-rich foods among children aged 6-23.9 months

	201	17	201	18	201	19	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	.,					2018	2019	2019
Total	84.2%	1385	88.6%	1460	89.8%	1396	0.001	<0.001	0.300
Equity quintile									
Lowest	78.5%	279	88.9%	258	84.8%	224	0.020	0.105	0.985
2nd lowest	83.5%	394	85.3%	348	89.0%	310	0.470	0.042	0.210
Middle	84.9%	332	89.7%	380	91.3%	298	0.080	0.017	0.524
2nd highest	88.3%	290	92.9%	354	91.3%	424	0.060	0.222	0.349
Highest	88.9%	90	90.0%	120	92.1%	140	0.800	0.371	0.595
Caste/ethnicity									
Socially excluded (Dalit,	85.5%	667	89.1%	755	89.8%	743	0.050	0.021	0.688
Muslim, disadvantaged)	00.070	007	09.170	755	09.070	743	0.050	0.02 1	0.000
Brahmin/Chhetri	83.7%	559	88.3%	583	89.9%	522	0.008	0.012	0.452
Others (Newar,									
Gurung/Thakali,	80.5%	159	86.9%	122	90.1%	131	0.166	0.008	0.397
Non-dalit Terai caste)									
Urban/rural residence									
Urban	83.5%	704	87.4%	716	89.9%	710	0.040	0.002	0.147
Rural	84.9%	681	89.8%	744	89.8%	686	0.010	0.014	0.995
Agro-ecological zone									
Mountain	76.6%	175	88.3%	179	91.9%	185	0.001	0.001	0.274
Hill	84.5%	762	88.7%	816	89.2%	765	0.010	0.019	0.794
Terai	86.6%	448	88.6%	465	90.1%	446	0.420	0.117	0.407

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.13 Feeding more to sick children <2 years

	201	17	201	18	201	19	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	11	70	11	70	IN	2018	2019	2019
Total	38.3%	744	37.5%	678	35.0%	744	0.750	0.191	0.335
Equity quintile									
Lowest	34.2%	187	28.8%	125	33.3%	123	0.260	0.871	0.380
2nd lowest	38.1%	231	38.9%	185	32.6%	190	0.850	0.265	0.169
Middle	45.2%	166	37.0%	165	36.7%	177	0.160	0.125	0.964
2nd highest	36.2%	130	42.8%	152	38.5%	200	0.240	0.669	0.424
Highest	36.7%	30	39.2%	51	27.8%	54	0.830	0.420	0.234
Caste/ethnicity									_
Socially excluded (Dalit,	35.1%	370	35.3%	366	35.2%	401	0.977	0.995	0.982
Muslim, disadvantaged)									
Brahmin/Chhetri	42.7%	307	40.4%	275	36.6%	268	0.538	0.168	0.321
Others (Newar, Gurung/Thakali,	35.8%	67	37.8%	37	28.0%	75	0.855	0.308	0.377

	201	17	201	18	201	19	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Non-dalit Terai caste)							2010	2010	2010
Urban/rural residence									
Urban	36.6%	385	39.6%	356	33.9%	387	0.410	0.415	0.120
Rural	40.1%	359	35.1%	322	36.1%	357	0.180	0.304	0.775
Agro-ecological zone									
Mountain	38.8%	121	28.4%	95	34.2%	76	0.080	0.493	0.431
Hill	38.5%	444	39.3%	392	37.2%	<i>4</i> 25	0.830	0.711	0.557
Terai	37.4%	179	38.2%	191	31.3%	243	0.870	0.148	0.105

Table 9.14 Practice of exclusive breastfeeding

	2017		2018		2019		P-value	P-value	P-value
-							2017/	2017/	2018/
	%	N	%	N	%	N	2018	2019	2019
Total	62.9%	455	65.8%	450	68.9%	431	0.369	0.060	0.328
Equity quintile									
Lowest	67.9%	106	74.1%	85	73.0%	63	0.355	0.424	0.856
2nd lowest	58.8%	131	62.6%	123	79.1%	115	0.569	< 0.001	0.007
Middle	67.7%	96	65.7%	108	62.6%	107	0.763	0.449	0.653
2nd highest	62.9%	97	70.3%	101	67.0%	112	0.248	0.544	0.621
Highest	44.0%	25	42.4%	33	52.9%	34	0.899	0.519	0.377
Caste/ethnicity									
Socially excluded (Dalit,	73.1%	223	71.7%	237		229			
Muslim, disadvantaged)	73.170	223	11.170	237	69.9%	223	0.761	0.473	0.655
Brahmin/Chhetri	51.4%	179	58.5%	183	68.9%	151	0.161	0.001	0.042
Others (Newar,									
Gurung/Thakali,	58.5%	53	63.3%	30		51			
Non-dalit Terai caste)					64.7%		0.643	0.533	0.909
Urban/rural residence									
Urban	59.4%	224	62.1%	235	66.8%	220	0.559	0.138	0.299
Rural	66.2%	231	69.8%	215	71.1%	211	0.432	0.226	0.773
Agro-ecological zone									_
Mountain	55.6%	63	69.0%	58	88.7%	53	0.139	< 0.001	0.003
Hill	65.9%	249	69.0%	274	70.2%	252	0.459	0.294	0.756
Terai	60.8%	143	56.8%	118	57.9%	126	0.501	0.617	0.855

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.15 Appropriate drinking water treatment among households with a child <2 years

	,	J			J			,	
	201	2017		2018		2019		P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	1 1	70	1 1	70	11	2018	2019	2019
Total	13.5%	1846	19.7%	1909	19.2%	1826	< 0.001	<0.001	0.757
Equity quintile									
Lowest	7.5%	388	7.9%	343	8.7%	287	0.860	0.594	0.746
2nd lowest	9.1%	528	11.7%	471	17.0%	424	0.180	0.001	0.028
Middle	20.6%	428	26.6%	488	21.7%	405	0.040	0.712	0.124
2nd highest	14.0%	387	24.9%	<i>4</i> 53	23.0%	536	< 0.001	0.003	0.522

	201	17	201	18	201	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	1 1	70	1 1	70	11	2018	2019	2019
Highest	26.1%	115	32.7%	153	24.1%	174	0.280	0.734	0.169
Caste/ethnicity									
Socially excluded (Dalit,	12.1%	895	18.0%	991	17.1%	972	0.003	0.007	0.665
Muslim, disadvantaged)	12.170	090	10.076	991	17.170	312	0.003	0.007	0.000
Brahmin/Chhetri	14.8%	738	22.1%	766	23.2%	672	0.001	<0.001	0.650
Others (Newar,									
Gurung/Thakali,	15.0%	213	18.5%	151	15.4%	182	0.301	0.920	0.439
Non-dalit Terai caste)									
Urban/rural residence									
Urban	11.2%	933	18.6%	951	16.4%	929	< 0.001	0.009	0.290
Rural	15.9%	913	20.7%	957	22.1%	897	0.020	0.006	0.552
Agro-ecological zone									
Mountain	9.7%	237	14.8%	236	13.0%	238	0.130	0.264	0.592
Hill	17.2%	1016	24.6%	1089	24.1%	1016	0.001	0.002	0.834
Terai	8.6%	593	12.4%	583	12.9%	572	0.080	0.081	0.796

Table 9.16 Practiced handwashing at all six times among mothers with a child <2 years

