

Household Questionnaire

NO	QUESTIONS AND FILTERS	CODING CA	TEGORIES			SKIP
	ITIFICATION se record the following identifying informati	on prior to b	eginning th	ne interviev	w.	
A	How many times have you visited this household?	1 st time				
В	Interviewer's name: Is this your name? If not, please record your name:					
	ODK will display the name associated with the phone's serial number					
С	Is this date and time correct? [THE CURRENT DATE AND TIME WILL BE DISPLAYED ON SCREEN]	Yes				Skip to D if No
D	Record the correct date and time	Date	Month	Day	Year	
		Time	Hour	Minutes	AM/PM	
Е	Region	Tigray 1 Afar 2 Amhara 3 Oromiya 4 Somali 5 Benishangul Gumuz 6 SNNP 7 Gambela 8 Harari 9 Addis Ababa 10 Dire Dawa 11				
E	Zone		pulate a list ne selected r		ate zones	
Е	District	ODK will populate a list of appropriate districts based on the selected zone.				
E	Locality Name	ODK will populate a list of appropriate localities based on the selected district. There may be only one choice.				
E	Enumeration area	ODK should	d populate tl	ne appropri	ate EA	
F	Structure number Please record the structure number from the household listing form.					

G	Household number Please record the household number from the household listing form.		
I	Is a member of the household and competent respondent present and available to be interviewed today?	Yes	Skip to P if No
	DRMED CONSENT the competent member of the household. R	ead the following greeting:	
Universe we we have ask a 49.	vould very much appreciate your participation in rnment to better plan health services. Whatever dential and will not be shown to anyone other the cipation in this survey is voluntary, and if we show the know and I will go on to the next question ope that you will participate in this survey since going to ask you questions about your family an	nan members of our survey team. ould come to any question you don't want to ans n; or you can stop the interview at any time. How your views are important. nd other household members. We would then lik of this household who are between the ages of 1	o the swer, vever, ke to
I	May I begin the interview now?	Yes	Skip to P if No
J	Interviewer's name		
	Please record your name as a witness to the consent process. You previously entered "[NAME FROM HQ B]."		
K	Respondent's first name.		
	Please record the first name of the respondent.		
H2	Did your household previously participate in a PMA2020 survey?	Yes	



uestionnaire

v vou augstion	ne about a		CTION 1 - House		ster For each person who u	eually lives he	ro or elon
		following information:	isenola. Let's begin w	itii you.	i or each person who u	sually lives lie	ie oi siep
2	3	4	5	6	7		
Sex	Age (years)	Marital Status	Relationship to head of household	Family ID	Is this person a usual n household or has he/sh house last night?		Eligi res
Male1 Female2		Married	Head 1 Wife/Husband 2 Son/Daughter 3 Son/Daughter-in-law 4 Grandchild 5 Parent 6 Parent in law 7 Brother/Sister 8 Other 9 Don't know -88		Usual member of the hous slept in the house last nig Usual member of the hous NOT sleep in the house la Visitor who slept in the ho	ht1 sehold who did ast night2	Yes No ODK will display el
ding information	for one hou	usehold member the follows	ving prompt is asked to acc	tivate a loc	oping script to record the inf	ormation for anot	her memh
e any other usu	ıal membe	ers of your household or	persons who slept in th	ne house	last night?	Yes No	

Yes

No.....

rs who are named [NAMES OF ENTERED HOUSEHOLD MEMBERS]. Is this a complete list of the

ıiopia – Round 2

old members?

ber to include all children in the household.



Section 2 - Household Characteristics Now I would like to ask you a few questions about the characteristics of your household. 10 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. Yes No Otherwise do not select the item. Electricity? 0 A wall clock? 0 A radio?..... 0 A black/white television?..... 0 A color television?..... 0 A mobile phone? 0 A landline telephone?..... 0 A refrigerator? n A freezer?...... 1 0 0 A washing machine? 1 0 A computer?...... 1 0 A digital photo camera? 1 0 A non digital photo camera? 1 0 0 A DVD/CD? 1 0 A sewing machine? 1 0 0 A table?..... 1 0 A cabinet/cupboard? 1 0 A bicycle?......1 0 A motorcycle or motor scooter? 1 0 A car or truck?...... 1 0 A boat with a motor? 0 A boat without a motor? None of the above..... -77 No response..... **READ OUT ALL TYPES AND SELECT ALL** THAT APPLY. Skip to 11a Does this household own any livestock, Yes1 12a if herds, other farm animals, or poultry? No0 No No Response.....-99 These livestock can be kept anywhere, not necessarily on the homestead.

