**DISTRICT-LEVEL INTERVIEW GUIDE**

Types of Respondents:
- **ICDS** - District Project Officer (DPO)
- **Health** - District Program Manager (DPM), District Community Mobilizer (DCM)

**INTERVIEWER FILL OUT BEFORE LEAVING FOR INTERVIEW**

<table>
<thead>
<tr>
<th>Place</th>
<th>Respondent</th>
</tr>
</thead>
<tbody>
<tr>
<td>State (State code)</td>
<td>Respondent’s name</td>
</tr>
<tr>
<td>District (District code)</td>
<td>Respondent job title</td>
</tr>
<tr>
<td>Date of the interview (dd) (mm) (yyyy)</td>
<td>Respondent department</td>
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</table>

**FILE NAME:**

*INFORMED CONSENT* - Obtain permission from the interviewee to be interviewed.

Proceed after the interviewee gives consent to be interviewed:

**INTERVIEWER FILL OUT AT BEGINNING OF INTERVIEW**

1. Time interview started
   - Hrs
   - Min

**INTERVIEWER FILL OUT AT THE END OF INTERVIEW**

2. Time interview ended
   - Hrs
   - Min

3. Location of the interview
   - District office
   - Other (Specify)

4. Which language did the respondent speak? (circle the response)
   - Hindi
   - Odiya
   - Other (specify)

5. Who was present at the interview? (List all the people including the interviewer and the note taker)

6. What is your assessment of the respondent’s accuracy?
   - Good / okay
   - Not so good / bad (provide comments)

**Interviewer Comments**

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**Interview Status**
(Circle the appropriate choice)

- Completed
- Respondent unavailable
- Not found in the block
- Respondent temporarily unavailable
- Refused part way
- Refused full interview

**FOR SUPERVISOR ONLY**

<table>
<thead>
<tr>
<th>Date (dd/mm/yyyy)</th>
<th>Name of the supervisor</th>
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<tbody>
<tr>
<td>Supervisor reviewed the interview</td>
<td></td>
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</table>
**Instructions:** Where multiple choices exist (ICDS/Health), **CIRCLE** the appropriate type of respondent you are directing the questions.

*italics* = instructions to interviewer  
(italics) = examples or concepts for the interviewer to keep in mind.

### A. GENERAL INFORMATION
1. How long have you been working as ___________?

### B. WORK RESPONSIBILITIES AND WORKLOAD
2. What are your main responsibilities as ___________?
3. Who do you supervise?  *Interviewer: type of people that report to them*

### C. ICDS AND HEALTH SERVICES AND COORDINATION
4. What services and programs do you provide for mothers and children <2 years?

   *[If not mentioned, probe for:]*  
   1. Breastfeeding counseling  
   2. Counseling on complementary feeding, including food safety, hygiene and sanitation  
   3. Maternal care and nutrition (for pregnant and lactating women)  
   4. IFA supplementation for 6-36 months and reproductive-age women  
   5. Immunization  
   6. Vitamin A supplementation  
   7. Deworming  
   8. Diarrhea treatment and prevention (ORS)  
   9. SAM treatment  
   10. Malaria treatment and prevention (bed nets)  
   11. Antenatal care  
   12. Growth monitoring  
   13. Supplementary nutrition for mothers and children  
   14. Any other programs specific to the district

5. Do you provide home visits?  
   *[Probe:]*  
   - Services covered

6. Which of the services require close coordination with (ICDS/Health) at the district-level?

7. Among these, where do you have **good** coordination with (ICDS/Health) at the district-level?  
   *[Probe:]*
• What makes you say that it is good? (*definition of good coordination*)
• Tell me about how you coordinate.
• What helps with coordination? (*facilitators to coordination*)
• What makes it difficult to coordinate? (*barriers to coordination*)

8. In which service have you had **poor** coordination with (ICDS/Health) at the district-level?

[Probe:]
• What makes you say that it is poor? (*definition of poor coordination*)
• Tell me about what happened.
• Was there coordination for this service before?
• What has made it difficult to coordinate now? (*barriers to coordination*)
• Did you try (doing) anything to make the situation better?
• Other instances where you faced poor coordination?

*[If no or minimum coordination:]*
• Do you think there should be more coordination?
• What is keeping you from having more coordination?
• What would be helpful in making this possible?

**D. SPECIFIC MECHANISMS OF CONVERGENCE**

9. Please tell us how do you coordinate **action plans** with (ICDS/Health) at the district-level?

[Probe:]
• What do the action plans usually include?
• Anything that helps/makes it difficult to prepare the plans? (*facilitators and barriers*)
• Any state guidelines on how to prepare joint action plans?

10. Tell us how do you coordinate any **trainings** with (ICDS/Health) at the district-level?

[Probe:]
• What do the trainings usually cover? (*type/purpose of training*)
• Who receive these trainings?
• How often do you coordinate the trainings?
• Anything that helps/makes it difficult to coordinate? (*facilitators and barriers*)
• What would be helpful to make the coordination better?
• Any guidelines from the state on how to coordinate joint training?

*[If no coordination:]*
• Do you think there should be coordination for trainings?
• What would be helpful in making this possible?

11. Tell us how do you coordinate sector **meetings** with (ICDS/Health) at the district-level?

[Probe:]
12. Tell us how you coordinate supervision visits with (ICDS/Health) at the district-level?

[Probe:]
- With whom do you usually conduct supervision visits?
- For what purpose do you usually coordinate supervision visits?
- How often do you coordinate the visits?
- Anything that helps/makes it difficult to coordinate? (facilitators and barriers)
- What would be helpful to make the coordination better?
- Any guidelines from the state on how to coordinate supervision?

[If no coordination:]
- Do you think there should be coordination for supervision?
- What would be helpful in making this possible?

13. Besides meetings, trainings and supervision, do you coordinate with (ICDS/Health) in anything else?

14. Please tell us how coordination among the district officials influences service delivery?

15. What are your thoughts about how the overall coordination with (ICDS/Health) is working? (e.g. helpful, not always practical or feasible, time consuming, not needed)

[Probe:]
- Do you have any suggestions on ways to improve coordination?

16. Please tell us about how guidelines are provided to block officials regarding coordination with (ICDS/Health)

[Probe:]
- Any guidelines for developing block micro plans?
- Any guidelines for coordinating trainings?
- Any guidelines for coordinating supervision?
- Any guidelines for coordinating sector meetings?
- Any guidelines for coordinating VHNDs?
DEMOGRAPHIC INFORMATION

Lastly, I would like to ask you some information about your background.

<table>
<thead>
<tr>
<th>17. Could you please tell me your age?</th>
<th>About ___________ years</th>
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<tr>
<td></td>
<td>88. Don’t know/Do not want to tell</td>
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<table>
<thead>
<tr>
<th>18. What is the highest level of schooling you have completed and passed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>[Count only up to the level passed.]</td>
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</tbody>
</table>

1. Did not complete Class 1  
2. Class 1  
3. Class 2  
4. Class 3  
5. Class 4  
6. Class 5  
7. Class 6  
8. Class 7  
9. Class 8  
10. Class 9  
11. Class 10  
12. Class 11  
13. Class 12  
14. Graduate and above  
15. Other diploma  
16. Madrassa (if no formal classes exist)  
17. Tuitions / teaching at home  
18. Other training / courses / camps only  
19. No schooling  
87. Other (specify)_______________

Thank you!