	20 ⁻	17	201	18	201	19	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	/0	1.0	/0	IN	/0	IN	2018	2019	2019
Total	7.8%	1850	19.4%	1910	11.3%	1827	<0.001	0.027	<0.001
Equity quintile									
Lowest	5.2%	388	10.5%	343	12.9%	287	0.020	0.009	0.514
2nd lowest	6.4%	528	18.5%	471	15.8%	425	< 0.001	0.001	0.337
Middle	8.8%	430	23.8%	488	11.1%	405	< 0.001	0.364	< 0.001
2nd highest	10.5%	389	21.3%	455	9.3%	536	0.002	0.643	0.002
Highest	9.6%	115	22.2%	153	4.6%	174	0.010	0.104	< 0.001
Caste/ethnicity									
Socially excluded (Dalit,	7.0%	897	16.7%	992	7.4%	972	<0.001	0.821	<0.001
Muslim, disadvantaged)	7.070	097	10.7 /0	992	7.4/0	912	<0.001	0.02 1	<0.001
Brahmin/Chhetri	8.8%	740	24.4%	766	18.7%	673	< 0.001	<0.001	0.072
Others (Newar,									
Gurung/Thakali,	7.5%	213	11.2%	152	5.0%	182	0.188	0.284	0.028
Non-dalit Terai caste)									
Urban/rural residence									
Urban	6.3%	934	17.3%	951	11.7%	930	<0.001	0.025	0.032
Rural	9.3%	916	21.5%	959	10.9%	897	<0.001	0.437	<0.001
Agro-ecological zone									
Mountain	7.1%	238	13.1%	237	24.8%	238	0.070	0.003	0.069
Hill	7.4%	1018	20.8%	1090	9.5%	1017	< 0.001	0.195	< 0.001
Terai	8.8%	594	19.2%	583	8.9%	572	0.010	0.956	<0.001

Table 9.17 Child minimum acceptable diet among children aged 6-23.9 months

Table of Fred Mila	20		201		20		P-value	P-value	P-value
	%	NI	%	NI	%	N	2017/	2017/	2018/
	70	N	70	N	70	IN	2018	2019	2019
Total	37.5%	1385	45.7%	1460	47.2%	1396	<0.001	<0.001	0.456
Equity quintile									_
Lowest	35.1%	279	35.7%	258	47.8%	224	0.172	< 0.001	< 0.001
2nd lowest	35.5%	394	44.3%	348	50.0%	310	0.293	< 0.001	< 0.001
Middle	38.0%	332	48.2%	380	47.0%	298	< 0.001	< 0.001	0.004
2nd highest	37.9%	290	51.1%	354	46.2%	424	0.032	< 0.001	< 0.001
Highest	50.0%	90	47.5%	120	43.6%	140	0.132	0.002	0.002
Caste/ethnicity									
Socially excluded (Dalit,	35.1%	667	43.6%	755	45.8%	742	0.002	<0.001	<0.001
Muslim, disadvantaged)	30.1%	007	43.0%	755	43.6%	742	0.002	<0.001	<0.001
Brahmin/Chhetri	41.3%	559	49.7%	583	51.3%	522	< 0.001	< 0.001	< 0.001
Others (Newar,									
Gurung/Thakali,	34.0%	159	39.3%	122	38.9%	131	0.086	0.416	0.002
Non-dalit Terai caste)									
Urban/rural residence									
Urban	35.8%	704	42.5%	716	48.6%	710	< 0.001	< 0.001	< 0.001
Rural	39.2%	681	48.8%	744	45.8%	686	0.002	<0.001	< 0.001
Agro-ecological zone									
Mountain	37.7%	175	45.3%	179	61.2%	185	0.359	< 0.001	< 0.001
Hill	40.3%	762	47.8%	816	49.3%	765	< 0.001	< 0.001	< 0.001
Terai	32.6%	448	42.2%	465	37.7%	446	0.046	<0.001	<0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.18 Newborns receiving postnatal health check within 24 hours of birth

_	2017	7	2018	3	2019)	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Total	73.5%	1820	79.1%	1896	83.0%	1784		<0.001	0.003
Equity quintile									
Lowest	58.3%	381	72.1%	341	68.8%	285	< 0.001	0.003	0.348
2nd lowest	68.4%	522	69.8%	470	79.6%	416	0.656	< 0.001	0.001
Middle	80.9%	424	82.2%	482	86.5%	391	0.611	0.061	0.084
2nd highest	84.4%	379	87.2%	454	87.8%	524	0.269	0.171	0.811
Highest	84.2%	114	89.3%	149	92.3%	168	0.265	0.033	0.374
Caste/ethnicity									
Socially excluded (Dalit, Muslim, disadvantaged)	72.1%	884	76.6%	985	79.8%	948	0.022	<0.001	0.113
Brahmin/Chhetri	75.8%	727	83.3%	760	87.2%	662	< 0.001	< 0.001	0.035
Others (Newar, Gurung/Thakali, Non-dalit Terai caste)	71.8%	209	74.2%	151	84.5%	174	0.611	0.002	0.009
Urban/rural residence									
Urban	70.2%	916	75.0%	943	80.6%	903	0.022	< 0.001	0.004
Rural	76.9%	904	83.1%	953	85.4%	881	0.001	<0.001	0.184
Agro-ecological zone									
Mountain	67.7%	235	72.7%	234	78.2%	238	0.225	0.016	0.126
Hill	70.0%	996	76.7%	1081	82.5%	995	< 0.001	<0.001	0.001

		2017	,	2018	2018		2019		P-value	P-value
		%	N	%	NI	%	N	2017/	2017/	2018/
		70	IN	70	IN	70	IN	2018	2019	2019
Terai	81	.8%	589	86.1%	581	85.8%	551	0.066	0.117	0.923

Table 9.19 Taken at least 45 IFA tablets during postnatal period, among those who take any

	2017	7	2018		2019)	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Total	51.8%	1293	53.3%	1410	53.4%	1442	0.422	0.438	0.971
Equity quintile									
Lowest	44.4%	241	44.3%	226	51.2%	217	0.975	0.175	0.155
2nd lowest	52.2%	341	53.6%	343	53.9%	332	0.694	0.655	0.946
Middle	51.6%	322	55.2%	377	56.5%	322	0.332	0.235	0.726
2nd highest	58.0%	300	55.5%	346	52.2%	435	0.540	0.128	0.355
Highest	50.6%	89	57.6%	118	52.2%	136	0.308	0.787	0.388
Caste/ethnicity									
Socially excluded (Dalit,	47.8%	575	50.1%	696	51.3%	741	0.417	0.281	0.664
Muslim, disadvantaged)	47.070		30.170	090	31.370	741	0.417	0.201	0.004
Brahmin/Chhetri	58.7%	569	57.2%	617	56.4%	562	0.599	0.436	0.774
Others (Newar,									
Gurung/Thakali,	40.9%	149	51.6%	97	52.5%	139	0.131	0.079	0.882
Non-dalit Terai caste)									
Urban/rural residence									
Urban	49.7%	622	46.6%	680	49.7%	712	0.244	0.988	0.194
Rural	53.8%	671	59.6%	730	57.0%	730	0.025	0.296	0.315
Agro-ecological zone									
Mountain	43.4%	152	43.0%	165	54.8%	186	0.945	0.077	0.041
Hill	50.3%	716	56.7%	838	54.6%	834	0.005	0.092	0.343
Terai	57.4%	425	50.6%	407	50.5%	422	0.059	0.065	0.967

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.20 Soap and water at hand washing station among households with children <2 years

Table 6126 Coup and water at hand watering station among households with official 12 years									
	201	17	201	18	201	19	P-value	P-value	P-value
	<u></u> %	N	%	N	%	N	2017/	2017/	2018/
	70	IN	70	IN	70	IN	2018	2019	2019
Total	37.7%	1846	47.3%	1908	63.3%	1826	<0.001	<0.001	<0.001
Equity quintile									
Lowest	16.8%	388	18.4%	343	40.4%	287	0.599	< 0.001	< 0.001
2nd lowest	23.3%	528	33.8%	471	50.7%	424	0.001	< 0.001	< 0.001
Middle	47.9%	428	53.7%	488	69.6%	405	0.112	< 0.001	< 0.001
2nd highest	56.5%	387	65.8%	<i>4</i> 53	74.8%	536	0.007	<0.001	0.004
Highest	73.0%	115	79.1%	153	81.6%	174	0.291	0.061	0.571
Caste/ethnicity									
Socially excluded (Dalit, Muslim, disadvantaged)	34.8%	895	45.5%	991	60.7%	972	<0.001	<0.001	<0.001
Brahmin/Chhetri	40.2%	738	47.8%	766	66.2%	672	0.008	< 0.001	< 0.001
Others (Newar,	41.3%	213	57.0%	51	66.5%	182	0.004	< 0.001	0.043

