Date: 15 Nov 2017

Household Questionnaire

IDENTIFICATION
Please record the following identifying information prior to beginning the interview.

NO	QUESTIONS AND FILTERS	CODING CATEGORIES				Relevant if:
001a	**Your name: Is this your name?** [ODK will display the name associated with the phone's serial number.]	Yes..1 No 0				Always
001b	**Enter your name below.** *Please record your name*	Interviewer's Name				001a = 0
002a	**Current date and time.** [ODK will display on screen] **Is this date and time correct?**	Yes..1 No 0				Always
002b	**Record the correct date and time**	Date	Month	Day	Year	002a = 0
		Time	Hour	Minutes	AM/PM	
003a	**LOCATION INFORMATION 1**	LOCATION INFORMATION 1a......................1 LOCATION INFORMATION 1b ....2 LOCATION INFORMATION 1c ....3 LOCATION INFORMATION 1d ....4 LOCATION INFORMATION 1e ....5 LOCATION INFORMATION 1f ....6 LOCATION INFORMATION 1g 7				Always
003b	**LOCATION INFORMATION 2**	ODK will populate a list of appropriate LOCATION INFORMATION 2 based on the LOCATION INFORMATION 1 selected				Always
003c	**LOCATION INFORMATION 3**	ODK will populate a list of appropriate LOCATION INFORMATION 3 based on the LOCATION INFORMATION 2 selected				Always
003d	**LOCATION INFORMATION 4**	ODK will populate a list of appropriate LOCATION INFORMATION 4 based on the LOCATION INFORMATION 3 selected				Always
004	**Enumeration area**	ODK will populate a list of appropriate enumeration areas based on the LOCATION INFORMATION 4 selected				Always
005	**Structure number** *Please record the structure number from the household listing form.*	Number				Always
006	**Household number** *Please record the household number from the household listing form.*	Number				Always

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
007	**Check: Have you already sent a form for this structure and household?** *Do not duplicate any form unless you are correcting a mistake in an earlier form.*	Yes...1 No 0	Always
	WARNING: Contact your supervisor before sending this form again.		007 = 1
008	**CHECK: Why are you resending this form?** *Choose all that apply.*	There are new household members on this form...1 I am correcting a mistake made on a previous form...2 The previous form disappeared from my phone without being sent.........................3 I submitted the previous form and my supervisor told me that is was not received ...4 Other reason(s) 5	007 = 1
009a	**Is a member of the household and competent respondent present and available to be interviewed today?**	Yes...1 No 0	Always
009b	**INCLUDE IF ROUND 2+** **Did this household participate in a previous PMA2020 survey?**	Yes...1 No ....0 Do not know..-88 No response 0	Always

	INFORMED CONSENT		
	Find a competent member of the household. Read the greeting on the following screen.		
010a	Hello. My name is _____ and I am working for COUNTRY PARTNER in collaboration with OTHER PARTNERS. We are conducting a local survey about various health issues. Your household has been selected for this survey. We would very much appreciate your participation in this survey. This information will help us inform the government to better plan health services. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team. Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important. I am going to ask you questions about your family and other household members. We would then like to ask a different set of questions to female members of this household who are between the ages of 15 and 49 years. At this time, do you want to ask me anything about the survey?		
	Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: **May I begin the interview now?**	Yes..1 No 0	009a = 1
010b	**Respondent's signature:**	Gather signature: Check box: ☐	010a = 1
010c	**Interviewer's name:** *Please record your name as a witness to the consent process. You previously entered "[NAME FROM 001]."*		010a = 1

Section 1 – Household Roster

I am now going to ask you a series of questions about each usual member of the household or anyone who slept in the house last night.

