

Household Questionnaire					
NO	QUESTIONS AND FILTERS	CODING CATEGORIES			Relevant if:
<b>IDENTIFICATION</b>					
Please record the following identifying information prior to beginning the interview.					
001a	<p><b>Your name: Is this your name?</b></p> <p>[ODK will display the name of the Enumerator associated with the phone's serial number.]</p> <p><i>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).</i></p>	Yes ..... 1 No ..... 0	Always		
001b	<p><b>Enter your name below.</b></p> <p><i>Please record your name</i></p>	Interviewer's Name			
002a	<p><b>Current date and time.</b></p> <p>[ODK will display on screen]</p> <p><b>Is this date and time correct?</b></p>	Yes ..... 1 No ..... 0	Always		
002b	<b>Record the correct date and time</b>	Date	Month	Day	Year
		Time	Hour	Minutes	AM/PM
002a = 0					
003a	<p><b>Region</b></p> <p><i>Select the region</i></p>	Ashanti ..... 1 Brong-Ahafo ..... 2 Central ..... 3 Eastern ..... 4 Greater Accra ..... 5 Northern ..... 6 Upper East ..... 7 Upper West ..... 8 Volta ..... 9 Western ..... 10	Always		
003b	<p><b>District</b></p> <p><i>Select the district</i></p>	ODK will populate a list of appropriate district based on the region selected.			Always
003c	<p><b>Locality name</b></p> <p><i>Select the locality</i></p>	ODK will populate a list of appropriate localities based on the district selected.			Always
004	<b>Enumeration area</b>	ODK will populate a list of appropriate enumeration areas based on the Locality selected			Always
005	<p><b>Structure number</b></p> <p><i>Please record the structure number from the household listing form.</i></p>	Number	<input type="text"/>		Always
006	<p><b>Household number</b></p> <p><i>Please record the household number from the household listing form.</i></p>	Number	<input type="text"/>		Always

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
007	<b>Check: Have you already sent a form for this structure and household?</b> <i>Do not duplicate any form unless you are correcting a mistake in an earlier form.</i>	Yes ..... 1 No ..... 0	Always
	<b>WARNING: Contact your supervisor before sending this form again.</b>		007 = 1
008	<b>CHECK: Why are you resending this form?</b> <i>Choose all that apply.</i>	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 it was not received ..... 4 Other reason(s) ..... 5	007 = 1
009	<b>Is a member of the household and competent respondent present and available to be interviewed today?</b>	Yes ..... 1 No ..... 0	Always
010	<b>Did this household participate in a previous PMA2020 survey?</b>	Yes ..... 1 No ..... 0 Do not know ..... -88 No response ..... 0	009=1
<b>INFORMED CONSENT</b>			
<b>Find a competent member of the household. Read the greeting on the following screen.</b>			
011a	Hello. My name is _____ and I am working for Kwame Nkrumah University of Science and Technology, and the Ghana Health Service. 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.  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.  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: <b>May I begin the interview now?</b>	Yes ..... 1 No ..... 0	009 = 1
011b	<b>Respondent's signature</b> <i>Please ask the respondent to sign or check the box in agreement of their participation.</i>	Gather signature:  Check box: <input type="checkbox"/>	011a = 1
011c	<b>Interviewer's name</b> <i>Please record your name as a witness to the consent process. You previously entered "[NAME FROM 001]."</i>	<input type="text"/>	011a = 1
012	<b>Respondent's first name.</b> <i>Please record the first name of the respondent.</i>	<input type="text"/>	011a = 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	<b>Name of HH member/visitor</b> <i>Start with the head of the household.</i>		<input type="text"/> Name	<input type="text"/> Name	<input type="text"/> Name	HM1: 108=1 HM2+: 108=1 OR 109=0
	102	<b>What is [NAME]’s relationship to the head of the household?</b>	Head ..... Wife/Husband ..... Son/Daughter ..... Son/Daughter-in-law ..... Grandchild ..... Parent ..... Parent in law ..... Brother/Sister ..... Other ..... Brother/Sister in law ..... Don't know ..... No response .....	1 2 3 4 5 6 7 8 9 10 -88 -99	1 2 3 4 5 6 7 8 9 10 -88 -99	1 2 3 4 5 6 7 8 9 10 -88 -99	HM1:108=1 HM2+: 108=1 OR 109=0
	103	<b>Is [NAME] Male or Female?</b>	Male ..... Female ..... No response .....	1 2 -99	1 2 -99	1 2 -99	HM1: 108=1 HM2+: 108=1 OR 109=0
