

NO	QUESTIONS AND FILTERS	CODING CA	TEGORIE	S		SKIP
	TIFICATION se record the following identifying informat	ion prior to b	peginning	the intervi	ew.	
	Your name: Is this your name?					
	[ODK will display the name associated with the phone's serial number.]	V			4	
A	Check the button next to the name if that is your name and select 'yes' here. Do not check the button if that is not your name and select 'no' here (long press to remove response next to the name if needed).	Yes No				
	Enter your name below. Please record your name	Interviewer's	Name			
	Is this date and time correct?					
В	[THE CURRENT DATE AND TIME WILL BE DISPLAYED ON SCREEN]	Yes No				Skip to D if Yes
С	Record the correct date and time	Date	Month	Day	Year	
		Time	Hour	Minutes	AM/PM	
D1	Region	Tigray Afar Amhara Oromia Ethiopia Son Benishangu SNNPR Gambella Harari Addis Ababa Dire Dawa	nali I Gumuz			
D2	Zone	ODK will pop based on the			ate zones	
D3	District	ODK will pop based on the			ate districts	
D4	Locality Name	ODK will pop based on the only one cho	selected (ate localities re may be	
D5	Enumeration area	ODK should	populate t	he appropri	ate EA	
	Structure number					
E	Please record the structure number from the household listing form.					
	Household number					
F	Please record the household number from the household listing form.					



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NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	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	Skip to G if No
	WARNING: Contact your supervisor before	e sending this form again.	
	CHECK: Why are you resending this form? Choose al that apply.	There are new household members on this form	
G	Is a member of the household and competent respondent present and available to be interviewed today?	Yes	Skip to 31 if No
G2	Did this household participate in a previous PMA2020 survey?	Yes 1 No 0 Do not know -88 No response -99	
Find	INFORM a competent member of the household. Re	ED CONSENT and the greeting on the following screen.	
Unive We w gover confic Partic just le we ho I am (ask a	rsity, and Federal Ministry of Health. We are could very much appreciate your participation in ment to better plan health services. Whatevelential and will not be shown to anyone other sipation in this survey is voluntary, and if we slet me know and I will go on to the next question that you will participate in this survey since going to ask you questions about your family a	than members of our survey team. nould come to any question you don't want to ans in; or you can stop the interview at any time. How e your views are important. and other household members. We would then lik of this household who are between the ages of 1	swer, vever,
Н	Explain the consent form to the respondent. Then, ask: May I begin the interview now?	Yes	Skip to K if No
I	Interviewer's name Please record your name as a witness to the consent process. You previously entered "[NAME FROM HQ B]."		
	Respondent's first name.		
J	Please record the first name of the respondent.		



SE	CTIO	N 1 – Housel	nold Roste	e <u>r</u>					
I an	n now g	going to ask yo	u a series d	of questions a	bout eac	h usual member of the	e housel	nold or anyone who slept in the hous	e last night.
	1	2	3	4		5	6	7	8
No	First name	Sex	Age (years) If less than one year old, record 0.	Marital St	atus	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 Living with a particle of the properties of the pr	artner 2 arated . 3 ver 4 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 No response -99		Usual member of the household who slept in the house last night	Yes 1 No 0 ODK will determine and display eligibility
1						·			
2									
3									
4									
5									
Afte	er recor	ding information	for one hou	sehold membe	er, the foll	owing prompt is asked t	o activat	e a looping script to record information f	or another member
9	house	ere any other usehold or persons oht?			Yes			1	
	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.					Skip to 10 if Yes			



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			SKIP
	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.		<u>Yes</u>	<u>No</u>	
10	READ OUT ALL TYPES AND SELECT ALL THAT APPLY.	Electricity? A watch/clock? A radio? A television? A mobile phone? A non-mobile telephone? A refrigerator? A table A chair A bed with cotton/sponge/spring mattress An electric mitad A kerosene lamp/pressure lamp A bicycle? A motorcycle or motor scooter? An animal-drawn cart? A car or truck? None of the above No response	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
11a	Does this household own any livestock, herds, other farm animals, or poultry? These livestock can be kept anywhere, not necessarily on the homestead.	Yes No No response		0	Skip to 12a if No
	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.				
11b	The household can keep the livestock anywhere but must own the livestock recorded here.				
	Milk cows, oxen or bulls Horses, donkeys, or mules Camels Goats Sheep Chickens Beehives				