	2017		201	18	20	19	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Gurung/Thakali,									
Non-dalit Terai caste)									
Urban/rural residence									
Urban	33.9%	933	47.3%	951	62.7%	929	< 0.001	< 0.001	< 0.001
Rural	41.6%	913	47.3%	957	64.0%	897	0.003	< 0.001	< 0.001
Agro-ecological zone									
Mountain	27.0%	237	33.9%	236	58.0%	238	0.100	< 0.001	< 0.001
Hill	35.6%	1016	47.2%	1089	62.2%	1016	<0.001	< 0.001	< 0.001
Terai	45.5%	593	53.0%	583	67.5%	572	0.028	< 0.001	< 0.001

9.3 Suaahara promoted 60 government health system contact points, disaggregated

The following are some of the significant differences found based on disaggregated analysis for indicators of SII promoted 60 GoN contact points. Again, it is important to remember that these are indicative trends only, as the survey was not powered for this type of analysis and some subgroups have quite small samples

• **ANC:** The mean number of ANC visits among mothers of children under two years has increased from 4.2 in 2017 to 4.7 in 2019 (P:<0.001). Among all sub-populations, the mean increased between 2017 and 2019, with almost all changes being significant. By 2019, all sub-populations were above the recommended 4 visits. Notably, the highest equity quintile saw the highest average number of visits at 5.3 in 2019 (Table 9.21).

PNC

- The average number of PNC visits for mothers of children under two years within 24 hours of birth has decreased from 0.9 in 2017 to 0.8 visits in 2019 (P:<0.001). Most sub-population groups have seen a similar slight decrease between 2017 and 2019, and all changes have been statistically significant, potentially due to the small range of values between 0 and 1. No change more than 0.3 was seen in any sub-group (Table 9. 22).</p>
- The average number of PNC visits for children of mothers with children under two years within 24 hours of birth followed a very similar trend, seeing an overall change of 0.7 to 0.8 visits between 2017 and 2019 (P:<0.001). Fewer subpopulations saw real changes, unlike the mothers. All significant changes were from 0.7 to 0.8 visits, while *Brahmin/Chhetri* saw the highest absolute mean/significant change from 0.8 to 0.9 visits (P:<0.001) (Table 9.23).
- **GMP:** The mean number of GMP visits in the last 6 months among households with a child 0-2 years of age increased from 2.5 to 2.7 (P:<0.001) between 2018 and 2019 (data not collected in this way in 2017). Notably, the middle and second highest equity quintiles saw a 0.5 visit increase (P:<0.001), as well as those of other ethnicity (P:0.039). In 2019, those living in rural areas saw the highest mean number of GMP visits at 3.0 (<3 visits for all others), up from 2.7 (P:0.006) in 2018. Similarly, geographic variation was found: while mountain and hill-residing households had an average increase in 0.1-0.2 visits, those in the mountains in *terai* saw a significant increase of 0.5 visits (P:<0.001) (Table 9.24).
- HMG: The mean number of households with a child 0-2 years of age reported to have participated in HMG meetings in the last six months saw no real change. All sub-groups remained the same or saw slight increases/decreases, though the majority of changes were

insignificant. Only a significant increase was among the 2nd highest equity quintile, from 3.6 to 4.3 visits (P:0.011. The lowest absolute average attendance was among the highest equity quintile, with 3.1 average visits, compared to the rest of the sub-populations with 3.7-4.4 average visits in 2019 (Table 9.25).

Table 9.21 Sixty contact points: Mean ANC visits among mothers with children <2 years

·	20	17	20	18	20	19	P-value	P-value	P-value
	Mean	N	Mean	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Total	4.2	1850	4.5	1906	4.7	1823	<0.001	<0.001	<0.001
Equity quintile									
Lowest	4.0	388	4.0	341	4.4	287	0.870	0.005	0.012
2nd lowest	3.9	528	4.2	469	4.5	424	0.010	<0.001	0.012
Middle	4.4	430	4.6	488	4.7	405	0.210	0.074	0.526
2nd highest	4.5	389	4.9	55	5.0	534	0.003	< 0.001	0.431
Highest	4.7	115	5.0	153	5.3	173	0.217	0.008	0.107
Caste/ethnicity									
Socially excluded (Dalit, Muslim, disadvantaged)	4.1	897	4.4	989	4.7	972	<0.001	<0.001	<0.001
Brahmin/Chhetri	4.3	740	4.6	766	4.8	672	0.003	< 0.001	0.009
Others (Newar, Gurung/Thakali, Non-dalit Terai caste)	4.6	213	4.6	151	4.7	179	0.786	0.689	0.912
Urban/rural residence									
Urban	4.1	934	4.4	948	4.7	927	0.003	< 0.001	0.001
Rural	4.3	916	4.6	958	4.8	896	0.002	<0.001	0.020
Agro-ecological zone									
Mountain	4.4	238	4.8	237	4.7	238	0.050	0.122	0.557
Hill	4.1	1018	4.3	1086	4.7	1016	0.020	< 0.001	< 0.001
Terai	4.3	594	4.6	583	4.9	569	0.001	<0.001	0.078

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.22 Sixty contact points: Mean PNC visits for mothers within 24 hours of birth, among mothers with children <2 years

	20	17	20	18	20	19	P-value	P-value	P-value
	Mean	N	Mean	N	%	N	2017/	2017/	2018/
	Mean	1 1	Mean	IN	70	11	2018	2019	2019
Total	0.9	1412	0.8	1910	0.8	1827	<0.001	<0.001	0.028
Equity quintile									
Lowest	0.9	241	0.7	343	0.7	287	< 0.001	< 0.001	0.290
2nd lowest	0.9	378	0.7	471	0.8	425	< 0.001	< 0.001	0.004
Middle	1.0	362	0.8	488	0.8	405	< 0.001	<0.001	0.086
2nd highest	1.0	329	0.9	455	0.9	536	< 0.001	<0.001	0.965
Highest	1.0	102	0.9	153	0.9	174	0.008	0.007	0.903
Caste/ethnicity									
Socially excluded (Dalit,	1.0	667	0.8	992	0.8	972	<0.001	<0.001	0.252
Muslim, disadvantaged)	1.0	007	0.0	332	0.0	312	\0.001	\0.00 1	0.202
Brahmin/Chhetri	0.9	583	0.8	766	0.9	673	< 0.001	< 0.001	0.074
Others (Newar,									
Gurung/Thakali,	1.0	162	0.8	152	0.8	182	<0.001	< 0.001	0.108
Non-dalit Terai caste)									

	20	2017		18	20	19	P-value	P-value	P-value
	Mean	N	Mean	N	%	N	2017/	2017/	2018/
							2018	2019	2019
Urban/rural residence									
Urban	0.9	686	0.7	951	0.8	930	< 0.001	< 0.001	0.014
Rural	1.0	726	0.8	959	0.8	897	<0.001	<0.001	0.553
Agro-ecological zone									
Mountain	1.0	163	0.7	237	0.7	238	< 0.001	<0.001	0.377
Hill	0.9	751	0.7	1090	0.8	1017	< 0.001	<0.001	0.008
Terai	1.0	498	0.9	583	0.8	572	< 0.001	<0.001	0.609

