

mADDS –Household Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP												
IDENTIFICATION															
Please record the following identifying information prior to beginning the interview.															
A	Interviewer's name: Is this your name? If not, please record your name: <i>ODK will display the name associated with the phone's serial number</i>	Yes..... 1 No 0													
B	Is this date and time correct? <ODK will display the current date and time from the device's settings. Check that it is correct.>	Yes..... 1 No 0	Skip to D if Yes												
C	Record the correct date and time	<table border="1"> <thead> <tr> <th>Day</th> <th>Month</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <th>Hours</th> <th>Min</th> <th>AM/PM</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Day	Month	Year				Hours	Min	AM/PM				
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Hours	Min	AM/PM													
D	Region <i>Select the region</i>	Ashanti 1 Brong-Ahafo..... 2 Central 3 Eastern 4 Greater Accra 5 Northern 6 Upper East..... 7 Upper West..... 8 Volta..... 9 Western 10													
D	District <i>Select the district</i>	<i>ODK will populate a list of appropriate district based on the region selected for SQ D</i>													
D	Locality name <i>Select the locality</i>	<i>ODK will populate a list of appropriate localities based on the district selected for SQE</i>													
D	Enumeration area <i>Select the EA code</i>														
E	Structure number <i>Please record the number of this structure from the Household Listing Form.</i>	Structure Number:													
F	Household number <i>Please record the number of this household from the Household Listing Form.</i>	Household Number:													

G	Is a member of the household and competent respondent present and available to be interviewed today?	Yes..... 1 No 0	Skip to O if No
INFORMED CONSENT Find the competent member of the household. Read the following greeting:			
<p>Hello. My name is _____ and I am working for the Addis Ababa University, and Federal Ministry of Health. We are conducting a local survey about various health issues. 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.</p> <p>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.</p> <p>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.</p> <p>At this time, do you want to ask me anything about the survey?</p>			
H	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	Skip to M if No
	Respondent's signature <i>Ask the respondent to sign their name or check the box to confirm that they consent to participate.</i>	GATHER SIGNATURE: Check box:	
I	Interviewer's signature <i>Record your name as a witness to the consent process.</i>		
J	Interviewee's name <i>Record the first name of the respondent only.</i>		

Household Questionnaire

SECTION 1 – Household Roster

I will now ask you questions about all members of the household. Let's begin with you. For each person who usually lives here or slept in the house last night, please record the following information:

No	1	2	3	4	5	6	7	8
	First name	Sex	Age (years) <i>If less than 1 year old, record 0</i>	Marital Status	Relationship to head of household	Family ID	Is this person a usual member of the household or has he/she slept in the house last night?	Eligible female respondent
		Male 1 Female..... 2		Married 1 Living with a partner ..2 Divorced / separated .3 Widow / widower..... 4 Single..... 5	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 household who slept here last night1 Usual member of the household who did NOT sleep in the house last night2 Visitor who slept in the house last night .3	Yes 1 No..... 0 <i>ODK will determine and display eligibility based on age and sex.</i>
1								
2								
3								
4								
5								
<i>After recording information for one household member, the following prompt is asked to activate a looping script to record the information for another member if needed:</i>								
9	Are there any other usual members of your household or persons who slept in the house last night?			Yes1 No.....0				Skip to 10 if No

