EARLY CHILDHOOD DEVELOPMENT		EC
EC1. How many children's books or picture books do you have for (*name*)?	NONE.. NUMBER OF CHILDREN'S BOOKS.............. 0 TEN OR MORE BOOKS	
EC2. I am interested in learning about the things that (*name*) plays with when (he/she) is at home. Does (he/she) play with: [A] Homemade toys, such as dolls, cars, or other toys made at home? [B] Toys from a shop or manufactured toys? [C] Household objects, such as bowls or pots, or objects found outside, such as sticks, rocks, animal shells or leaves?	Y N DK HOMEMADE TOYS .... 1 2 TOYS FROM A SHOP .... 1 2 HOUSEHOLD OBJECTS OR OUTSIDE OBJECTS 1 2	

EC3. Sometimes adults taking care of children have to leave the house to go shopping, wash clothes, or for other reasons and have to leave young children.
 	
On how many days in the past week was (*name*):
 	
[A] Left alone for more than an hour?
 	
[B] Left in the care of another child, that is, someone less than 10 years old, for more than an hour?
 	
If 'None' record '0'. If 'Don't know' record '8'.
	NUMBER OF DAYS LEFT ALONE FOR
	MORE THAN AN HOUR ....
	
	NUMBER OF DAYS LEFT WITH
	  ANOTHER CHILD FOR MORE
	  THAN AN HOUR	

EC4. *Check UB2: Child's age?*	AGE 0 OR 1 .... AGE 2, 3 OR 4	1 ⇨*End*

		MOTHER	FATHER	OTHER	NO ONE	
EC5. In the past 3 days, did you or any household member age 15 or over engage in any of the following activities with (*name*): *If 'Yes', ask:* Who engaged in this activity with (*name*)? *A foster/step mother or father living in the household who engaged with the child should be coded as mother or father.* *Record all that apply.* *'No one' cannot be recorded if any household member age 15 and above engaged in activity with child.*						
[A] Read books or looked at picture books with (*name*)?	READ BOOKS	A	B	X	Y	
[B] Told stories to (*name*)?	TOLD STORIES	A	B	X	Y	
[C] Sang songs to or with (*name*), including lullabies?	SANG SONGS	A	B	X	Y	
[D] Took (*name*) outside the home?	TOOK OUTSIDE	A	B	X	Y	
[E] Played with (*name*)?	PLAYED WITH	A	B	X	Y	
[F] Named, counted, or drew things for or with (*name*)?	NAMED	A	B	X	Y	

EC5G. *Check UB2: Child's age?*	AGE 2 .... AGE 3 OR 4	1 ⇨*End*
EC6. I would like to ask you some questions about the health and development of (*name*). Children do not all develop and learn at the same rate. For example, some walk earlier than others. These questions are related to several aspects of (*name*)'s development. Can (*name*) identify or name at least ten letters of the alphabet?	YES .... NO .... DK	
EC7. Can (*name*) read at least four simple, popular words?	YES .... NO .... DK	

EC8. Does (*name*) know the name and recognize the symbol of all numbers from 1 to 10?	YES .... NO .... DK	
EC9. Can (*name*) pick up a small object with two fingers, like a stick or a rock from the ground?	YES .... NO .... DK	
EC10. Is (*name*) sometimes too sick to play?	YES .... NO .... DK	
EC11. Does (*name*) follow simple directions on how to do something correctly?	YES .... NO .... DK	
EC12. When given something to do, is (*name*) able to do it independently?	YES .... NO .... DK	
EC13. Does *(name)* get along well with other children?	YES .... NO .... DK	
EC14. Does (*name*) kick, bite, or hit other children or adults?	YES .... NO .... DK	
EC15. Does (*name*) get distracted easily?	YES .... NO .... DK	