Table 9.23 Sixty contact points: Mean PNC visits for children within 24 hours of birth, among mothers with children <2 years

	mountain and a your								
	20	1/	20	18	20	19	P-value	P-value	P-value
	Mean	N	Moon	N	%	N	2017/	2017/	2018/
	Mean	IN	Mean	IN	70	IN	2018	2019	2019
Total	0.7	1820	0.8	1910	0.8	1825	0.001	< 0.001	0.070
Equity quintile									
Lowest	0.6	281	0.7	343	0.7	287	<0.001	0.004	0.335
2nd lowest	0.7	522	0.7	471	0.8	424	0.691	0.001	0.007
Middle	0.8	424	0.8	<i>4</i> 88	0.8	405	0.921	0.406	0.369
2nd highest	0.8	379	0.9	455	0.9	535	0.324	0.561	0.674
Highest	0.8	114	0.9	153	0.9	174	0.566	0.202	0.602
Caste/ethnicity									
Socially excluded (Dalit,	0.7	884	0.8	992	0.8	972	0.043	0.013	0.423
Muslim, disadvantaged)		004							
Brahmin/Chhetri	0.8	727	0.8	766	0.9	672	0.002	<0.001	0.090
Others (Newar,									
Gurung/Thakali,	0.7	209	0.7	152	0.8	181	0.690	0.038	0.070
Non-dalit Terai caste)									
Urban/rural residence									
Urban	0.7	916	0.7	951	0.8	928	0.053	0.001	0.062
Rural	0.8	904	0.8	959	0.8	897	0.003	0.002	0.505
Agro-ecological zone									
Mountain	0.7	235	0.7	237	0.8	238	0.350	0.027	0.083
Hill	0.7	989	0.8	1090	0.8	1016	0.002	< 0.001	0.015
Terai	0.8	589	0.9	583	0.8	571	0.103	0.725	0.251

Table 9.24 Sixty contact points: Mean GMP visits in the last six months among mothers with children <2 years

	20	18	20	19	P-value
_	Mean	N	Mean	N	2018/ 2019
Total	2.5	1798	2.7	1727	< 0.001
Equity quintile					
Lowest	2.5	318	2.3	276	0.177
2nd lowest	2.5	449	2.8	409	0.074
Middle	2.4	460	2.9	393	< 0.001
2nd highest	2.3	<i>4</i> 23	2.8	502	< 0.001
Highest	2.5	148	2.6	167	0.703
Caste/ethnicity					
Socially excluded (Dalit Muslim, disadvantaged)	2.4	931	2.7	930	0.003
Brahmin/Chhetri	2.6	734	2.9	654	0.028
Others (Newar, Gurung/Thakali, Non-dalit Terai caste)	1.9	133	2.4	163	0.039
Urban/rural residence					
Urban	2.2	878	2.4	876	0.012
Rural	2.7	920	3.0	871	0.006
Agro-ecological zone					
Mountain	2.2	226	2.4	219	0.488
Hill	2.7	1041	2.8	989	0.076
Terai	2.2	531	2.7	539	< 0.001

Table 9.25 Sixty contact points: Mean HMG attendance in the last six months among mothers with children <2 years

	20 ⁻	18	20	19	P-value
_	Mean	N	Mean	N	2018/ 2019
Total	3.7	446	3.9	424	0.309
Equity quintile					
Lowest	3.5	104	3.5	83	0.731
2nd lowest	3.8	126	4.2	109	0.314
Middle	3.9	108	3.7	109	0.743
2nd highest	3.6	93	4.3	107	0.011
Highest	3.2	15	3.1	16	0.218
Caste/ethnicity					
Socially excluded (Dalit, Muslim, disadvantaged)	3.7	211	3.7	222	0.672
Brahmin/Chhetri	2.8	221	4.2	180	0.495
Others (Newar,					
Gurung/Thakali,	2.6	14	4.4	22	0.126
Non-dalit Terai caste)					
Urban/rural residence					
Urban	3.2	180	3.7	190	0.174
Rural	4.0	266	4.1	234	0.917

Agro-ecological zone

	201	18	20	2019			
	Mean	Mean N		N	2018/		
	IVIEdII	IN			2019		
Mountain	3.2	71	3.3	79	0.081		
Hill	3.8	288	4.0	262	0.172		
Terai	3.8	87	4.4	83	0.167		

9.4 Suaahara II coverage, disaggregated

The following are some of the key findings for reach of SII interventions, with disaggregated analysis by equity quintile (socio-economic equity); caste/ethnicity (social equity); urban/rural and agro-ecological zone of residency (geographic/distance equity), and mother's age (socio-demographic equity):

- Any exposure: The prevalence of mothers having ever heard of *Suaahara* saw great gains, with an increase of 44*pp* between 2017 and 2019 (P:<0.001). All sub-groups saw significant gains between 2017 and 2019 as well. Among the equity quintiles, each saw gains of more than 30*pp*, but the most progress was in the 2nd lowest equity quintiles with increases of 49*pp* (P:<0.001) in each. All caste/ethnicity groups saw an increase of 34*pp* or more, with the socially excluded caste group seeing the largest increase of 47*pp* (P:<0.001). While all geographic areas had large progress, the largest variation existed among agro-ecological zones hill and *terai* populations saw increases of 48 and 42*pp* (P:<0.001). However, *terai* populations had a lower absolute prevalence than hill and *mountain* populations at 63% vs. 94% and 88%, respectively (Table 9.26).
- **FLW interaction**: The prevalence of mothers having met a SII FLW in the previous 6 months increased by 33pp between 2017 and 2019 (P:<0.001). Similar progress was seen across equity quintiles and caste/ethnicity groups, with the largest increase seen among the middle equity quintile at 39pp (P:<0.001). Variation by agro-ecological zone shows that the prevalence in the hill increased by 41pp and terai by 30pp (P:<0.001). However, the terai populations had the lowest prevalence (Table 9.27).
- **Community events**: There was a 36*pp* increase in mothers reporting to have participated in SII community events, other than group meetings (P:<0.001). Though all equity quintiles saw a similar prevalence of about half of mothers participating in *Suaahara* activities by 2019, an overall increase by more than 40*pp* was seen for the both lowest 2 equity quintiles between 2017 and 2019, indicating a much larger change over time than higher quintiles. For caste/ethnicity sub-populations, the most progress was found for the brahmin/chhetri caste group, with a 37*pp* increase. Similarly, geographic variation in progress was seen with the highest increases seen among urban residents with 37*pp* and among hill populations with 39*pp* (P:<0.001) (Table 9.28).
- by 37pp between 2017 and 2019 (P:<0.001). This large gain was seen for all population sub-groups. Among the highest equity quintile, an increase by 38pp was found (P:<0.001), but the increase was at least 30pp for each lower equity quintile. The Brahmin/Chhetri caste group saw an increase of 37pp (P:<0.001), the highest among caste/ethnicity groups. Among the three agro-ecological zones, the biggest increase was seen in the mountain group with a 44pp increase over time (P:<0.001), while the hill and terai populations saw increases of 41pp and 26pp, respectively (P:<0.001). (Table 9.29). The overall change in those who ever listened to Bhanchhin Aama was by 30pp (P:<0.001) and the sub-population variation was like that already described for ever heard of the program. (Table 9.30).

• **SMS:** The prevalence of having received any health/nutrition SMS on their own mobile phone increased by 13*pp* between 2017 and 2019 (P:<0.001). This significant gain was seen in all sub-groups. All sub-populations saw an increase from 8-16*pp* (P:<0.001 for all except the highest equity quintile, P:0.002). The lowest absolute prevalence of receiving messages, however, occurred among the lowest equity quintile at only 12% of mothers. There was also some variation among caste groups, as other groups saw 18% of mothers receiving messages while the *Brahmin/Chhetris and* socially excluded groups saw 17% and 14%, respectively (Table 9.31).

