

HOUSEHOLD INFORMATION PANEL				HH	
HH1. Cluster number: _____		HH2. Household number: _____			
HH3. Interviewer's name and number: NAME _____		HH4. Supervisor's name and number: NAME _____			
HH5. Day / Month / Year of interview: _____ / _____ / <u>20</u> _____		HH7. Governorate name and code: Name _____			
HH6. Area:	URBAN 1 RURAL 2 CAMP 3				
HH9. Is the household selected for Water Quality Testing?	Yes 1 No 2	HH10. Is the household selected for blank testing?	Yes 1 No 2		
<i>Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.</i>				HH11. Record the time. HOURS : MINUTES ____ : ____	
HH12. Hello, my name is (<i>your name</i>). We are from Palestinian Central Bureau of Statistics. We are conducting a survey about the situation of children, families and households. I would like to talk to you about these subjects. This interview usually takes about 30 minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or stop the interview, please let me know. May I start now?					
YES 1 NO / NOT ASKED 2		1 ⇨ LIST OF HOUSEHOLD MEMBERS 2 ⇨ HH46			
HH46. Result of Household Questionnaire interview: <i>Discuss any result not completed with Supervisor.</i>	COMPLETED 01 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 02 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 03 REFUSED 04 DWELLING VACANT OR ADDRESS NOT A DWELLING 05 DWELLING DESTROYED 06 DWELLING NOT FOUND 07 OTHER (specify) 96				
HH47. Name and line number of the respondent to Household Questionnaire interview: NAME _____		<i>To be filled after the Household Questionnaire is completed</i>		<i>To be filled after <u>all</u> the questionnaires are completed</i>	
HOUSEHOLD MEMBERS		TOTAL NUMBER		COMPLETED NUMBER	
WOMEN AGE 15-49		HH48	_____	HH53	_____
CHILDREN UNDER AGE 5		HH51	_____	HH55	_____
CHILDREN AGE 5-17		HH52	_____	HH56	ZERO 0 ONE 1

LIST OF HOUSEHOLD MEMBERS																			HL
<p>First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, <u>make sure to probe</u> for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as servants, friends) but who usually live in the household.</p> <p>Then, ask questions HL4A-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box: <input type="checkbox"/></p>																			
HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. Probe for additional household members.	HL3. What is the relationship of (name) to (name of the head of household)?	HL4. Is (name) male or female? 1 MALE 2 FEMALE	HL4A. Refugee Status? 1 REGISTERED REFUGEE 2 NON-REGISTERED REFUGEE 3 NON-REFUGEE	HL5. What is (name)'s date of birth? 98 DK 9998 DK		HL6. How old is (name)? Record in completed years. If age is 95 or above, record '95'.	HL8. Record line number if woman and age 15-49.	HL10. Record line number if age 0-4.	HL11. Age 0-17? 1 YES 2 NO <input type="checkbox"/> Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO <input type="checkbox"/> HL16 8 DK <input type="checkbox"/> HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO <input type="checkbox"/> HL15	HL14. Record the line number of mother and go to HL16.	HL15. Where does (name)'s natural mother live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME GOVERNORATE 3 IN ANOTHER HOUSEHOLD IN ANOTHER GOVERNORATE 4 INSTITUTION IN THIS COUNTRY 8 DK	HL16. Is (name)'s natural father alive? 1 YES 2 NO <input type="checkbox"/> HL20 8 DK <input type="checkbox"/> HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO <input type="checkbox"/> HL19	HL18. Record the line number of father and go to HL20.	HL19. Where does (name)'s natural father live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME GOVERNORATE 3 IN ANOTHER HOUSEHOLD IN ANOTHER GOVERNORATE 4 INSTITUTION IN THIS COUNTRY 8 DK	HL20. Copy the line number of mother from HL14. If blank, ask: Who is the primary caretaker of (name)? If 'No one' for a child age 15-17, record '90'.
LINE	NAME	RELATION*	M F		MONTH	YEAR	AGE	W 15-49	0-4	Y N	Y N DK	Y N	MOTHER		Y N DK	Y N	FATHER		
01		0 1	1 2	1 2 3	__	__	__	01	01	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
02		__	1 2	1 2 3	__	__	__	02	02	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
03		__	1 2	1 2 3	__	__	__	03	03	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
04		__	1 2	1 2 3	__	__	__	04	04	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
05		__	1 2	1 2 3	__	__	__	05	05	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
06		__	1 2	1 2 3	__	__	__	06	06	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
07		__	1 2	1 2 3	__	__	__	07	07	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
08		__	1 2	1 2 3	__	__	__	08	08	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
09		__	1 2	1 2 3	__	__	__	09	09	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
10		__	1 2	1 2 3	__	__	__	10	10	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
11		__	1 2	1 2 3	__	__	__	11	11	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
12		__	1 2	1 2 3	__	__	__	12	12	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
13		__	1 2	1 2 3	__	__	__	13	13	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
14		__	1 2	1 2 3	__	__	__	14	14	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
15		__	1 2	1 2 3	__	__	__	15	15	1 2	1 2 8	1 2	__	1 2 3 4 8	1 2 8	1 2	__	1 2 3 4 8	__
* Codes for HL3: Relationship to head of household:		01 HEAD 02 SPOUSE 03 SON / DAUGHTER 04 SON-IN-LAW / DAUGHTER-IN-LAW			05 GRANDCHILD 06 PARENT 07 PARENT-IN-LAW 08 BROTHER / SISTER			09 BROTHER-IN-LAW / SISTER-IN-LAW 10 UNCLE/AUNT 11 NIECE / NEPHEW 12 OTHER RELATIVE			13 ADOPTED / FOSTER / STEPCHILD 14 SERVANT (LIVE-IN) 96 OTHER (NOT RELATED) 98 DK								

