

## User notes for PMA2017/Kenya Nutrition Round 1 Service Delivery Point survey, version 1

**Disclaimer:** PMA2020 cannot provide in-depth support for data analysis or data related questions, however, to assist the end-user, some explanation of the data is provided below.

### Variables

**Select multiple variables:** Some questions allow for the selection of multiple answers. These variables are in string format and the values are the concatenation of answer choices (e.g. if a respondent said that SDP staff use multiple measurements to screen for acute malnutrition, such as weight and MUAC, the value of the variable **malnut\_monitor\_measures** would read “weight muac ”). For every string select multiple variable, binary numeric yes/no variables for each response option were generated (e.g. the aforementioned respondent would have “yes” values for the generated variables **malnut\_monitor\_weight** and **malnut\_monitor\_muac** and a “no” value for the generated variable **malnut\_monitor\_height**).

### Sampling

The PMA2020/Kenya Nutrition Round 1 survey used a multi-stage stratified cluster design with urban-rural and selected 11 counties as strata. A sample of 151 enumeration areas (EAs) was drawn by the Kenya National Bureau of Statistics from its master sampling frame for the Kenya Round 5 PMA2020 family planning survey and these EAs were used for the nutrition survey. Each EA was listed and mapped. Public facilities were included if a selected EA fell within the catchment area. Up to three private facilities were included if they fell within the boundaries of the EA.

For detailed information on the study methodology and results, please see the PMA2020 Nutrition Service Delivery Point Data Analysis Summary available on the PMA2020 website:

- <https://www.pma2020.org/nutrition>

### Dataset structure and sample size

Every SDP surveyed was administered the SDP questionnaire. The questionnaire included sections on general services and staff, maternal and child health services, community health volunteer services, child growth monitoring and feeding counseling, equipment, and fees and referral (Sections 1-5, 7, and 8). The questionnaire also included a section on medication stock (Section 6). This section of the survey was repeated for every stock room in a facility. In the dataset, observations for an SDP are repeated in multiple rows if the SDP had more than one stock room. The variable **metainstanceID** and **facility\_ID** identify unique SDPs and are repeated in multiple observations for SDPs with multiple stock rooms. The variable **storage\_roomID** identifies unique stock rooms. For analyses on questions from Sections 1-5, 7, and 8, duplicates of **metainstanceID** can be dropped.

Data collection was conducted between May and August 2017. The final sample includes 395 completed service delivery point surveys (95.9% response rate), including 415 stock rooms at those SDPs with completed surveys.

### **Dataset version updates**

Any updates made to datasets after their initial release will be documented here.

### **To report errors or inconsistencies:**

Please email [datamanagement@pma2020.org](mailto:datamanagement@pma2020.org)