Table 9.26 Ever heard of *Suaahara* (among mothers with children <2 years)

	201	17	20	18	201	9	D volue	P-value	P-
	Mean	N	Mean	N	%	N	2017/ 2018	2017/ 2019	value 2018/ 2019
Total	39.3%	1848	70.3%	1909	83.4%	1826	<0.001	<0.001	<0.001
Equity quintile									
Lowest	42.4%	387	76.7%	343	88.2%	287	< 0.001	< 0.001	<0.001
2nd lowest	39.8%	528	77.1%	471	89.2%	425	< 0.001	< 0.001	< 0.001
Middle	41.0%	429	72.3%	488	85.7%	405	< 0.001	< 0.001	<0.001
2nd highest	34.2%	389	60.4%	454	78.5%	535	< 0.001	< 0.001	< 0.001
Highest	37.4%	115	57.5%	153	71.3%	174	0.001	< 0.001	< 0.001
Caste/ethnicity									
Socially excluded (Dalit, Muslim, disadvantaged)	35.2%	895	68.0%	991	82.1%	972	<0.001	<0.001	<0.001
Brahmin/Chhetri	47.2%	740	77.6%	766	90.9%	672	< 0.001	< 0.001	< 0.001
Others (Newar, Gurung/Thakali, Non-dalit Terai caste)	29.1%	213	48.0%	152	62.6%	182	0.008	<0.001	<0.001
Urban/rural residence									_
Urban	35.6%	933	67.2%	951	80.0%	930	< 0.001	< 0.001	<0.001
Rural	42.9%	915	73.3%	958	86.9%	896	< 0.001	< 0.001	<0.001
Agro-ecological zone									
Mountain	59.1%	237	88.1%	236	87.8%	237	< 0.001	< 0.001	0.229
Hill	45.7%	1017	80.8%	1090	93.8%	1017	< 0.001	< 0.001	0.00
Terai	20.6%	594	43.2%	583	63.1%	572	<0.001	<0.001	<0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.27 Ever met Suaahara FLWs (among mothers with children <2 years)

rable of the cadamara in the famous memore man emailer at years,											
	201	17	20	18	2019	9	P-value	P-value	P-value		
	%	N	%	N	%	N	2017/	2017/	2018/		
	/0	IN	/0	IN	/0	IN	2018	2019	2019		
Total	14.7%	1848	34.7%	1909	48.0%	1826	<0.001	<0.001	<0.001		
Equity quintile											
Lowest	17.6%	387	33.8%	<i>34</i> 3	45.0%	287	0.001	< 0.001	0.015		
2nd lowest	17.4%	528	37.6%	471	50.1%	<i>4</i> 25	< 0.001	< 0.001	< 0.001		
Middle	15.4%	429	40.6%	488	53.6%	405	< 0.001	< 0.001	< 0.001		
2nd highest	10.0%	389	29.5%	454	46.5%	535	< 0.001	< 0.001	< 0.001		
Highest	5.2%	115	24.2%	153	39.7%	174	0.001	<0.001	<0.001		
Caste/ethnicity									_		
Socially excluded (Dalit, Muslim, disadvantaged)	15.3%	895	33.9%	991	51.2%	972	<0.001	<0.001	<0.001		

	201	17	20	18	2019	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Brahmin/Chhetri	15.0%	740	37.6%	766	47.0%	672	<0.001	<0.001	<0.001
Others (Newar,									
Gurung/Thakali,	10.8%	213	25.0%	152	34.6%	182	0.005	< 0.001	0.003
Non-dalit Terai caste)									
Urban/rural residence									
Urban	11.3%	933	29.0%	951	<i>4</i> 5.2%	930	< 0.001	< 0.001	< 0.001
Rural	18.1%	915	40.3%	958	51.0%	896	< 0.001	< 0.001	0.001
Agro-ecological zone									
Mountain	21.9%	237	52.1%	236	35.0%	237	< 0.001	0.502	0.001
Hill	18.6%	1017	38.9%	1090	58.4%	1017	< 0.001	< 0.001	< 0.001
Terai	5.1%	594	19.7%	583	35.0%	572	<0.001	<0.001	<0.001

Table 9.28 Ever participation in *Suaahara* community activities, other than group meetings (among mothers with children <2 years)

	201	17	201	18	2019)	P-value	P-value	P-value
	%	N	%	N	%	N	2017/ 2018	2017/ 2019	2018/ 2019
Total	12.2%	1848	32.8%	1909	48.0%	1826	<0.001	<0.001	<0.001
Equity quintile									
Lowest	13.7%	387	40.5%	343	57.5%	287	< 0.001	< 0.001	< 0.001
2nd lowest	12.9%	528	39.3%	471	53.4%	425	< 0.001	< 0.001	< 0.001
Middle	14.7%	429	32.4%	488	49.9%	405	< 0.001	< 0.001	< 0.001
2nd highest	8.7%	389	26.7%	454	42.4%	535	< 0.001	< 0.001	< 0.001
Highest	6.1%	115	15.0%	153	31.6%	174	0.050	< 0.001	< 0.001
Caste/ethnicity									
Socially excluded (Dalit Muslim, disadvantaged)	12.5%	895	34.2%	991	49.8%	972	<0.001	<0.001	<0.001
Brahmin/Chhetri	13.2%	740	33.7%	766	50.0%	672	<0.001	<0.001	<0.001
Others (Newar, Gurung/Thakali, Non-dalit Terai caste)	7.0%	213	19.1%	152	30.8%	182	0.006	<0.001	<0.001
Urban/rural residence									
Urban	9.1%	933	30.6%	951	45.9%	930	< 0.001	< 0.001	< 0.001
Rural	15.3%	915	35.0%	958	50.1%	896	<0.001	<0.001	<0.001
Agro-ecological zone									
Mountain	20.3%	237	36.0%	236	45.2%	237	0.001	< 0.001	0.126
Hill	14.2%	1017	39.5%	1090	52.8%	1017	< 0.001	< 0.001	< 0.001
Terai	5.6%	594	19.0%	583	40.7%	572	<0.001	<0.001	

Table 9.29 Ever heard of Bhanchhin Aama (among mothers with children <2 years)

Table 9.29 Ever fleard of Brianchillin Aania (among mothers with children <2 years)									
	201	17	201	18	201	19	P-	P-	P-
							value	value	value
	%	Ν	%	Ν	%	Ν	2017/	2017/	2018/
							2018	2019	2019
Total	31.1%	1848	54.0%	1909	67.9%	1826	<0.001	<0.001	<0.001
Equity quintile									_
Lowest	27.4%	387	55.1%	343	67.9%	287	< 0.001	< 0.001	< 0.001
2nd lowest	34.5%	528	55.8%	471	70.6%	<i>4</i> 25	< 0.001	< 0.001	< 0.001
Middle	35.7%	429	61.5%	488	71.4%	405	<0.001	< 0.001	< 0.001
2nd highest	28.0%	389	48.0%	454	66.2%	535	< 0.001	< 0.001	< 0.001
Highest	20.9%	115	39.9%	153	58.6%	174	0.002	< 0.001	< 0.001
Caste/ethnicity									
Socially excluded (Dalit	28.6%	895	50.8%	991	65.7%	972	-0.001	<0.001	-0.001
Muslim, disadvantaged)	20.070	030	30.070	331	00.7 70	312	\0.00 1	\0.00 1	\0.001
Brahmin/Chhetri	38.5%	740	61.0%	766	75.9%	672	<0.001	< 0.001	< 0.001
Others (Newar,									
Gurung/Thakali,	15.5%	213	40.1%	152	50.0%	182	< 0.001	< 0.001	0.003
Non-dalit Terai caste)									
Urban/rural residence									
Urban	25.7%	933	52.0%	951	67.6%	930	<0.001	< 0.001	< 0.001
Rural	36.5%	915	56.1%	958	68.2%	896	<0.001	< 0.001	< 0.001
Agro-ecological zone									
Mountain	35.0%	237	60.2%	236	78.5%	237	<0.001	< 0.001	< 0.001
Hill	37.2%	1017	65.6%	1090	78.4%	1017	< 0.001	< 0.001	< 0.001
Terai	19.0%	594	29.9%	583	44.9%	572	0.003	<0.001	<0.001

Note: Italics indicates that statistical testing was done to test the differences found in this indicator's results in 2017, 2018, and 2019, with the result presented in the P-value column.