11b	How many of the following animals does this household own?		
	HINT: The household can keep the livestock anywhere, but must own the livestock recorded here.		
	Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.		
	Milk cows, oxen or bulls Horses, donkeys, or mules Camels Goats Sheep Chickens Beehives		
12a	Does this household keep any livestock, herds, other farm animals, or poultry ON THE HOMESTEAD, regardless of who owns these livestock?	Yes	Skip to 13 if No
	HINT: Homestead includes the structure and yard that is close to the structure		
12b	How many of the following animals does this household keep ON THE HOMESTEAD?		
	HINT: The household does not need to own the livestock recorded here.		
	Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.		
	Milk cows, oxen or bulls Horses, donkeys, or mules Camels Goats Sheep Chickens		
	Beehives		
	Section 3 – House Please observe the floors		
13	Main material of the floor	Natural Floor Earth/Sand11	
	OBSERVE	Dung	

		0 1 71 7	
		Ceramic Tile/Terazzo33	
		Cement34	
		Carpet35	
		Other96	
		No response99	
14	Main material of the roof	Natural Roof	
'-	Wall material of the roof	No Roof11	
	OBSERVE	Thatch/Palm Leaf/ Sod12	
		Rudimentary Roofing	
		Rustic Mat21	
		Palm/Bamboo22	
		Wood Planks23	
		Cardboard24	
		Finished Roofing	
		Corrugated Iron/Metal31	
		Asbestos/Cement Fiber33	
		Cement/Concrete34	
		Roof Shingles35	
		Other96	
		No response99	
		The respondent to the second s	
15	Main material of the exterior walls	Natural Walls	
		No Walls11	
	OBSERVE	Cane//Trunks/Bamboo12	
		Dirt13	
		Rudimentary Walls	
		Bamboo with Mud21	
		Stone with Mud22	
		Uncovered Adobe23	
		Plywood24	
		Cardboard25	
		Reused Wood26	
		Corrugated Iron/Metal27	
		Finished Walls	
		Cement31	
		Stone with Lime/Cement32	
		Bricks	
		Cement Blocks34	
		Covered Adobe35	
		Wood Planks/Shingles36	
		Other96	
		No response99	
	Section 4 - Water S	anitation and Hygiene	
		ions about water, sanitation and hygiene.	
16	Do you have a place to wash your hands?	Yes1	Skip to
		No0	19 if
		Don't know88	No
		No response99	
			011
17	Can you show it to me?	Yes1	Skip to 19 if
		No0	No
			_