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<p>Section 2 – Household Characteristics Now I would like to ask you a few questions about the characteristics of your household.</p>																																																																																				
10	<p>Does your household have: <i>Read out all types and select all that apply.</i></p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr><td>Electricity?</td><td>1</td><td>0</td></tr> <tr><td>A wall clock?</td><td>1</td><td>0</td></tr> <tr><td>A radio?</td><td>1</td><td>0</td></tr> <tr><td>A black/white television?.....</td><td>1</td><td>0</td></tr> <tr><td>A color television?.....</td><td>1</td><td>0</td></tr> <tr><td>A mobile phone?</td><td>1</td><td>0</td></tr> <tr><td>A landline telephone?</td><td>1</td><td>0</td></tr> <tr><td>A refrigerator?</td><td>1</td><td>0</td></tr> <tr><td>A freezer?</td><td>1</td><td>0</td></tr> <tr><td>Electric generator/invertor(s)?</td><td>1</td><td>0</td></tr> <tr><td>A washing machine?.....</td><td>1</td><td>0</td></tr> <tr><td>A computer?</td><td>1</td><td>0</td></tr> <tr><td>A digital photo camera?</td><td>1</td><td>0</td></tr> <tr><td>A non digital photo camera?</td><td>1</td><td>0</td></tr> <tr><td>A video deck?</td><td>1</td><td>0</td></tr> <tr><td>A DVD/CD?.....</td><td>1</td><td>0</td></tr> <tr><td>A sewing machine?.....</td><td>1</td><td>0</td></tr> <tr><td>A bed?</td><td>1</td><td>0</td></tr> <tr><td>A table?.....</td><td>1</td><td>0</td></tr> <tr><td>A cabinet/cupboard?</td><td>1</td><td>0</td></tr> <tr><td>A bicycle?</td><td>1</td><td>0</td></tr> <tr><td>A motorcycle or motor scooter?</td><td>1</td><td>0</td></tr> <tr><td>A car or truck?</td><td>1</td><td>0</td></tr> <tr><td>A boat with a motor?</td><td>1</td><td>0</td></tr> <tr><td>A boat without a motor?</td><td>1</td><td>0</td></tr> <tr><td>None of the above</td><td>-77</td><td></td></tr> </tbody> </table>		Yes	No	Electricity?	1	0	A wall clock?	1	0	A radio?	1	0	A black/white television?.....	1	0	A color television?.....	1	0	A mobile phone?	1	0	A landline telephone?	1	0	A refrigerator?	1	0	A freezer?	1	0	Electric generator/invertor(s)?	1	0	A washing machine?.....	1	0	A computer?	1	0	A digital photo camera?	1	0	A non digital photo camera?	1	0	A video deck?	1	0	A DVD/CD?.....	1	0	A sewing machine?.....	1	0	A bed?	1	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?	1	0	A boat without a motor?	1	0	None of the above	-77		
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11a	<p>Does this household own any livestock, herds, other farm animals, or poultry? <i>These livestock can be kept anywhere, not necessarily on the homestead.</i></p>	<p>Yes..... 1 No 0 No Response -99</p>	Skip to 13 if No																																																																																	
11b	<p>How many of the following animals does this household own? <i>The household can keep the livestock anywhere but must own the livestock recorded here.</i> <i>Zero is a possible answer.</i> <i>Enter -88 for Do not know</i> <i>Enter -99 for No response</i></p>	<p>Cattle Milk cows or bulls Horses/Donkeys/ Mules Goats Sheep Pigs Rabbits Grasscutter Chickens Other poultry Other</p>																																																																																		
12a	<p>Does this household keep any livestock, herds, other farm animals, or poultry ON THE HOMESTEAD, regardless of who owns these livestock?</p>	<p>Yes..... 1 No 0</p>	Skip to 13 if No																																																																																	

12b	<p>How many of the following animals does this household keep ON THE HOMESTEAD?</p> <p><i>The household does not need to own the livestock recorded here.</i></p> <p><i>Zero is a possible answer.</i> <i>Enter -88 for Do not know</i> <i>Enter -99 for No response</i></p>	<p>Cattle</p> <p>Milk cows or bulls</p> <p>Horses/Donkeys/ Mules</p> <p>Goats</p> <p>Sheep</p> <p>Pigs</p> <p>Rabbits</p> <p>Grasscutter</p> <p>Chickens</p> <p>Other poultry</p> <p>Other</p>
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Section 3 – Household Observation