Table 9.30 Ever listened to Bhanchhin Aama (among mothers with children <2 years)

	201	17	201	18	201	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	1 1	70	IN	70	11	2018	2019	2019
Total	21.3%	1848	40.1%	1909	51.3%	1826	<0.001	<0.001	<0.001
Equity quintile									
Lowest	19.6%	387	40.2%	343	51.9%	287	< 0.001	< 0.001	< 0.001
2nd lowest	22.6%	528	43.3%	471	53.2%	<i>4</i> 25	< 0.001	< 0.001	< 0.001
Middle	24.5%	429	47.8%	488	51.9%	405	< 0.001	< 0.001	0.032
2nd highest	19.8%	389	33.3%	454	52.3%	535	< 0.001	< 0.001	< 0.001
Highest	13.9%	115	25.5%	153	41.4%	174	0.020	<0.001	<0.001
Caste/ethnicity									
Socially excluded (Dalit,	18.2%	895	36.1%	991	48.4%	972	<0.001	<0.001	<0.001
Muslim, disadvantaged)	10.2 /0	030	30.170	331	70.770	312	\0.00 1	\0.00 1	\0.001
Brahmin/Chhetri	27.8%	740	47.7%	766	58.9%	672	<0.001	< 0.001	<0.001
Others (Newar,									
Gurung/Thakali,	11.3%	213	27.6%	152	39.0%	182	<0.001	< 0.001	0.016
Non-dalit Terai caste)									
Urban/rural residence									
Urban	19.1%	933	37.4%	951	50.1%	930	< 0.001	< 0.001	< 0.001
Rural	23.5%	915	42.7%	958	52.6%	896	<0.001	<0.001	<0.001
Agro-ecological zone	•		•	•	•		•		
Mountain	21.9%	237	46.6%	236	62.0%	237	<0.001	<0.001	<0.001

	201	2017		2018 2		2019		P-value P-value P-value		
	<u>~</u>	N	% N	NI 0/	0/ NI	N %	N	2017/	2017/	2018/
	70	IN	70	IN	70	IN	2018	2019	2019	
Hill	27.1%	1017	48.4%	1090	59.8%	1017	<0.001	<0.001	<0.001	
Terai	10.9%	594	22.0%	583	31.8%	572	< 0.001	< 0.001	< 0.001	

Table 9.31 Received health/nutrition SMS on own mobile phone in last month (among mothers with children <2 years)

with children <2 years)									
	20	17	20	18	201	9	P-value	P-value	P-value
	%	N	%	N	%	N	2017/	2017/	2018/
	70	IN	70	IN	70	IN	2018	2019	2019
Total	2.2%	1476	6.1%	1579	15.4%	1612	< 0.001	<0.001	< 0.001
Equity quintile									
Lowest	1.1%	269	2.5%	245	11.8%	237	0.172	< 0.001	< 0.001
2nd lowest	1.5%	395	3.6%	394	13.6%	369	0.293	< 0.001	< 0.001
Middle	2.4%	371	9.2%	412	16.5%	364	< 0.001	< 0.001	< 0.001
2nd highest	3.6%	335	7.1%	382	17.0%	482	0.032	< 0.001	< 0.001
Highest	1.9%	106	7.5%	146	17.5%	160	0.131	0.002	0.003
Caste/ethnicity									
Socially excluded (Dalit,	1.6%	693	5.2%	786	13.8%	848	0.002	-0.001	<0.001
Muslim, disadvantaged)	1.070	093	J.Z /0	700	13.070	040	0.002	<0.001	<0.001
Brahmin/Chhetri	2.9%	619	7.4%	672	16.9%	623	<0.001	< 0.001	< 0.001
Others (Newar,									
Gurung/Thakali,	1.8%	164	4.1%	121	18.4%	141	0.086	<0.001	<0.001
Non-dalit Terai caste)									
Urban/rural residence									
Urban	1.9%	745	5.0%	794	14.8%	817	<0.001	< 0.001	< 0.001
Rural	2.5%	731	7.1%	785	16.0%	795	0.002	<0.001	<0.001
Agro-ecological zone				•		•	•	•	
Mountain	0.5%	187	1.6%	184	11.5%	208	0.359	<0.001	< 0.001
Hill	2.7%	817	7.7%	945	18.8%	933	< 0.001	<0.001	< 0.001
Terai	1.9%	472	4.4%	<i>450</i>	10.4%	471	0.046	<0.001	< 0.001
N					11.00				

10. Program Implications

This section presents a discussion, based on the key results from the 2019 annual survey and meetings with thematic program teams, intended to guide programmatic efforts in 2020. While the methodology and sampling for all three surveys were the same, the randomly chosen samples in 2018 and 2019 were slightly better off than those sampled the previous years, evidenced by a consistently rising and significant mean equity quintile score, and both the mothers and household heads were more educated. Interestingly, household structure in the last two years was consistent, with only half of all households having an extended structure, about one-quarter of households being nuclear (mother with child and/or husband only) and nearly one in five mothers residing alone with the child. These key socio-economic and demographic issues should be kept in mind when interpreting results.

Maternal and Child Nutrition:

Nutrition indicators saw tremendous progress between 2017 and 2019. The prevalence of nearly all ideal breastfeeding and complementary feeding practices has increased substantially over time. Maternal dietary indicators also increased between 2017 and 2019 including the prevalence of mothers meeting minimum dietary diversity; eating more during pregnancy than usual; and consumption of eggs and other animal source foods.

Areas for improvement and focus, especially during home visits and community events, include:

- Sick child feeding;
- Consumption of eggs, dairy and meat/fish and decrease consumption of biscuits, sweetened drinks, etc.;
- Eating more during pregnancy and lactation than usual;
- Knowledge on appropriate dietary practices including:
 - Ability to accurately define exclusive breastfeeding and report, when asked, the exact age to stop exclusive breastfeeding;
 - When each complementary food should be introduced
 - o That sick children should be given more food than usual;
- Engaging household heads in child feeding decision-making to help ensure that men also take ownership and responsibility for improving child dietary practices.

Additionally, the disaggregated analyses show that the following prioritization is needed:

- Increasing knowledge of dietary diversity among mothers, as well as the importance of egg and meat consumption among children, in *terai* areas;
- Promoting the importance of egg and meat consumption among mothers, particularly among those in the "other" caste/ethnicity group;
- Promotion of exclusive breastfeeding among those in the highest equity quintile.

Water, Sanitation, and Hygiene

Progress on many key WASH indicators was found between 2017 and 2019 in intervention areas including prevalence of appropriate drinking water treatment practices, frequency of drinking water treatment, soap and water availability at a handwashing station and washing hands at six critical times. The prevalence of households with soap and water at a handwashing station progressed by over 20*pp* between 2017 and 2019. Additionally, the prevalence of drinking water treatment practiced in households steadily increased between 2017 and 2019. However, overall values remain low. Some key examples include: the prevalence of appropriate drinking water treatment, observed in the household, remains very low overall; less than one-quarter of mothers reported to always treat drinking water. Several appropriate handwashing practices, including

before cooking/preparing food, before eating, and before feeding children remain as major gaps. Appropriate menstrual hygiene management practices remained low, with only a quarter of mothers using commercial/disposable pads.

Measurement challenges also abound. For example, to measure drinking water treatment knowledge we ask mothers and household heads to name appropriate drinking water treatment methods. Almost all do name at least one appropriate method, but the majority also name an inappropriate method, the most common being to strain with a cloth. It is nearly impossible to know, however, if they pair these methods or alternate between them which creates huge variations in our understanding of their understanding.