	NO	QUESTIONS AND HINTS	CODING CATEGORIES	HH Member 1 (HM1)	HH Member 2 (HM2)	HH Member 3+ (HM3+)	Relevant if:
Household Roster Screen #1	101	**Name of HH member/visitor** *Start with the head of the household.*		Name	Name	Name	HM1: 108=1 HM2+: 108=1 OR 109=0
	101a	*Is this person the respondent?*	Yes .... No	1 0	1 0	1 0	HM1: 108=1 HM2+: 108=1 OR 109=0
	102	**What is [NAME]'s relationship to the head of the household?**	Head .... Wife/Husband .... Son/Daughter.................... Son/Daughter-in-law .... Grandchild .... Parent .... Parent in law .... Brother/Sister................... House help....................... Other................................ Don't know .... No response	1 2 3 4 5 6 7 8 9 -88 -99	1 2 3 4 5 6 7 8 9 -88 -99	1 2 3 4 5 6 7 8 9 -88 -99	HM1:108=1 HM2+: 108=1 OR 109=0
	103	**Is [NAME] male or female?**	Male................................ Female............................	1 2	1 2	1 2	HM1: 108=1 HM2+: 108=1 OR 109=0
	104	**How old was [NAME] at their last birthday?** *If less than one year old, enter 0*		Age	Age	Age	HM1: 108=1 HM2+: 108=1 OR 109=0
Screen #2	105	**What is [NAME]'s current marital status?** *If not married, probe to determine if they have ever been married and, if so, if they are divorced, widowed, or have never been married.*	Married .... Living with a partner.......... Divorced / separated......... Widow / widower............... Never Married .... No response	1 2 3 4 5 -99	1 2 3 4 5 -99	1 2 3 4 5 -99	104 ≥ 10
	106	**Does [NAME] usually live here?**	Yes .... No................................ No response	1 0 -99	1 0 -99	1 0 -99	HM1: 108=1 HM2+: 108=1 OR 109=0
	107	**Did [NAME] stay here last night?**	Yes .... No................................ No response	1 0 -99	1 0 -99	1 0 -99	HM1: 108=1 HM2+: 108=1 OR 109=0

	NO	QUESTIONS AND HINTS	CODING CATEGORIES	HH Member 1 (HM1)	HH Member 2 (HM2)	HH Member 3+ (HM3+)	Relevant if:
Screen #3	LCL_101	**ADD ON A COUNTRY-SPECIFIC BASIS:** **What is the religion of [NAME]?** *Only recorded for the head of the household.*	RELIGION X ....X Other............................ 96 No religion.................... -77 No response .... -99				102 = 1
Screen #4	LCL_102	**ADD ON A COUNTRY-SPECIFIC BASIS:** **What is the ethnicity of [NAME]?** *Only recorded for the head of the household.*	ETHNICITY X ....X Other............................ 96 No response .... -99				102 = 1
Screen #5	108	**Are there any other usual members of your household or persons who slept in the house last night?**	Yes .... No	1 0	1 0	1 0	010a = 1
Screen #6	109	**READ THIS CHECK OUT LOUD: There are** [NUMBER OF HOUSEHOLD MEMBERS ENTERED] **household members who are named** [NAMES OF ENTERED HOUSEHOLD MEMBERS]. **Is this a complete list of the household members?** *Remember to include all children in the household.*	Yes .... 1 No 0				108 = 0

Section 2 – Household Characteristics
Now I would like to ask you a few questions about the characteristics of your household.

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
201	**Please tell me about the items your household owns. Does your household have:** *Read out all types and select all that apply. Scroll to bottom to see all choices.* *If an item is reported broken but said to be out of use only temporarily, select the item. Otherwise do not select the item.*	ASSET 1 .... 1/0 ASSET 2 .... 1/0 ASSET 3 .... 1/0 ASSET 4 .... 1/0 ASSET 5 .... 1/0 ASSET 6 .... 1/0 ASSET 7 .... 1/0 ASSET 8 .... 1/0 ASSET 9 .... 1/0 ASSET 10 .... 1/0 ASSET 11 .... 1/0 ASSET 12 .... 1/0 ASSET 13 .... 1/0 ASSET 14 .... 1/0 ASSET 15 .... 1/0 ASSET 16 .... 1/0 None of the above .... -77 No response .... -99	010a = 1
202a	**Does this household own any livestock, herds, other farm animals, or poultry?** *These livestock can be kept anywhere, not necessarily on the homestead.*	Yes.. 1 No .... 0 No response .... -99	010a = 1
202b	**How many of the following animals does this household own?** **Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.** *The household can keep the livestock anywhere but must own the livestock recorded here.*	ANIMAL 1 ☐ ANIMAL 2 ☐ ANIMAL 3 ☐ ANIMAL 4 ☐ ANIMAL 5 ☐ ANIMAL 6 ☐ ANIMAL 7 ☐ ANIMAL 8 ☐ ANIMAL 9 ☐ ANIMAL 10 ☐	202a = 1