Please observe the floors, roof and exterior walls

13	<p>Main material of the floor</p> <p><i>OBSERVE</i></p>	<p>Natural Floor</p> <p>Earth/Sand11</p> <p>Dung12</p> <p>Rudimentary Floor</p> <p>Wood Planks21</p> <p>Palm/Bamboo22</p> <p>Finished Floor</p> <p>Parquet or polished wood31</p> <p>Vinyl/Asphalt strips.....32</p> <p>Ceramic Tile/Terazzo33</p> <p>Cement34</p> <p>Woolen Carpet/Synthetic Carpet35</p> <p>Linoleum/rubber carpet36</p> <p>Other96</p>
14	<p>Main material of the roof</p> <p><i>OBSERVE</i></p>	<p>Natural Floor</p> <p>No Roof11</p> <p>Thatch/Palm Leaf/ Sod12</p> <p>Rudimentary Roofing</p> <p>Rustic Mat21</p> <p>Palm/Bamboo22</p> <p>Wood Planks23</p> <p>Cardboard24</p> <p>Finished Roofing</p> <p>Metal31</p> <p>Wood.....32</p> <p>Calamine/Cement Fiber33</p> <p>Ceramic Tiles/Brick Tiles34</p> <p>Cement35</p> <p>Roof Shingles.....36</p> <p>Asbestos/Slate Roofing Sheets37</p> <p>Other96</p>
15	<p>Main material of the exterior walls</p> <p><i>OBSERVE</i></p>	<p>Natural Walls</p> <p>No Walls.....11</p> <p>Cane/Palm/Trunks12</p> <p>Dirt13</p> <p>Rudimentary Walls</p> <p>Bamboo with Mud21</p> <p>Stone with Mud22</p> <p>Uncovered Adobe23</p> <p>Plywood24</p> <p>Cardboard25</p> <p>Reused Wood26</p> <p>Finished Walls</p> <p>Cement31</p>