Areas for improvement and focus, especially during home visits and community events, include:

- Improving two key behaviors: household drinking water treatment and handwashing with soap and water at six critical times;
- Improving our FLW and household knowledge on:
 - Appropriate drinking water treatment methods (knowing which methods correct, which methods are incorrect, and WHY it is important)
 - Frequency of appropriate drinking water treatment (knowing that varying the practice by season or any other factor is inappropriate) should be always
 - Handwashing before cooking/preparing food, before eating, before feeding a young child, and after handling animals/livestock is necessary and how it can help to decrease disease;
- Engagement of male household heads, particularly for decisions in purchase of water treatment supplies.

Additionally, the disaggregated analyses show that the following prioritization is needed:

- Increasing access and availability of WASH products, perhaps via local shops, especially in mountain areas;
- Improving handwashing with soap and water at six critical times particularly in *terai* and hill areas.

Health and Family Planning Services

Several health service indicators improved significantly between 2017 and 2019 in intervention areas. These included: mothers receiving at least 4 ANC visits during pregnancy and being weighed during their visit; and an increased prevalence of skilled birth attendant at delivery, receiving breastfeeding support in the first hour after birth, and receiving PNC care for both the mother and child within 24 hours. Both GMP participation and prevalence of growth being interpreted and discussed with caretakers has improved but remains low. Not even one in five children who suffered from diarrhea were given ORS and Zinc by a health worker/FCHV. Interestingly, among mothers that sought treatment for their child's diarrhea, over two thirds went to a health worker/FCHV at a facility or treated at home. There has been no substantial progress on low birth weight or child illness (diarrhea or acute respiratory illness (ARI) related).

The prevalence of non-pregnant mothers using any modern method of family planning increased slightly between 2018 and 2019, and progress is being made overall in doing anything to delay/avoid pregnancy. However, the overall prevalence of using a modern method remains low at roughly one-third. While almost everyone could identify a modern method of family planning, knowledge of other HTSP messages such as birth spacing and pregnancy after miscarriages/abortions was remarkably low (less than one in five) among both mothers and household heads.

Areas for improvement and focus, especially during home visits and community events, include:

- Health worker and FCHV actions:
 - o Provision/recommendation of ORS and Zinc for a child who has diarrhea;
 - Recommending IFA during ANC and PNC;
- Knowledge at the health facility and FCHV level related to the importance of:
 - o ORS and Zinc being given to children with diarrhea;
 - GMP (especially P promotion), quality interpretation of growth progress in child health card, and appropriate counseling during GMP visits;
- Household participation in attending GMP monthly for children 0 to 2 years;
- Knowledge among all household adults (particularly household heads) regarding:
 - o Exact number of ANC visits, PNC visits, and IFA tablets needed
 - Key HTSP messages, particularly birth spacing and pregnancies after miscarriages/abortions;
- Encourage male adult household members to contribute to child healthcare decisions.

Additionally, the disaggregated analyses show that the following prioritization is needed:

- Increasing access to antenatal care and promoting at least 4 antenatal care visits for pregnant mothers, in mountain, hill, and particularly in *terai* areas;
- Improving access to IFA tablets during pregnancy and decreasing the occurrence of stockouts in clinics and pharmacies;
- Participation in attending GMP monthly for children 0-2 years particularly in the mountain and hill areas:
- Encouraging HMG attendance among the "other" caste/ethnicity groups.

Agriculture/Enhanced Homestead Food Production

Progress on agriculture-related indicators was found between 2017 and 2019 in EHFP intervention areas including increases in the prevalence of household food security, but for many key indicators the absolute values remain low. The majority of household heads owned some kind of agricultural land, and there was an increase in households having a kitchen/EHFP garden; and overall, an increase in those gardens meeting minimum criteria established *a priori*. There was an increase in prevalence of households cultivating dark green leafy vegetables, but no change in other nutrient-dense vegetables. Nearly two of three of these gardens did not have crop plotting and the production only provides food for the family for half of the year.

Overall, there was no significant change among those selling surplus vegetables, and prevalence of egg sales declined slightly among those that produced them. Additionally, there was a significant decline in reported availability of EHFP beneficiary groups – 2019 presented less reported availability than the initial level in 2017.

Participation in decision-making increased significantly for male household heads and mothers for horticulture and for poultry and milk/meat processing alike. However, both saw significant declines in having input into decision-making for horticulture and poultry rearing/management.

Areas for improvement and focus, especially during home visits and community events, include:

- Increased awareness and participation in HFP groups;
- Increased knowledge on the benefits of homestead gardening to improve diet, particularly among mothers;
- Awareness of the importance of vaccinating poultry regularly (New Castle specifically) and greater adoption of actions to prevent and treat chicken illness;

- Work with VMFs and EHFP households to remind them of the importance of interactions with new 1000-day households;
- Continued increases in diversity of vegetables produced and egg production;
- Increased production of surplus and selling it to generate income.

Finally, all adult household members should be encouraged to increase input into agriculturerelated decisions.

SBCC

The time it takes to roll-out and scale-up implementation can be seen in the SBCC indicator progress between 2017 and 2019. Exposure to *Suaahara* among mothers and household heads has increased tremendously. Nearly all households have now heard of SII, but gains have also been made in the prevalence of households having met a SII FLW in the last 6 months; ever being visited at home by a SII FLW; and ever having met an FS outside of a home visit or HMG meeting. Similarly, there was an overall increase in participation in non-group SII activities, with almost half of women in 2019 up from less than one in five in 2017. To date, however, participation by men remains limited.

Reported exposure to FCHVs among mothers and having received a home visit by an FCHV in the previous 6 months among all household adults increased significantly. Similarly, more mothers reported that an FCHV-led group exists in the community, but the prevalence of participation dropped significantly.

Regarding SII mass media efforts, awareness of *Bhanchhin Aama* saw significant increases. Nearly half of all household heads and over two thirds of mothers have heard of the program. Interestingly, the prevalence of those that ever listened to the program among those that have ever heard of it decreased significantly for all household adults. Nearly all households now own mobile phones and more than two out of three households own a smart phone.

Areas for improvement and focus, especially during home visits and community events, include:

- Household member participation in HMGs should be encouraged by SII, particularly as an
 opportunity to meet with other mothers and learn about health and nutrition beyond SII;
- FS/CNV focus on men and other family members during home visits and encourage their participation in SII events (e.g. key life events, triggering sessions, and day celebrations);
- Need continued focus in all platforms to increase awareness of BA, but also to motivate listenership on a regular basis;
- Promotion of other means of listening to *Bhanchhin Aama*, including using a mobile phone or watching the recordings on Facebook at one's own convenience, during HMG meetings, etc.:
- Continued enrollment of mobile numbers (not just mothers) to increase the reach of the SMS campaign.

GESI

In addition to the GESI-focused factors for each of the thematic areas integrated above, some additional GESI insights were found in the three rounds of surveys, particularly by conducting disaggregated analysis by equity quintile (socio-economic inequity), caste/ethnicity (social inequity), and urban/rural and agro-ecological zone (geographic inequity), and to understand how sub-groups have progressed on key indicators such as SII's ten key behaviors (ORS/zinc given to sick children is a key behavior, but was omitted in this report due to small sample sizes). While the absolute value varies by sub-group and specific behavior, the prevalence improved for several

sub-groups for the following 10 key SII behaviors between 2017 and 2019. The following describes specifically where increases/decreases were non-significant for the two-year period, and thus indicates on which populations the *Suaahara II* teams could focus their efforts.