EDUCATION 1																					
ED1. Line number	ED2. Name and age. Copy names and ages of <u>all</u> members of the household from HL2 and HL6 to below <u>and</u> to next page of the module.		ED3. Age 3 or above? 1 YES 2 NO ☹ Next Line		ED4. Has (<i>name</i>) ever attended school or any Kindergarten programme? 1 YES 2 NO ☹ Next Line		ED5. What is the highest level and grade or year of school (<i>name</i>) has ever <u>attended</u> ? LEVEL: 0 KINDERGARTEN ☹ 1 BASIC 2 SECONDARY 3 HIGHER 8 DK ED7					GRADE/YEAR: 98 DK ☹ ED7			ED6. Did (<i>name</i>) ever <u>complete</u> that (grade/year)? 1 YES 2 NO 8 DK			ED7. Age 3-24? 1 YES 2 NO ☹ Next Line		ED8. Check ED4: Ever attended school or kindergarten? 1 YES 2 NO ☹ Next Line	
LINE	NAME	AGE	YES	NO	YES	NO	LEVEL					GRADE/YEAR			Y	N	DK	YES	NO	YES	NO
01		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
02		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
03		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
04		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
05		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
06		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
07		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
08		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
09		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
10		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
11		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
12		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
13		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
14		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	
15		___	1	2	1	2	0	1	2	3	8	___	___	1	2	8	1	2	1	2	

ED1. Line number	ED2. Name and age.		ED9. At any time during the 2019/2020 school year did (<i>name</i>) attend school or any Kindergarten programme?	ED10. During this 2019/2020 school year, which level and grade or year is (<i>name</i>) attending?		ED11. Is (he/she) attending a public school? <i>If "Yes", record '1'. If "No", probe to code who controls and manages the school.</i>	ED12. In the 2019/2020 school year, has (<i>name</i>) received any school tuition support? <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i>	ED13. Who provided the tuition support? <i>Record all mentioned.</i>	ED14. For the 2019/2020 school year, has (<i>name</i>) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i>	ED15. At any time during the 2018/2019 school year did (<i>name</i>) attend school or any Kindergarten programme?	ED16. During 2018/2019 school year, which level and grade or year did (<i>name</i>) attend?	
			1 YES 2 NO <i>ED15</i>	LEVEL: 0 KINDER-GARTEN <i>ED15</i> 1 BASIC. 2 SECONDARY. 3 HIGHER. 8 DK	GRADE/YEAR: 98 DK	1 GOVERNMENT 2 UNRWA 3 PRIVATE 6 OTHER 8 DK	1 YES 2 NO <i>ED14</i> 8 DK <i>ED14</i>	A GOVERNMENT B UNRWA C PRIVATE X OTHER Z DK	1 YES 2 NO 8 DK	1 YES 2 NO <i>Next Line</i> 8 DK <i>Next Line</i>	LEVEL: 0 KINDER-GARTEN <i>Next Line</i> 1 BASIC. 2 SECONDARY. 3 HIGHER. 8 DK	GRADE/YEAR: 98 DK
LINE	NAME	AGE	YES NO	LEVEL	GRADE/YEAR	AUTHORITY	YES NO DK	TUITION	YES NO DK	YES NO DK	LEVEL	GRADE/YEAR
01		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
02		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
03		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
04		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
05		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
06		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
07		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
08		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
09		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
10		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
11		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
12		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
13		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
14		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___
15		___	1 2	0 1 2 3 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 8	___