		Stone with Lime/Cement32 Bricks33 Cement Blocks34 Covered Adobe35 Wood Planks/Shingles36 Other96																																																							
Section 4 – Water, Sanitation and Hygiene Now I would like to ask you a few questions about water, sanitation and hygiene.																																																									
16	Do you have a place to wash your hands, or do you have a movable container that is not kept in a fixed location, such as a bowl or kettle, that is commonly used for hand washing? <i>If the container is always in the same location, then count it as a fixed place.</i>	Yes, fixed place.....2 Yes, movable container1 No0 Don't know -88	Skip to 19 if 0 Skip to 17a if 1 Skip to 17b if 2																																																						
17a	Can you show it to me?	Yes1 No0	Skip to 19 if No																																																						
18a	At the place where the household washer their hands, OBSERVE if:	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Soap is present</td> <td>1</td> <td>0</td> </tr> <tr> <td>Water source is present: stored water ...</td> <td>1</td> <td>0</td> </tr> <tr> <td>Water source is present: running water ..</td> <td>1</td> <td>0</td> </tr> <tr> <td>Handwashing area is near a sanitation facility</td> <td>1</td> <td>0</td> </tr> <tr> <td>None of the above.....</td> <td>1</td> <td>0</td> </tr> </tbody> </table>		Yes	No	Soap is present	1	0	Water source is present: stored water ...	1	0	Water source is present: running water ..	1	0	Handwashing area is near a sanitation facility	1	0	None of the above.....	1	0	Skip to 19																																				
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17b	Can you show me any soap, water, and movable container available in the household used for hand washing?	Yes1 No0																																																							
18b	Anywhere within the household, OBSERVE if:	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Soap is present</td> <td>1</td> <td>0</td> </tr> <tr> <td>Water source is present: stored water ...</td> <td>1</td> <td>0</td> </tr> <tr> <td>Water source is present: running water ..</td> <td>1</td> <td>0</td> </tr> <tr> <td>Hand washing container is observed</td> <td>1</td> <td>0</td> </tr> <tr> <td>None of the above.....</td> <td>1</td> <td>0</td> </tr> </tbody> </table>		Yes	No	Soap is present	1	0	Water source is present: stored water ...	1	0	Water source is present: running water ..	1	0	Hand washing container is observed	1	0	None of the above.....	1	0																																					
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19	Which of the following water sources does your family use on a regular basis for any part of the year for any household purpose? <i>READ OUT ALL TYPES AND CHECK ALL THAT ARE USED.</i>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Piped Water</td> <td></td> <td></td> </tr> <tr> <td> Piped into dwelling/indoor</td> <td>1</td> <td>0</td> </tr> <tr> <td> Pipe to yard/plot</td> <td>1</td> <td>0</td> </tr> <tr> <td>Public tap/standpipe.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>Tube well or borehole</td> <td>1</td> <td>0</td> </tr> <tr> <td>Dug Well</td> <td></td> <td></td> </tr> <tr> <td> Protected Well.....</td> <td>1</td> <td>0</td> </tr> <tr> <td> Unprotected Well.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>Water from Spring</td> <td></td> <td></td> </tr> <tr> <td> Protected Spring</td> <td>1</td> <td>0</td> </tr> <tr> <td> Unprotected Spring</td> <td>1</td> <td>0</td> </tr> <tr> <td>Rainwater</td> <td>1</td> <td>0</td> </tr> <tr> <td>Tanker Truck</td> <td>1</td> <td>0</td> </tr> <tr> <td>Cart with Small Tank</td> <td>1</td> <td>0</td> </tr> <tr> <td>Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel)</td> <td>1</td> <td>0</td> </tr> <tr> <td>Bottled Water</td> <td>1</td> <td>0</td> </tr> <tr> <td>Sachet Water</td> <td>1</td> <td>0</td> </tr> </tbody> </table>		Yes	No	Piped Water			Piped into dwelling/indoor	1	0	Pipe to yard/plot	1	0	Public tap/standpipe.....	1	0	Tube well or borehole	1	0	Dug Well			Protected Well.....	1	0	Unprotected Well.....	1	0	Water from Spring			Protected Spring	1	0	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	
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20	What is the main source of drinking water for members of your household? <i>Read out all types and check the main source. Must be a selection in HQ19</i>	<table border="1"> <tbody> <tr> <td>Piped Water</td> <td></td> </tr> <tr> <td> Piped into dwelling/indoor</td> <td>1</td> </tr> <tr> <td> Pipe to yard/plot</td> <td>2</td> </tr> <tr> <td> Public tap/standpipe</td> <td>3</td> </tr> <tr> <td> Tube well or borehole</td> <td>4</td> </tr> <tr> <td>Dug Well</td> <td></td> </tr> <tr> <td> Protected Well</td> <td>5</td> </tr> <tr> <td> Unprotected Well</td> <td>6</td> </tr> <tr> <td>Water from Spring</td> <td></td> </tr> <tr> <td> Protected Spring</td> <td>7</td> </tr> <tr> <td> Unprotected Spring</td> <td>8</td> </tr> </tbody> </table>	Piped Water		Piped into dwelling/indoor	1	Pipe to yard/plot	2	Public tap/standpipe	3	Tube well or borehole	4	Dug Well		Protected Well	5	Unprotected Well	6	Water from Spring		Protected Spring	7	Unprotected Spring	8																																	
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Household Questionnaire