1. Maternal diet

- a. Minimum dietary diversity: equity quintile (highest increased from 44% to 47%)
- b. Egg consumption: equity quintile (second highest increased from 13% to 17%); caste/ethnicity (other increased from 9% to 14%)
- c. Meat consumption: equity quintile (middle increased from 31% to 36%); agroecological zone (*terai* stayed at 31%);
- **2.** ANC visits (at least 4): equity quintile (highest increased 86% to 91%); caste/ethnicity (other increased from 81% to 83%);
- **3.** 180 IFA during pregnancy: only 3 significant increases (second lowest equity quintile, mountain and terai agro-ecological zones); all others remained the same or changed non-significantly;
- **4.** Modern method of family planning: equity quintile (range of change between 0%-6%); and caste/ethnicity (Brahmin/Chhetri dropped from 29% to 25%, socially excluded remained at 34%); urban/rural (urban remained at 30%, rural at 31% to 32%); agro-ecological zone (all moved by 2% or less);

5. Child diet

- a. Minimum dietary diversity: equity quintile (highest remained at 60%), caste (other increased from 43% to 47%), agro-ecological zone (*terai* increased from 42% to 46%)
- b. Egg consumption: equity quintile (highest increased from 18% to 25%); caste/ethnicity (others increased from 17% to 21%)
- c. Meat consumption: equity quintile (only middle and second highest significant, others increased by 2%-6%); caste/ethnicity (Brahmin/Chhetri and other only 1%-2% increase); urban/rural (urban 18% to 21%); agro-ecological zone (*terai* 1% increase)
- d. Iron rich foods: equity quintile (lowest and two highest increased then decreased, net increase of 3-6%); agro-ecological zone (*terai* increased 87% to 90%); mother's age (only 25-29 saw significant change, other groups 3%-6% increase);
- 6. Sick child feeding: no significant change;
- **7.** Exclusive breastfeeding: equity quintile (middle increased from 75% to 84%, and highest increased from 56% to 74%):
- **8.** Drinking water treatment: equity quintile (lowest, middle, and highest saw only 1-2% change); caste/ethnicity (others remained the same at 15%); agro-ecological zone (mountain increased 10% to 13%, *terai* increased 9% to 13%);
- **9.** Handwashing at six critical times: all non-significant change other than urban/rural (urban increased 6% to 11%) and agro-ecological zone (mountain increased 7% to 19%).

11. Annexes

Annex 1
Field Staff Selected for Data Collection

	Number of field staff collected (N=72)
	Mean (SD)/%
Field work experience	
Years of experience (mean, SD)	5.1 (3.6)
Suaahara II (2018)	12.5%
Suaahara II (2017 and 2018)	44.4%
Others (AFSP, Palika, NDHS, KAP/Kawach)	38.9%
None	4.2%
Education	
MA	23.6%
BA	52.8%
Others (IA, PCL, CMA, ANM)	23.6%
Gender	
Male	29.2%
Female	70.8%

SN	Origin District	Language spoken other than Nepali	Education	Years of field work experience	Field work experience
1	Dhanusha	Maithali, Awadhi	MA	13	Suaahara II (2017 & 2018)
2	Jhapa		MA	9	Suaahara II (2017 & 2018)
3	Jhapa	Hindi, Awoadhi, Maithali	IA	15	Suaahara II (2018)
4	Morang		B. Ed.	15	NDHS, Poshan, Palika
5	Gorkha		B.Ed	7	Suaahara II (2017 & 2018)
6	Dang	Tharu, Hindi	IA	16	Suaahara II (2017 & 2018)
7	Sindhuli		BA	7	Suaahara II (2017 & 2018)
8	Rautahat		BA	7	Suaahara II (2017 & 2018)
9	Rautahat		B.Ed.	16	Suaahara II (2017 & 2018)
10	Lamjung		BBS	7	Suaahara II (2017 & 2018)
11	Sindhupalchowk		BBS	7	Suaahara II (2017 & 2018)
12	Okhaldhunga		BA	9	Suaahara II (2017 & 2018)
13	Okhaldhunga		IA	11	Suaahara II (2017 & 2018)
14	Lamjung		BA	4	Suaahara II (2017 & 2018)
15	Baitadi	Hindi, Doteli	MA	3	Suaahara II (2017 & 2018)
16	Sindhuli		B.Ed.	8	Suaahara II (2017 & 2018)
17	Baitadi		M.Ed.	5	Suaahara II (2017 & 2018)
18	Nuwakot		B.Ed.	4	NDHS, FFP, Hariyo Ban
19	Kathmandu	Newari/Hindi	IA	7	Suaahara II (2018)
20	Nuwakot		BA	4	AFSP/Palika
21	Jhapa		BA	6	NDHS/ Others
22	Nuwakot		B.Ed.	5	Suaahara II (2017 & 2018)
23	Lalitpur	Hindi	M.Ed.	6	Suaahara II (2017 & 2018)
24	Bardiya	Tharu, Hindi	BA	4	Suaahara II (2017 & 2018)
25	Bhaktapur	Hindi	IA	6	Suaahara II (2017 & 2018)
26	Dhading		BPH	4	Suaahara II (2017 & 2018)
27	Dolakha	Hindi	B.Ed.	5	Suaahara II (2017 & 2018)
28	Kathmandu		IA	4	Suaahara II (2017 & 2018)
29	Banke	Awadhi, Hindi	BA	3	Suaahara II (2017 & 2018)

30	Kathmandu	-	IA	3	Suaahara II (2017 & 2018)
31	Dang	Tharu	B.Ed.	3	Suaahara II (2017 & 2018)
32	Kathmandu	District 2	BSW	3	Suaahara II (2017 & 2018)
33	Dhanusha	Bhojpuri	IA	10	Suaahara II (2017 & 2018)
34	Bardiya	Tharu, Hindi	M.Ed.	4	Suaahara II (2017 & 2018)
35	Gorkha		MA	4	Suaahara II (2017 & 2018)
36	Sindhupalchowk		BA	3	Suaahara II (2017 & 2018)
37	Nuwakot	T l	B.Ed.	5	Suaahara II (2017 & 2018)
38	Dang	Tharu	BA	5	Suaahara II (2017 & 2018)
39	Kavre	Thom	M.Ed.	5	Suaahara II (2018)
40	Dang	Tharu	IA NA	4	Suaahara II (2018)
41 42	Kanchanpur	Doteli, Hindi	MA B.Sc.	5 3	Suaahara II (2018)
42 43	Syangja	Hindi Thoru/Hindi	B. Ed.	ა 5	Suaahara II (2018)
	Kailali	Tharu/Hindi	B. Eu. BA	5 5	Suaahara II (2018)
44	Palpa	Tharu	DA	Э	Suaahara II (2018)
45	Morang	Hindi, Awoadhi, Maithali	MA	4	Suaahara II (2018)
46	Gulmi		MA	5	Palika
47	Jhapa		BA	3	Palika
48	Kailali	Tharu, Awadhi	IA	2	Palika
49	Kathmandu	,	BA	3	Palika
50	Kailali	Bhojpuri, Awadhi	BA	6	Palika
51	Jhapa	, ,	M.Ed.	5	Others
52	Kathmandu		M.Ed.	1	Others
53	Kathmandu		BA	1	Others
54	Bhaktapur		BA	2	Others
55	Lalitpur		BA	5	KAP/Kawach
56	Banke	Hindi	MA		
57	Horkha	Hindi	IA	5	KAP/Kawach
58	Gorkha		IA	2	Others
59	Taplejung		BA	1	Others
60	Kavre		PCL		
61	Kathmandu		BA	2	Others
62	Jajarkot	Hindi	ANM	3	Others
63	Bhaktapur		BPH	2	Others
64	Kathmandu		ANM	3	Others
65	Kavre		BPH	2	Others
66	Morang	Maithali	IA	2	Kawach
67	Bhaktapur		MA	4	Others
68	Morang	Tharu, Hindi, Maithali	ВА	1	Education
69	llam	Hindi	MA		
70	Siraha	Maithali, Bhojpuri	CMA	1	Palika
71	Kailali	Tharu, Maithali, Bhojpuri	ВА	2	Others
72	Khotang	Hindi	M.Ed.	1	Others

DISCLAIMER: This report is made possible by the generous support of the American people through the United States Agency for International Development (USAID). The content of this report is produced by Helen Keller International, Suaahara II Program and does not necessarily reflect the views of USAID or the United States Government.

INTERNATIONAL

DBI EA