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
12a	Does this household keep any livestock, herds, other farm animals, or poultry ON THE HOMESTEAD, regardless of who owns these livestock? Homestead includes the structure and yard	Yes	Skip to 13 if No
	that is close to the structure. How many of the following animals does this household keep ON THE HOMESTEAD?		
	Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.		
12b	The household does not need to own the livestock recorded here.		
	Milk cows, oxen or bulls Horses, donkeys, or mules Camels Goats Sheep Chickens Beehives		
DI		usehold Observation	
Plea	se observe the floors, roof and exterior wal		T
13	Main material of the floor	Earth/Sand 11 Dung 12 Wood Planks 21 Palm/Bamboo 22 Parquet or polished wood 31 Vinyl/Asphalt strips 32	
10	Observe.	Ceramic Tiles 33 Cement 34 Carpet 35 Other 96 No response -99	
14	Main material of the roof Observe.	No Roof 11 Thatch/Leaf/ Mud 12 Rustic Mat/Plastic Sheets 21 Reed/Bamboo 22 Wood Planks 23 Cardboard 24 Corrugated Iron/Metal 31 Wood 32 Asbestos/Cement Fiber 33 Cement/Concrete 34 Roof Shingles 35 Other 96 No response -99	



	ousehold Questionnaire				
NO	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
15	Main material of the exterior walls Observe.	No Walls Cane/Palm/Trunks/Bamboo/Reed Dirt Bamboo/ Wood with Mud Stone with Mud Uncovered Adobe Plywood Cardboard Reused Wood Corrugated sheets Cement Stone with Lime/Cement Bricks Cement Blocks Covered Adobe Wood Planks/Shingles Other No response	12 21 22 23 24 25 26 31 32 33 34 35 36 96		
Now	Section 4 – Water, I would like to ask you a few questions abo	Sanitation and Hygiene out 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?	Yes No Don't know No response	0 88		Skip to 19 if No Go to 17a if 16 is 1
	If the container is always in the same location, then count it as a fixed place				10151
17a	Can you show it to me?	Yes			Skip to 19 if No
18a	At the place where the household washes their hands, observe if: Soap is present		Yes 1 1 1 1 1	No 0 0 0 0	
17b	Can you show me any soap, water, and movable container available in the household used for hand washing?	Yes			
18b	ANYWHERE WITHIN THE HOUSEHOLD, OBSERVE IF: Soap is present		Yes 1 1 1 1	No 0 0 0 0	Skip to 19



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 tap/standpipe Tube well or borehole Dug Well Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater Tanker Truck	1 1 1 1 1	No 0 0 0 0 0	one
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	Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater	1 1 1 1 1	0 0 0 0	If only one source
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	Piped into dwelling/indoor Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater	1 1 1 1 1	0 0 0 0	one
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	Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater	1 1 1 1 1	0 0 0	one
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	Pipe to yard/plot Public tap/standpipe Tube well or borehole Dug Well Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater	1 1 1 1 1	0 0	one
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	Tube well or borehole	1 1 1	0	one
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	Tube well or borehole	1 1 1	0	one
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	Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater	1	_	one
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	Protected Well Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater	1	_	source
basis for any part of the year for any purpose? Read out all types and check all that are	Water from Spring Protected Spring Unprotected Spring		0	
purpose? Read out all types and check all that are	Water from Spring Protected Spring Unprotected Spring			is
Read out all types and check all that are	Unprotected Spring	1		select
	Rainwater		0	ed,
	Rainwater	1	0	skip to
	Tanker Truck		0	HQZZ
	Talikei Huck	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		
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.	Unprotected Well Water from Spring Protected Spring Unprotected Spring Rainwater Tanker Truck Cart with Small Tank Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) Bottled Water	2 3 4 5 6 7 8 9 10 11		
	Bottled Water	.13 .14		
	for members of your household? Selections from HQ19: [ODK will list water sources selected for HQ19]	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. Read out HQ19 selections only. Protected Well Water from Spring Protected Spring Unprotected Spring Unprotected Spring Carl with Small Tank Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) Bottled Water Sachet Water	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. Protected Well	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. Read out HQ19 selections only. Protected Well