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21	<p>What is the main source of water used by your household for other purposes such as cooking and handwashing?</p> <p><i>Read out all types and check the main source. Must be a selection in HQ19.</i></p>	Piped Water Piped into dwelling/indoor 1 Pipe to yard/plot 2 Public tap/standpipe 3 Tube well or borehole 4 Dug Well Protected Well 5 Unprotected Well 6 Water from Spring Protected Spring 7 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																			
	<p>QUESTIONS HQ 22 TO HQ 24 WILL REPEAT X TIMES, ONCE FOR EACH WATER SOURCE SELECTED IN HQ 17. THESE SOURCES INCLUDE:</p> <p><i>The ODK software will list all sources selected in HQ 19.</i></p>																				
22	<p>You mentioned you used [WATER SOURCE]. At any time of the year, does your family use water from this source for:</p> <p>Drinking Cooking Livestock..... Gardening / agriculture Business venture</p>		<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Drinking 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Cooking 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Livestock..... 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Gardening / agriculture 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Business venture 1</td> <td>1</td> <td>0</td> </tr> </tbody> </table>		Yes	No	Drinking 1	1	0	Cooking 1	1	0	Livestock..... 1	1	0	Gardening / agriculture 1	1	0	Business venture 1	1	0
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23	<p>Is [WATER SOURCE] typically available:</p>	All of the year..... 1 Some of the year 2 Small part of the year 3																			
24	<p>At a time when you expect to have water from [WATER SOURCE], is it usually available?</p>	Yes, always 1 No, intermittent and predictable..... 2 No, intermittent and unpredictable..... 3																			
25	<p>How long does it take to go there, get water, and come back? [WATER SOURCE]?</p> <p><i>Zero is a possible answer Enter -88 for do not know Enter -99 for no response</i></p> <p><i>Convert time into minutes. Answer includes waiting time in line.</i></p>	<p>Minutes:</p>																			

Household Questionnaire

26	Does your family have a garden? <i>A garden is a place to grow vegetables</i>	Yes 1 No 0																																														
27	Do members of your household use any of the following toilet facilities? READ OUT ALL TYPES AND CHECK ALL THAT ARE USED.	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Flush/pour flush toilets connected to:</td> <td></td> <td></td> </tr> <tr> <td> Piped sewer system</td> <td>1</td> <td>0</td> </tr> <tr> <td> Septic tank</td> <td>1</td> <td>0</td> </tr> <tr> <td> Pit Latrine</td> <td>1</td> <td>0</td> </tr> <tr> <td> Elsewhere</td> <td>1</td> <td>0</td> </tr> <tr> <td> Not sure / Don't know.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>Ventilated improved pit latrine.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>Pit latrine with slab</td> <td>1</td> <td>0</td> </tr> <tr> <td>Pit latrine without slab/open pit</td> <td>1</td> <td>0</td> </tr> <tr> <td>Bucket/pan</td> <td>1</td> <td>0</td> </tr> <tr> <td>Composting toilet</td> <td>1</td> <td>0</td> </tr> <tr> <td>Hanging toilet /Hanging latrine</td> <td>1</td> <td>0</td> </tr> <tr> <td>Other:</td> <td>-99</td> <td></td> </tr> <tr> <td>No Response</td> <td></td> <td></td> </tr> </tbody> </table>		Yes	No	Flush/pour flush toilets connected to:			Piped sewer system	1	0	Septic tank	1	0	Pit Latrine	1	0	Elsewhere	1	0	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/pan	1	0	Composting toilet	1	0	Hanging toilet /Hanging latrine	1	0	Other:	-99		No Response			
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28	What is the main toilet facility used by members of your household? <i>Read out all types and check the main facility. Must be selected in HQ25.</i>	<table border="1"> <tbody> <tr> <td>Flush/pour flush toilets connected to:</td> <td></td> </tr> <tr> <td> Piped sewer system</td> <td>1</td> </tr> <tr> <td> Septic tank.....</td> <td>2</td> </tr> <tr> <td> Pit Latrine</td> <td>13</td> </tr> <tr> <td> Elsewhere</td> <td>3</td> </tr> <tr> <td> Unknown / Not sure / Don't know ...</td> <td>4</td> </tr> <tr> <td>Ventilated improved pit latrine</td> <td>5</td> </tr> <tr> <td>Pit latrine with slab.....</td> <td>6</td> </tr> <tr> <td>Pit latrine without slab/open pit.....</td> <td>7</td> </tr> <tr> <td>Bucket/pan.....</td> <td>9</td> </tr> <tr> <td>Composting toilet.....</td> <td>8</td> </tr> <tr> <td>Hanging toilet /Hanging latrine</td> <td>10</td> </tr> <tr> <td>Other:.....</td> <td>11</td> </tr> <tr> <td>No facility / bush / field.....</td> <td>12</td> </tr> <tr> <td>No Response</td> <td>-99</td> </tr> </tbody> </table>	Flush/pour flush toilets connected to:		Piped sewer system	1	Septic tank.....	2	Pit Latrine	13	Elsewhere	3	Unknown / Not sure / Don't know ...	4	Ventilated improved pit latrine	5	Pit latrine with slab.....	6	Pit latrine without slab/open pit.....	7	Bucket/pan.....	9	Composting toilet.....	8	Hanging toilet /Hanging latrine	10	Other:.....	11	No facility / bush / field.....	12	No Response	-99																
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<p>QUESTIONS HQ 29-29b WILL REPEAT X TIMES, ONCE FOR EACH SANITATION FACILITY SELECTED IN HQ 25. THESE FACILITIES INCLUDE:</p> <p><i>The ODK software will list all sources selected in HQ 25.</i></p>																																																
29a	How often does your family typically use [TOILET FACILITY TYPE]? <i>REGULAR PRACTICES AT THE HOUSEHOLD ONLY</i>	Always 1 Most of the time 2 Occasionally 3 Rarely 4 No response -99																																														
29b	Do you share this toilet facility with other households or the public? [Select one]	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	Skip to HQ30 if not 2																																													
29c	Enter the number of households that share this facility (including your own). [TOILET FACILITY TYPE] <i>Must be between 2 and 9.</i> <i>If 10 or greater, swipe back to HQ29b and choose "shared with ten or more households."</i> <i>Enter -99 for no response.</i>	Number of Households:																																														