	104	<b>How old was [NAME] at their last birthday?</b> <i>If less than one year old, enter 0</i>		<input type="text"/> Age	<input type="text"/> Age	<input type="text"/> Age	HM1: 108=1 HM2+: 108=1 OR 109=0
Screen #2	105	<b>What is [NAME]’s current marital status?</b>  <i>If not married, probe to determine if they have ever been married and, if so, if they are divorced/separated or widowed.</i>	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	<b>Does [NAME] usually live here?</b>	Yes ..... No ..... No response .....	1 0 -99	1 0 -99	1 0 -99	HM1: 108=1 HM2+: 108=1 OR 109=0
	107	<b>Did [NAME] stay here last night?</b>	Yes ..... No ..... No response .....	1 0 -99	1 0 -99	1 0 -99	HM1: 108=1 HM2+: 108=1 OR 109=0
Screen #3	LC L10 1	<b>What is the religion of [NAME]?</b>  <i>Only recorded for the head of the household.</i>	Catholic .....1 Anglican .....2 Methodist .....3 Presbyterian .....4 Pentecostal/ Charismatic.5 Other Christian .....6 Islam .....7 Traditional/Spiritualist .....8 Other .....96 No religion ..... -77 No response ..... -99				102 = 1

Household Questionnaire

Screen #4	LC L10 2	<b>What is the ethnicity of [NAME]?</b> <i>Only asked of the head of the household.</i>	Akan .....1 Ga/Dangme .....2 Ewe.....3 Guan .....4 Mole-Dagbani .....5 Grusi .....6 Gurma.....7 Mande.....8 Other.....96 No response ..... -99				102 = 1
	108	<b>Are there any other usual members of your household or persons who slept in the house last night?</b>	Yes ..... No.....	1 0	1 0	1 0	011a=1
	109	<b>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?</b> <i>Remember to include all children in the household.</i>		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	<b>Please tell me about the items your household owns. Does your household have:</b>  <i>Read out all types and select all that apply. Scroll to bottom to see all choices.</i>  <i>If an item is reported broken but said to be out of use only temporarily, select the item. Otherwise do not select the item.</i>	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/tablet computer? ..... 1/0 A photo camera (NOT ON PHONE)? ..... 1/0 A video deck/DVD/VCD? ..... 1/0 A sewing machine? ..... 1/0 A bed? ..... 1/0 A table? ..... 1/0 A cabinet/cupboard? ..... 1/0 Access to the Internet in any device? ..... 1/0 A wrist watch? ..... 1/0 A bicycle? ..... 1/0 A motorcycle or motor scooter? ..... 1/0 An animal-drawn cart? ..... 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 No response ..... -99	011a=1
202a	<b>Does this household own any livestock, herds, other farm animals, or poultry?</b>  <i>These livestock can be kept anywhere, not necessarily on the homestead.</i>	Yes ..... 1 No..... 0 No response ..... -99	011a = 1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:																												
202b	<p><b>How many of the following animals does this household own?</b></p> <p><i>Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.</i></p> <p><i>The household can keep the livestock anywhere but must own the livestock recorded here.</i></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: right;">Cattle</td><td style="border: 1px solid black; width: 80px;"></td></tr> <tr><td style="text-align: right;">Milk cows or bulls</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Horses/Donkeys/ Mules</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Goats</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Sheep</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Pigs</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Rabbits</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Grasscutter</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Chickens</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Other poultry</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Other</td><td style="border: 1px solid black;"></td></tr> </table>	Cattle		Milk cows or bulls		Horses/Donkeys/ Mules		Goats		Sheep		Pigs		Rabbits		Grasscutter		Chickens		Other poultry		Other		011a=1 AND 202a = 1						
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203a	<p><b>Does this household keep any livestock, herds, other farm animals, or poultry ON THE HOMESTEAD, regardless of who owns these animals?</b></p> <p><i>Homestead includes the structure and yard that is close to the structure.</i></p>	Yes ..... 1 No ..... 0 No response ..... -99	011a = 1																												