	ousehold Questionnaire		•	
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	S	SKIP
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. 14	Piped Water Piped into dwelling/indoor 1 Pipe to yard/plot 2 Public tap/standpipe 3 Tube well or borehole 4 Dug Well 5 Protected Well 6 Water from Spring 7 Unprotected 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 No Response -99		
	Questions HQ 22 to HQ 25 will repeat x tim 19. These sources include: [ODK will display HQ19 selections.]	 nes, once for each water source selected i	n HQ	
22	You mentioned that you used [WATER SOURCE]. At any time of the year, does your household use water from this source for: Drinking		No 0 0 0 0 0	
23	Is [WATER SOURCE] typically available: Read all choices out loud.	All of the year	!	
24	At a time of year when you expect to have water from [WATER SOURCE], is it usually available?	Yes, always	!	



	ousenold Questionnaire		
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
6 -	How long does it take to go to [WATER SOURCE], get water, and come back? Zero is a possible answer. Convert answer		
25	to minutes. Includes waiting time in line. Enter -88 for do not know, -99 for no response.	Minutes:	
26	Does your household have a garden?	Yes 1 No 0	
	A garden is a place to grow vegetables.	No response99	
	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.	Yes No	
27	Flush/pour flush toilets connected to: Piped sewer system Septic tank Elsewhere Unknown / Not sure / Don't know 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	1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0	
28	What is the main toilet facility used by members of your household? HQ27: [ODK will display HQ2 selections] The main facility must be selected in HQ 27. Flush/pour flush toilets connected to: Piped sewer system Septic tank Elsewhere Unknown / Not sure / Don't know 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		
		or each sanitation facility selected in HQ27.	
	HQ27: [ODK will display HQ2 selections]		



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
		Always 1	01111
	How often does your household typically	Most of the time	
29	use: [TOILET FACILITY TYPE]?	Occasionally 3	
	Regular practices at the household only.	Rarely 4	
		No response99	
		Not shared 1 Shared with less than ten households 2	
29b	Do you share this toilet facility with other	Shared with ten or more households 3	Skip to HQ30
	households or the public?	Shared with the public4	if not 2
		No response99	
	Enter the number of households that share this facility (including your own).		
	[TOILET FACILITY TYPE]		
29c	Must be between 2 and 9.	Number of Households:	
	If 10 or greater, swipe back to HQ29b and choose "shared with ten or more		
	households."		
	Enter -99 for no response.		
	How many people within your household		
	regularly use the bush / field at home or at work?	Number of	
30		People:	
	There are x people in this household. Enter -88 for do not know, -99 for no		
	response.		
	Ask permission to take a photo of the		
31	entrance of the house. Did you get	Yes 1 Skip L	if No
	consent to take the photo?	110	
	nk the respondent for her/his time.		
The	respondent is finished, but there is still more fo	or you to complete outside the home.	
LOC	CATION AND QUESTIONNAIRE RES	ULT	
	Location		
	Take a GPS point near the entrance to the		
K	household. Record location when the	RECORD LOCATION	
	accuracy is smaller than 6m.		
	CHECK 31: Permission to take photo?		Skip to M if
	enzenten remmeden te take prieter.		No
L	Ensure that no people are in the photo	TAKE PICTURE	
		CHOOSE IMAGE	
	How many times have you visited this	1 st time 1	
М	household?	2 nd time	
		3 rd time 3	



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
N	Questionnaire result Record the result of the Household Questionnaire	Completed	