HOUSEHOLD CHARACTERISTICS		HC
HC0. -What kind of dwelling unit does the household live in? <i>Record observation.</i>	VILLA 11 HOUSE 12 APARTMENT 13 SEPARATE ROOM 14 TENT 15 MARGINAL “BARRAKEYAH” 16 OTHER (<i>specify</i>) 96	
HC3. How many rooms do members of this household usually use for sleeping?	NUMBER OF ROOMS__ __	
HC4. Main material of the dwelling floor. <i>Record observation.</i> <i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i>	NATURAL FLOOR EARTH / SAND 11 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL OR ASPHALT STRIPS 32 CERAMIC TILES 33 CEMENT 34 CARPET 35 TILES (BALADY) 36 OTHER (<i>specify</i>) 96	
HC5. Main material of the roof. <i>Record observation.</i>	NO ROOF 11 NATURAL ROOFING THATCH / PALM LEAF 12 FINISHED ROOFING METAL / TIN 31 WOOD 32 CALAMINE / CEMENT FIBRE 33 CEMENT 35 OTHER (<i>specify</i>) 96	
HC6. Main material of the exterior walls. <i>Record observation.</i>	NO WALLS 11 NATURAL WALLS DIRT 13 RUDIMENTARY WALLS STONE WITH MUD 22 FINISHED WALLS CEMENT 31 STONE WITH LIME / CEMENT 32 BRICKS 33 COVERED ADOBE 35 OTHER (<i>specify</i>) 96	

HC7. Does your household have:	<div style="text-align: right;">YES NO</div> [A] A fixed telephone line?.....1 2 [B] A radio?.....1 2 [C] Dining Room Sets?.....1 2 [D] Kitchen Cabinets?.....1 2 [E] Solar heater?.....1 2	
HC8. Does your household have electricity?	YES, INTERCONNECTED GRID1 YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM)2 NO3	3 ⇒ HC10
HC9. Does your household have:	<div style="text-align: right;">YES NO</div> [A] A television?.....1 2 [B] A refrigerator?.....1 2 [C] LCD /LED /3D TV?.....1 2 [D] Central heating?.....1 2 [E] Clothes dryer?.....1 2 [F] Freezer?.....1 2 [G] Dish washer?.....1 2 [H] Air condition?.....1 2 [I] Satellite dish?.....1 2 [J] Vacuum cleaner?.....1 2 [K] Clothes washer?.....1 2	
HC10. Does any member of your household own:	<div style="text-align: right;">YES NO</div> [C] A motorcycle?.....1 2 [E] A car, truck or van?.....1 2 [F] A boat with a motor?.....1 2 [G] Play station/ xbox?.....1 2 [H] Auto rickshaw (Tok Tok)?.....1 2 [I] An electric bicycle?.....1 2	

HC11. Does any member of your household have a computer, laptop or a tablet?	YES.....1 NO2	
HC12. Does any member of your household have a mobile phone?	YES.....1 NO2	
HC13. Does your household have access to internet at home?	YES.....1 NO2	
HC14. Do you or someone living in this household own this dwelling? <i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i> <i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i>	OWN.....1 RENT.....2 OTHER (<i>specify</i>)6	
HC15. Does any member of this household own any land that can be used for agriculture?	YES.....1 NO2	2 ⇒ HC17
HC16. How many donum of agricultural land do members of this household own? <i>If less than 1, record '00'.</i>	DONUM 95 OR MORE95 DK98	
HC17. Does this household own any livestock, herds, other farm animals, or poultry?	YES.....1 NO2	2 ⇒ HC19
HC18. How many of the following animals does this household have? [A] Milk cows or bulls? [B] Other cattle? [C] Horses, donkeys or mules? [D] Goats? [E] Sheep? [F] Chickens? [H] Camels? <i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i>	MILK COWS OR BULLS..... OTHER CATTLE..... HORSES, DONKEYS OR MULES GOATS SHEEP CHICKENS CAMELS	
HC19. Does any member of this household have a bank account?	YES.....1 NO2	