their hands, observe if: Soap is present. Water source is present stored water. Water source is present stored water. Handwashing area is near a sanitation facility. None of the above. 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. Pipe to yard/plot. Public tajs/standpipe. Tube well or borehole. Dug Well Protected Dug Well. Unprotected Dug Well. Unprotected Dug Well. Unprotected Spring. Unprotected Spring. Unprotected Spring. Tanker Truck. Cart with Small Tank. Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel). Bottled Water Sachet Water No response. 20 What is the main source of drinking water for members of your household? Selections from HQ19: [ODK will list water sources selected for HQ19] Read out HQ19 selections only. Piped water Piped into dwelling/indoor. Pipe to yard/plot. Public tap/standpipe. Tube well or borehole. Dug Well Protected Well. Protected Well.					
Soap is present	18	At the place where the household washes	<u>Yes</u>	<u>No</u>	
Soap is present: Stored water Water source is present: stored water Water source is present: stored water 1		their hands, observe if:			
Water source is present: stored water 1 0 Water source is present: unning water 1 0 Handwashing area is near a sanitation facility -77 10 None of the above -77 -77 19 Which of the following water sources does your household use on a regular basis for any part of the year for any purpose? -77 Read out all types and check all that are used. Scroll to the bottom to see all choices Piped Water Yes No Piped into dwelling/indoor 1 0 0 0 Piped yard/plot 1 0 <td></td> <td>Soan is present</td> <td></td> <td></td> <td></td>		Soan is present			
Water source is present: running water			 1	0	
Handwashing area is near a sanitation facility None of the above 1		· ·	 1	0	
Tacility					
None of the above			 =	0	
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			-77		
does your household use on a regular basis for any part of the year for any purpose?		Notice of the above			
Read out all types and check all that are used. Scroll to the bottom to see all choices Yes No	19	does your household use on a regular basis for any part of the year for any			
used. Scroll to the bottom to see all choices Yes No Piped Water 1 0 Pipe to yard/plot 1 0 Public tap/standpipe 1 0 Tube well or borehole 1 0 Dug Well 1 0 Protected Dug Well 1 0 Water from Spring 1 0 Protected 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 -99 20 What is the main source of drinking water for members of your household? -99 Selections from HQ19: [ODK will list water sources selected for HQ19] -99 Read out HQ19 selections only. -99 Piped Water -99 -99 Public tap/standpipe		• •			
Piped Water					
Piped into dwelling/indoor			<u>Yes</u>	No	
Pipe to yard/plot				_	
Public tap/standpipe		·		_	
Tube well or borehole 1				_	
Dug Well				-	
Protected Dug Well			 1	0	
Unprotected Dug Well			 1	0	
Water from Spring				0	
Unprotected Spring		Water from Spring			
Unprotected Spring		Protected Spring	 1	0	
Rainwater		Unprotected Spring	 1	0	
Cart with Small Tank			1	0	
Cart with Small Tank		Tanker Truck	 1	0	
Stream / Canal / Irrigation Channel)			1	0	
Stream / Canal / Irrigation Channel)		Surface water (River / Dam / Lake / Pond /			
Bottled Water		Stream / Canal / Irrigation Channel)	 1	0	
No response				0	
What is the main source of drinking water for members of your household? Selections from HQ19: [ODK will list water sources selected for HQ19] Read out HQ19 selections only. Piped Water Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well 5		Sachet Water	 1	0	
for members of your household? Selections from HQ19: [ODK will list water sources selected for HQ19] Read out HQ19 selections only. Piped Water Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well Selections of your household? 1 2 2 3 4 5 5		No response	 -99		
Selections from HQ19: [ODK will list water sources selected for HQ19] Read out HQ19 selections only. Piped Water Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well 5	20				
water sources selected for HQ19] Read out HQ19 selections only. Piped Water Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Protected Well Protected Well Selections only. 1 2 4 5 6 7 7 8 7 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8		for members of your household?			
Piped Water Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well 5					
Piped into dwelling/indoor					
Pipe to yard/plot					
Public tap/standpipe		·	 	1	
Tube well or borehole			 	2	
Dug Well Protected Well5				-	
Protected Well5			 	4	
Flotected Well		<u> </u>		_	
Linewate at ad Mall				-	
Onprotected Weil		Unprotected Well	 	ხ	
Water from Spring				_	
Protected Spring7				_	
Unprotected Spring8		Unprotected Spring		•	
Rainwater9		I Deimonton	 		
Tanker Truck10					
Cart with Small Tank		Tanker Truck		4.4	
				4.4	

			1	
	Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel)		13	
21	What is the main source of water used by your household for other purposes such as cooking and hand washing?			
	Selections from HQ19: [ODK will list water sources selected for HQ19]			
	Read out HQ19 selections only.			
	Piped Water			
	Piped into dwelling/indoor		1	
	Pipe to yard/plot		2	
	Public tap/standpipe			
	Tube well or borehole		4	
	Dug Well Protected Well		5	
	Unprotected Well			
	Water from Spring			
	Protected Spring			
	Unprotected Spring		8	
	Rainwater			
	Tanker Truck			
	Cart with Small Tank Surface water (River / Dam / Lake / Pond /		11	
	Stream / Canal / Irrigation Channel)		12	
	Bottled Water			
	Sachet Water		14	
	No response		99	
	Questions HQ 22 to HQ 25 will repeat x time HQ 19. These sources include: [ODK will display HQ19 selections.]	es, once for each water source s	selected in	
22	You mentioned you used [WATER SOURCE]. At any time of the year, does your household use water from this source for:	<u>Y</u>	es <u>No</u>	
	Drinking	1	0	
	Cooking		0	
	Livestock		0	
	Gardening / agriculture	1	0	
	Business venture		0	
	Washing		0	
	No response	-9	99	
23	Is [WATER SOURCE] typically available:		1	
	Read all choices out loud.			