203b	<p><b>How many of the following animals does this household keep ON THE HOMESTEAD?</b></p> <p><i>Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.</i></p> <p><i>The household does not need to own the livestock recorded here.</i></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: right;">Cattle</td><td style="border: 1px solid black; width: 80px;"></td></tr> <tr><td style="text-align: right;">Milk cows or bulls</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Horses/Donkeys/ Mules</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Goats</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Sheep</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Pigs</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Rabbits</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Grasscutter</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Chickens</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Other poultry</td><td style="border: 1px solid black;"></td></tr> <tr><td style="text-align: right;">Other</td><td style="border: 1px solid black;"></td></tr> </table>	Cattle		Milk cows or bulls		Horses/Donkeys/ Mules		Goats		Sheep		Pigs		Rabbits		Grasscutter		Chickens		Other poultry		Other		011a=1 AND 203a = 1						
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<p><b>Section 3 – Household Observation</b> Please observe the floors, roof and exterior walls.</p>																															
301	<p><b>Main material of the floor</b></p> <p><i>Observe.</i></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2">Natural Floor</td></tr> <tr><td style="text-align: right;">Earth/Sand .....</td><td style="text-align: right;">11</td></tr> <tr><td style="text-align: right;">Dung .....</td><td style="text-align: right;">12</td></tr> <tr><td colspan="2">Rudimentary Floor</td></tr> <tr><td style="text-align: right;">Wood Planks .....</td><td style="text-align: right;">21</td></tr> <tr><td colspan="2">Finished Floor</td></tr> <tr><td style="text-align: right;">Parquet or polished wood .....</td><td style="text-align: right;">31</td></tr> <tr><td style="text-align: right;">Vinyl/Asphalt strips.....</td><td style="text-align: right;">32</td></tr> <tr><td style="text-align: right;">Ceramic Tile/Terazzo.....</td><td style="text-align: right;">33</td></tr> <tr><td style="text-align: right;">Cement .....</td><td style="text-align: right;">34</td></tr> <tr><td style="text-align: right;">Woolen Carpet/Synthetic Carpet .....</td><td style="text-align: right;">35</td></tr> <tr><td style="text-align: right;">Linoleum/rubber carpet.....</td><td style="text-align: right;">36</td></tr> <tr><td style="text-align: right;">Other .....</td><td style="text-align: right;">96</td></tr> <tr><td style="text-align: right;">No response.....</td><td style="text-align: right;">-99</td></tr> </table>	Natural Floor		Earth/Sand .....	11	Dung .....	12	Rudimentary Floor		Wood Planks .....	21	Finished Floor		Parquet or polished wood .....	31	Vinyl/Asphalt strips.....	32	Ceramic Tile/Terazzo.....	33	Cement .....	34	Woolen Carpet/Synthetic Carpet .....	35	Linoleum/rubber carpet.....	36	Other .....	96	No response.....	-99	011a = 1
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NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
302	<b>Main material of the roof</b> <i>Observe.</i>	Natural Roofing No Roof..... 11 Thatch/Palm Leaf/ Sod ..... 12 Rudimentary Roofing Rustic Mat.....21 Palm/Bamboo .....22 Wood Planks.....23 Cardboard .....24 Finished Roofing Metal .....31 Wood.....32 Calamine/Cement Fiber .....33 Ceramic/Brick Tiles .....34 Cement .....35 Roofing Shingles.....36 Asbestos/Slate Roofing Sheets .....37 Other .....96 No response .....-99	011a = 1
303	<b>Main material of the exterior walls</b> <i>Observe.</i>	Natural Walls No Walls..... 11 Cane/Palm/Trunks ..... 12 Dirt ..... 13 Rudimentary Walls Bamboo with Mud .....21 Stone with Mud .....22 Uncovered Adobe .....23 Plywood .....24 Cardboard .....25 Reused Wood .....26 Finished Walls Cement .....31 Stone with Lime/Cement.....32 Bricks .....33 Cement Blocks.....34 Covered Adobe .....35 Wood Planks/Shingles .....36 Other .....96 No response .....-99	011a = 1
<b>Section 4 – Water, Sanitation and Hygiene</b> Now I would like to ask you a few questions about water, sanitation and hygiene.			