Section 3 – Household Observation			
Please observe the floors, roof and exterior walls.			
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant If:**
301	**Main material of the floor** *Observe.*	TYPE 1a ....11 TYPE 1b ....12 TYPE 2a ....21 TYPE 2a ....22 Other...96 No response ....-99	010a = 1
302	**Main material of the roof** *Observe.*	TYPE 1a ....11 TYPE 1b ....12 TYPE 2a ....21 TYPE 2a ....22 Other...96 No response ....-99	010a = 1
303	**Main material of the exterior walls** *Observe.*	TYPE 1a ....11 TYPE 1b ....12 TYPE 2a ....21 TYPE 2a ....22 Other...96 No response ....-99	010a = 1
Section 4 – Water, Sanitation and Hygiene			
Now I would like to ask you a few questions about water, sanitation and hygiene.			
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant If:**
401	**We would like to learn about the places that households use to wash their hands. Can you please show me where members of your household most often wash their hands?**	Observed, fixed place.............................1 Observed, mobile....................................2 Not observed, not in dwelling/yard/plot ......3 Not observed, no permission to see...........4 Not observed, other reason ....5 No Response ....-99	010a = 1
401c	**At the place where the household washes their hands, observe if:** *Check all that apply.*	Soap is present......................................1/0 Stored water is present............................1/0 Running water is present.........................1/0 Handwashing area is near a sanitation facility..1/0 None of the above ....-77	401 = 1, 2
402	**Which of the following water sources does your household use on a regular basis for any part of the year for any purpose?** *Read out all types and check all that are used. Scroll to the bottom to see all choices.*	Piped Water: Piped into dwelling/indoor ....1/0 Piped Water: Pipe to yard/plot ....1/0 Piped Water: Public tap/standpipe ....1/0 Tube well or borehole ....1/0 Dug Well: Protected Well ....1/0 Dug Well: Unprotected Well ....1/0 Water from Spring: Protected Spring ....1/0 Water from Spring: Unprotected Spring ....1/0 Rainwater.. 1/0 Tanker Truck ....1/0 Cart with Small Tank ....1/0 Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) .... 1/0 Bottled Water ....1/0 Sachet Water ....1/0 No Response ....-99	010a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
403	**What is the main source of drinking water for members of your household?** Selections from 402: [ODK will list water sources selected for 402] *Read out 402 selections only.*	Piped Water: Piped into dwelling/indoor ....1 Piped Water: Pipe to yard/plot ....2 Piped Water: Public tap/standpipe ....3 Tube well or borehole ....4 Dug Well: Protected Well ....5 Dug Well: Unprotected Well ....6 Water from Spring: Protected Spring ....7 Water from Spring: Unprotected Spring ....8 Rainwater.. 9 Tanker Truck ....10 Cart with Small Tank ....11 Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) .... 12 Bottled Water ....13 Sachet Water ....14 No Response ....-99	More than one option selected in 402 AND 402 ≠ -99
404	**What is the main source of water used by your household for other purposes such as cooking and hand washing?** Selections from 402: [ODK will list water sources selected for 402] *Read out 402 selections only.*	Piped Water: Piped into dwelling/indoor ....1 Piped Water: Pipe to yard/plot ....2 Piped Water: Public tap/standpipe ....3 Tube well or borehole ....4 Dug Well: Protected Well ....5 Dug Well: Unprotected Well ....6 Water from Spring: Protected Spring ....7 Water from Spring: Unprotected Spring ....8 Rainwater.. 9 Tanker Truck ....10 Cart with Small Tank ....11 Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) .... 12 Bottled Water ....13 Sachet Water ....14 No Response ....-99	More than one option selected in 402 AND 402 ≠ -99
405	**You mentioned that you used [MAIN WATER SOURCE]. At any time of the year, does your household use water from this source for:**	Drinking..1/0 Cooking..1/0 Livestock...1/0 Gardening / agriculture ....1/0 Business venture ....1/0 Washing..1/0 No response ....-99	403 ≠ -99
406	**How many months out of the year is [MAIN WATER SOURCE] usually available?** *Zero is a possible answer. Please record the number of completed months. Enter -88 for Do Not Know, -99 for No Response*	Number of months ☐	403 ≠ -99
407	**At a time of year when you expect to have water from [MAIN WATER SOURCE], is it usually available?**	Yes, always..1 No, intermittent and predictable..................2 No, intermittent and unpredictable..............3 No response .... -99	403 ≠ -99