	I			
Some of the year			2	
No, intermittent and predictable			2	
How long does it take to go to [WATER SOURCE], get water, and come back? Zero is a possible answer. Convert answer to minutes. Includes waiting time in line. Enter -88 for do not know, -99 for no response.	Minutes			
Does your household have a garden? Hint: A garden is a place to grow vegetables	No		0	
Septic tank			No 0 0 0 0 0	
Bucket toilet Hanging toilet /Hanging latrine		1 1 1 1 1 -99	0 0 0 0	
	Some of the year	Some of the year Small part of the year No response At a time when you expect to have water from [WATER SOURCE], is it usually available? Yes, always No, intermittent and predictable No response. How long does it take to go to [WATER SOURCE], get water, and come back? Zero is a possible answer. Convert answer to minutes. Includes waiting time in line. Enter -88 for do not know, -99 for no response. Does your household have a garden? Hint: A garden is a place to grow vegetables 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 Septic tank Elsewhere Unknown / Not sure / Don't know. Ventilated improved pit latrine Pit latrine without slab Composting toilet Bucket toilet. Hanging toilet /Hanging latrine Other (please explain): No facility / bush /field. No response. What is the main toilet facility used by members of your household? HQ27: [ODK will display HQ27 selections] The main facility must be selected in HQ 27. Flush/pour flush toilets connected to: Piped sewer system. Septic tank. Septic tank.	Some of the year. Small part of the year. No response At a time when you expect to have water from [WATER SOURCE], is it usually available? Yes, always. No, intermittent and predictable No, intermittent and unpredictable No response. How long does it take to go to [WATER SOURCE], get water, and come back? Zero is a possible answer. Convert answer to minutes. Includes waiting time in line. Enter -88 for do not know, -99 for no response. Does your household have a garden? Hint: A garden is a place to grow vegetables 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. Septic tank Elsewhere Unknown / Not sure / Don't know Ventilated improved pit latrine. 1 pit latrine with slab. 1 pit latrine with slab. 1 pit latrine with slab. 1 composting toilet Hanging latrine. 1 other (please explain). 1 not facility bush field. 1 no response. What is the main toilet facility used by members of your household? HQ27: [ODK will display HQ27 selections] The main facility must be selected in HQ 27. Flush/pour flush toilets connected to: Piped sewer system. Septic tank.	At a time when you expect to have water from [WATER SOURCE], is it usually available? Yes, always

		T			
	Unknown / Not sure / Don't know			4	
	Ventilated improved pit latrine			_	
	Pit latrine with slab Pit latrine without slab			_	
	Composting toilet			_	
	Bucket toilet			_	
	Hanging toilet /Hanging latrine				
	Other				
	No facility / bush / field				
	No response			99	
	Question HQ 29 will repeat x times, once for These facilities include:	r each sanitation facility sele	ected in	HQ27.	
	HQ27: [ODK will display HQ27 selections]				
29a	How often does your household typically use: [TOILET FACILITY TYPE]?	Always Most of the time			
	Regular practices at the household only.	Occasionally			
	Regular praedices at the neadericle only.	Rarely			
		No response		99	
29b	Do you share this toilet facility with other households or the public?	Not sharedShared with less than ten house Shared with ten or more house.	useholds seholds .	3	Skip to HQ30 if not 2
		Shared with the public No response			
29c	Enter the number of households that share this facility (including your own). [TOILET FACILITY TYPE]				
	Must be between 1 and 10.	Number of households			
	If 10 or greater, swipe back to HQ29b and choose "shared with ten or more households." If less than 2, swipe back to HQ29b and choose "not shared."				
	Enter -99 for no response.				
30	How many people within your household regularly use the bush / field at home or at work?	Number of people			
	There are x people in this household. Enter -88 for do not know, -99 for no response.				
	CHECK HQ 3: Are there any household members	pers aged 5 years or under?	Skip to	HQ 32 if	NO
31	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.		Yes	No	
	,				
	Children use a latrine / toiletLeave waste where it is		1	0	

32	Burn it Don't know No Response Ask permission to take a photo to the entrance of the household.	 -99		
	Bury waste in field / yard	1 1 1	0 0 0 0	

Thank the respondent for her/his time.

The respondent is finished, but there are still three more questions for you to complete outside the house.

LOCATION AND QUESTIONNAIRE RESULT L Location RECORD LOCATION Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6m. GPS coordinates can only be collected when outside Ма Ask permission to take a photo of the Skip to Yes 1 R if No entrance of the house. No......0 Did you get consent to take the photo? Mb Ensure that no people are in the photo TAKE PICTURE **CHOOSE IMAGE** Questionnaire result Completed1 Ν No household member at home or no Record the result of the Household competent respondent at home at time of Questionnaire visit2 Postponed3 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 period9