401a	<b>Do you have a place to wash your hands?</b>	Yes ..... 1 No ..... 0 Don't know ..... -88 No response ..... -99	011a = 1
401b	<b>Can you show it to me?</b>	Yes ..... 1 No ..... 0	401a = 1
401c	<b>At the place where the household washes their hands, observe if:</b> <i>Check all that apply.</i>	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	401b = 1

Household Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
402	<p><b>Which of the following water sources does your household use on a regular basis for any part of the year for any purpose?</b></p> <p><i>Read out all types and check all that are used. Scroll to the bottom to see all choices.</i></p>	<p>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 or Bicycle 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</p>	011a = 1
403	<p><b>What is the main source of drinking water for members of your household?</b></p> <p><b>Selections from Q402: [ODK will list water sources selected for Q402]</b></p> <p><i>Read out Q402 selections only.</i></p>	<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 or Bicycle with Small Tank ..... 11                      Surface water                      (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel)..... 12                      Bottled Water ..... 13                      Sachet Water ..... 14                      No response ..... -99</p>	011a = 1 More than one option selected in 402
404	<p><b>What is the main source of water used by your household for other purposes such as cooking and hand washing?</b></p> <p><b>Selections from Q402: [ODK will list water sources selected for Q402]</b></p> <p><i>Read out Q402 selections only.</i></p>	<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 or Bicycle with Small Tank ..... 11                      Surface water                      (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel)..... 12                      Bottled Water ..... 13                      Sachet Water ..... 14                      No Response ..... -99</p>	More than one option selected in 402

Household Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
	<p>Questions Q405 to Q408 will repeat X times, once for each water source selected in Q402. These sources include:  <b>Q402: [ODK will display Q402 selections.]</b></p>		
405	<p><b>You mentioned that you used [WATER SOURCE]. At any time of the year, does your household use water from this source for:</b></p>	<p>Drinking ..... 1/0            Cooking ..... 1/0            Livestock ..... 1/0            Gardening / agriculture ..... 1/0            Business venture ..... 1/0            Washing ..... 1/0            No response ..... -99</p>	402 ≠ -99
406	<p><b>How many months out of the year is [WATER SOURCE] usually available?</b>  <i>Zero is a possible answer. Please record the number of completed months. Enter -88 for Do Not Know, -99 for No Response</i></p>	<p>Number of months <input data-bbox="1038 645 1257 730" type="text"/></p>	402 ≠ -99
407	<p><b>At a time of year when you expect to have water from [WATER SOURCE], is it usually available?</b></p>	<p>Yes, always ..... 1            No, intermittent and predictable ..... 2            No, intermittent and unpredictable ..... 3            No response ..... -99</p>	402 ≠ -99
408	<p><b>How long does it take to go to [WATER SOURCE], get water, and come back?</b>  <i>Zero is a possible answer            Enter -88 for do not know            Enter -99 for no response</i>   <i>Convert time into minutes.            Answer includes waiting time in line.</i></p>	<p>Minutes: <input data-bbox="1046 981 1265 1066" type="text"/></p>	402 ≠ -99
409	<p><b>Do members of your household use any of the following toilet facilities?</b>  <i>Read out all types and check all that are used.</i>  <i>Scroll to the bottom to see all choices.</i></p>	<p>Flush/pour flush toilets connected to:            Piped sewer system ..... 1/0            Septic tank ..... 1/0            Pit latrine ..... 1/0            Elsewhere ..... 1/0            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</p>	011a = 1