SOCIAL TRANSFERS
ST

ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

	[A] CASH ASSISTANCE PROGRAM	[B] ECONOMIC EMPOWERMENT PROGRAM	[C] ORPHAN SPONSORSHIP PROGRAM	[D] ANY RETIREMENT PENSION	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
ST2. Are you aware of (<i>name of programme</i>)?	YES..... 1 ☺ ST3 NO.....2 ☺ [B]	YES 1 ☺ ST3 NO 2 ☺ [C]	YES 1 ☺ ST3 NO 2 ☺ [D]	YES.....1 ☺ ST3 NO.....2 ☺ [X]	YES (<i>specify</i>)..... 1 ☺ ST3 NO 2 ☺ End
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES.....1 ☺ ST4 NO.....2 ☺ [B] DK.....8 ☺ [B]	YES 1 ☺ ST4 NO 2 ☺ [C] DK 8 ☺ [C]	YES 1 ☺ ST4 NO 2 ☺ [D] DK 8 ☺ [D]	YES.....1 ☺ ST4 NO.....2 ☺ [X] DK.....8 ☺ [X]	YES 1 ☺ ST4 NO 2 ☺ End DK 8 ☺ End
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)? <i>If less than one month, record '1' and record '00' in Months.</i> <i>If less than 12 months, record '1' and record in Months.</i> <i>If 1 year/12 months or more, record '2' and record in Years.</i>	MONTHS AGO... 1 ____ ☺ [B] YEARS AGO..... 2 ____ ☺ [B] DK.....998 ☺ [B]	MONTHS AGO... 1 ____ ☺ [C] YEARS AGO 2 ____ ☺ [C] DK 998 ☺ [C]	MONTHS AGO ...1 ____ ☺ [D] YEARS AGO2 ____ ☺ [D] DK998 ☺ [D]	MONTHS AGO... 1 ____ ☺ [X] YEARS AGO..... 2 ____ ☺ [X] DK.....998 ☺ [X]	MONTHS AGO... 1 ____ ☺ End YEARS AGO 2 ____ ☺ End DK 998 ☺ End

HOUSEHOLD ENERGY USE		EU
EU1. In your household, what type of cook stove is <u>mainly</u> used for <u>cooking</u> ? <i>If more than one, record the main energy source for this cook stove.</i>	ELECTRIC STOVE..... 01	01 ⇒ EU5
	LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE..... 03	03 ⇒ EU5
	LIQUID FUEL STOVE 06	
	THREE STONE STOVE / OPEN FIRE 09	
	OTHER (<i>specify</i>)..... 96	
EU4. What type of fuel or energy source is used in this cook stove? <i>If more than one, record the main energy source for this cook stove.</i>	NO FOOD COOKED IN HOUSEHOLD 97	97 ⇒ EU6
	GASOLINE / DIESEL 02	
	KEROSENE..... 03	
	CHARCOAL..... 05	
	WOOD 06	
EU5. Is the cooking usually done in the house, in a separate building, or outdoors? <i>If in main house, probe to determine if cooking is done in a separate room.</i> <i>If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.</i>	CROP RESIDUE / GRASS / STRAW / SHRUBS 07	
	SAWDUST 11	
	OTHER (<i>specify</i>)..... 96	
	IN MAIN HOUSE NO SEPARATE ROOM..... 1 IN A SEPARATE ROOM..... 2	
	IN A SEPARATE BUILDING 3	
EU6. What does your household <u>mainly</u> use for <u>space heating</u> when needed?	OUTDOORS OPEN AIR 4 ON VERANDA OR COVERED PORCH 5	
	OTHER (<i>specify</i>)..... 6	
	CENTRAL HEATING..... 01	01 ⇒ EU8
	MANUFACTURED SPACE HEATER 02	
	THREE STONE STOVE / OPEN FIRE 06	06 ⇒ EU8
EU7. Does it have a chimney?	OTHER (<i>specify</i>)..... 96	96 ⇒ EU8
	NO SPACE HEATING IN HOUSEHOLD 97	97 ⇒ EU9
	YES 1	
	NO 2	
	DK..... 8	