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
408	**How long does it take to go to [MAIN WATER SOURCE], get water, and come back?** *Zero is a possible answer* *Enter -88 for do not know* *Enter -99 for no response* *Convert time into minutes.* *Answer includes waiting time in line.*	Minutes [ ]	403 ≠ 1 or -99
409	**Do members of your household use any of the following toilet facilities?** *Read out all types and check all that are used.* *Scroll to the bottom to see all choices.*	Flush/pour flush toilets connected to: Piped sewer system..1/0 Flush/pour flush toilets connected to: Septic tank ....1/0 Flush/pour flush toilets connected to: Pit latrine ....1/0 Flush/pour flush toilets connected to: Elsewhere ....1/0 Flush/pour flush toilets connected to: Unknown / Not sure / Don't know ....1/0 Ventilated improved pit latrine ....1/0 Pit latrine with slab...................................1/0 Pit latrine without slab/open pit................1/0 Bucket toilet ....1/0 Composting toilet.......................................1/0 Hanging toilet /Hanging latrine ....1/0 No facility / bush / field............................1/0 Other...1/0 No Response .... -99	010a = 1
410	**What is the main toilet facility used by members of your household?** [ODK will display 409 selections] *The main facility must have been selected in 409.*	Flush/pour flush toilets connected to: Piped sewer system...1 Flush/pour flush toilets connected to: Septic tank ....2 Flush/pour flush toilets connected to: Pit latrine ....3 Flush/pour flush toilets connected to: Elsewhere ....4 Flush/pour flush toilets connected to: Unknown / Not sure / Don't know ....5 Ventilated improved pit latrine ....6 Pit latrine with slab......................................7 Pit latrine without slab/open pit...................8 Bucket/pan..9 Composting toilet.......................................10 Hanging toilet /Hanging latrine ....11 No facility / bush / field.............................12 Other...96 No Response .... -99	More than one option selected for 409 AND 409 ≠ -99
SN_ii	**When was the last time your [MAIN TOILET FACILITY TYPE] was emptied?** **Probe: How many months or years ago?**	[ ] months ago [ ] years ago Never emptied ....4 Don't know .... -88 No Response ....-99	410 = 2, 3, 6, 7, 8, or 10

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
SN_iii	**The last time your [MAIN TOILET FACILITY TYPE] was emptied, who emptied it?** **Probe: Was it emptied by household members or by neighbors or by a service provider?**	By household members or neighbors.........1 By a service provider ....2 Other..3 Don't know .... -88 No response .... -99	ii ≠ 4, -88, -99
SN_iv	**The last time your [MAIN TOILET FACILITY TYPE] was emptied, where were the contents emptied to?**	To a covered and sealed hole (buried) ......1 To an open drain or to a water body ....2 To an open hole (not buried), open ground, bush, beach or to agricultural land ....3 Taken away by the service provider to a treatment facility ....4 Taken away by the service provider to don't know where ....5 Other...6 Don't know .... -88 No Response .... -99	ii ≠ 4, -88, -99
SN_v	**Where is your toilet facility located? [MAIN TOILET FACILITY TYPE]**	In own dwelling ....1 In own yard / plot ....2 Elsewhere ....3 No Response .... -99	410 ≠ 12 or -99
411	**How often does your household typically use: [MAIN TOILET FACILITY TYPE]?** *Regular practices at the household only.*	Always ....1 Most of the time ....2 Occasionally ....3 No response .... -99	410 ≠ -99
412a	**Do you share this toilet facility with other households or the public?** **[MAIN TOILET FACILITY TYPE]**	Not shared ....1 Shared with less than ten households........2 Shared with ten or more households..........3 Shared with the public. ....4 No response .... -99	410 ≠ -99
412b	**Enter the number of households that share this facility (including your own).** **[MAIN TOILET FACILITY TYPE]** *Must be between 2 and 9.* *If 10 or greater, swipe back to 412a and choose "shared with ten or more households."* *Enter -99 for no response.*	Number of Households: ☐	412a = 2

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
413	**How many people within your household regularly use the bush / field at home or at work?** There are [X people] in this household. *Enter -88 for do not know, -99 for no response.*	Number of People:	010a = 1
414	**For all children under age five: what methods, if any, does your household use to dispose of children's waste?** *Do not read the possible answers out loud.* **PROBE: Other methods?**	Children use a latrine / toilet ....1/0 Leave waste where it is ....1/0 Bury waste in field / yard ....1/0 Dispose of waste in latrine / toilet ....1/0 Dispose of waste with rubbish / garbage.1/0 Dispose of waste with waste water..........1/0 Use it as manure....................................1/0 Burn it ....1/0 Don't know .... -88 No response .... -99	010a = 1

	LOCATION AND QUESTIONNAIRE RESULT		
	Thank the respondent for her/his time. *The respondent is finished, but there is still more for you to complete outside the home.*		

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
096	**Location** *Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6m.*	**RECORD LOCATION**	Always
097	**How many times have you visited this household?**	1st time ....1 2nd time ....2 3rd time 3	Always
098	**In what language was this interview conducted?**	English ....1 French..2 Language 3.....................................3 Language 4.....................................4 Language 5.....................................5 Language 6.....................................6 Other...96	010a=1
099	**Questionnaire result** *Record the result of the Household Questionnaire*	Completed ....1 No household member at home or no competent respondent at home at time of visit..2 Postponed.....................................3 Refused ....4 Partly completed............................5 Dwelling vacant or address not a dwelling .6 Dwelling destroyed ....7 Dwelling not found ....8 Entire household absent for extended period of time 9	Always