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
410	<p><b>What is the main toilet facility used by members of your household?</b></p> <p><b>Q409: [ODK will display Q409 selections]</b></p> <p><i>The main facility must have been selected in Q409.</i></p>	<p>Flush/pour flush toilets connected to:</p> <p>Piped sewer system ..... 1</p> <p>Septic tank ..... 2</p> <p>Pit latrine ..... 13</p> <p>Elsewhere ..... 3</p> <p>Unknown / Not sure / Don't know ..... 4</p> <p>Ventilated improved pit latrine ..... 5</p> <p>Pit latrine with slab ..... 6</p> <p>Pit latrine without slab/open pit ..... 7</p> <p>Composting toilet ..... 8</p> <p>Bucket/pan ..... 9</p> <p>Hanging toilet /Hanging latrine ..... 10</p> <p>Other: ..... 11</p> <p>No facility / bush / field ..... 12</p> <p>No Response ..... 99</p>	More than one option selected for 409
	<p><b>Questions Q411, 412a and 412b- will repeat X times, once for each toilet facility selected in Q409. These facilities include:</b></p> <p><b>Q409: [ODK will display Q409 selections]</b></p>		409 ≠ -99
411	<p><b>How often does your household typically use: [TOILET FACILITY TYPE]?</b></p> <p><i>Regular practices at the household only.</i></p>	<p>Always ..... 1</p> <p>Most of the time ..... 2</p> <p>Occasionally ..... 3</p> <p>No response ..... 99</p>	409 ≠ -99
412a	<p><b>Do you share this toilet facility with other households or the public?</b></p>	<p>Not shared ..... 1</p> <p>Shared with less than ten households ..... 2</p> <p>Shared with ten or more households ..... 3</p> <p>Shared with the public. .... 4</p> <p>No response ..... 99</p>	409 ≠ -99
412b	<p><b>Enter the number of households that share this facility (including your own).</b></p> <p><b>[TOILET FACILITY TYPE]</b></p> <p><i>Must be between 2 and 9.</i></p> <p><i>If 10 or greater, swipe back to Q412a and choose "shared with ten or more households."</i></p> <p><i>Enter -99 for no response.</i></p>	<p>Number of Households: <input data-bbox="1050 1249 1267 1339" type="text"/></p>	412a = 2
413	<p><b>How many people within your household regularly use the bush / field at home or at work?</b></p> <p><b>There are X people in this household.</b></p> <p><i>Enter -88 for do not know, -99 for no response.</i></p>	<p>Number of People: <input data-bbox="1050 1574 1267 1664" type="text"/></p>	011a = 1

## Household Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
414	<p><b>For all children under age five: what methods, if any, does your household use to dispose of children's waste?</b></p> <p><i>Do not read the possible answers out loud.</i></p>	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	011a = 1
<b>LOCATION AND QUESTIONNAIRE RESULT</b>			
095a	<p><b>Ask permission to take a photo of the entrance of the house.</b></p> <p><b>Did you get consent to take the photo?</b></p>	Yes ..... 1 No..... 0	Always
<p><b>Thank the respondent for her/his time.</b></p> <p><i>The respondent is finished, but there is still more for you to complete outside the home.</i></p>			
095b	<b>Ensure that no people are in the photo</b>	TAKE PICTURE CHOOSE IMAGE	095a = 1
096	<p><b>Location</b></p> <p><i>Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6m.</i></p>	RECORD LOCATION	Always
097	<b>How many times have you visited this household?</b>	1 <sup>st</sup> time..... 1 2 <sup>nd</sup> time..... 2 3 <sup>rd</sup> time ..... 3	Always
098	<b>In what language was this interview conducted?</b>	English ..... 1 Akan ..... 2 Ga ..... 3 Ewe ..... 4 Nzema ..... 5 Dagbani..... 6 Other ..... 96	011a=1
099	<p><b>Questionnaire result</b></p> <p><i>Record the result of the Household Questionnaire</i></p>	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