Household Questionnaire

30	<p>How many people within your household regularly use the bush / field at home or at work?</p> <p>There are x people in this household.</p> <p><i>Enter -88 for do not know, Enter -99 for no response.</i></p>	Number of People:	
31	<p>Ask permission to take a photo of the entrance of the house.</p> <p>Did you get consent to take the photo?</p>	<p>Yes 1</p> <p>No 0</p>	Skip to N if No
<p>Thank the respondent for his/her time.</p> <p>THE RESPONDENT IS FINISHED, BUT THERE ARE STILL TWO MORE QUESTIONS FOR YOU TO COMPLETE OUTSIDE THE HOUSE.</p>			

LOCATION AND QUESTIONNAIRE RESULT

K	<p>PHOTO</p> <p>Ensure that no people are in the photo</p>	<p><i>Instructions are given directly by the ODK software</i></p> <p>TAKE PICTURE</p> <p>CHOOSE IMAGE</p>	
L	<p>GPS: Take a GPS point outside near the entrance to the household.</p> <p><i>Record location when the accuracy is smaller than 6m. GPS Coordinates can only be collected when outside.</i></p>	<p><i>Instructions are given directly by the ODK software</i></p> <p>RECORD LOCATION</p>	
M	<p>How many times have you visited this household?</p>	<p>1st time 1</p> <p>2nd time 2</p> <p>3rd time 3</p>	
N	<p>Record the result of the Household Questionnaire</p>	<p>Completed 1</p> <p>No household member at home or no competent respondent at home at time of visit 2</p> <p>Postponed 3</p> <p>Refused 4</p> <p>Partly completed 5</p> <p>Dwelling vacant or address not a dwelling .6</p> <p>Dwelling destroyed 7</p> <p>Dwelling not found..... 8</p>	