<p>EU8. What type of fuel and energy source is used in this heater?</p> <p><i>If more than one, record the main energy source for this heater.</i></p>	<p>ELECTRICITY 02</p> <p>GAS..... 04</p> <p>GASOLINE / DIESEL 07</p> <p>KEROSENE..... 08</p> <p>CHARCOAL..... 10</p> <p>WOOD 11</p> <p>CROP RESIDUE / GRASS / STRAW / SHRUBS 12</p> <p>SAWDUST 16</p> <p>OTHER (<i>specify</i>)..... 96</p> <p>DK..... 98</p>	
<p>EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p>	<p>ELECTRICITY 01</p> <p>SOLAR LANTERN 02</p> <p>RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN 03</p> <p>BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN 04</p> <p>KEROSENE LAMP..... 07</p> <p>CANDLE 13</p> <p>OTHER (<i>specify</i>)..... 96</p> <p>NO LIGHTING IN HOUSEHOLD 97</p>	

WATER AND SANITATION		WS
<p>WS1. What is the <u>main</u> source of drinking water used by members of your household?</p> <p><i>If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).</i></p>	<p>PIPED WATER</p> <p>PIPED INTO DWELLING 11</p> <p>PIPED TO YARD / PLOT 12</p> <p>PIPED TO NEIGHBOUR 13</p> <p>PUBLIC TAP / STANDPIPE..... 14</p> <p>TUBE WELL / BOREHOLE 21</p> <p>DUG WELL</p> <p>PROTECTED WELL 31</p> <p>UNPROTECTED WELL 32</p> <p>SPRING</p> <p>PROTECTED SPRING 41</p> <p>UNPROTECTED SPRING 42</p> <p>RAINWATER..... 51</p> <p>TANKER-TRUCK..... 61</p> <p>CART WITH SMALL TANK 71</p> <p>WATER KIOSK..... 72</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)..... 81</p> <p>PACKAGED WATER</p> <p>BOTTLED WATER..... 91</p> <p>20 LITER WATER BOTTLES 93</p> <p>OTHER (<i>specify</i>) 96</p>	<p>11 ⇨WS7</p> <p>12 ⇨WS7</p> <p>13 ⇨WS3</p> <p>14 ⇨WS3</p> <p>21 ⇨WS3</p> <p>31 ⇨WS3</p> <p>32 ⇨WS3</p> <p>41 ⇨WS3</p> <p>42 ⇨WS3</p> <p>51 ⇨WS3</p> <p>61 ⇨WS4</p> <p>71 ⇨WS4</p> <p>72 ⇨WS4</p> <p>81 ⇨WS3</p> <p>96 ⇨WS3</p>
	<p>PIPED WATER</p> <p>PIPED INTO DWELLING 11</p> <p>PIPED TO YARD / PLOT 12</p> <p>PIPED TO NEIGHBOUR 13</p> <p>PUBLIC TAP / STANDPIPE..... 14</p> <p>TUBE WELL / BOREHOLE 21</p> <p>DUG WELL</p> <p>PROTECTED WELL 31</p> <p>UNPROTECTED WELL 32</p> <p>SPRING</p> <p>PROTECTED SPRING 41</p> <p>UNPROTECTED SPRING 42</p> <p>RAINWATER..... 51</p> <p>TANKER-TRUCK..... 61</p> <p>CART WITH SMALL TANK 71</p> <p>WATER KIOSK..... 72</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)..... 81</p> <p>OTHER (<i>specify</i>) 96</p>	<p>11 ⇨WS7</p> <p>12 ⇨WS7</p> <p>13 ⇨WS3</p> <p>14 ⇨WS3</p> <p>21 ⇨WS3</p> <p>31 ⇨WS3</p> <p>32 ⇨WS3</p> <p>41 ⇨WS3</p> <p>42 ⇨WS3</p> <p>51 ⇨WS3</p> <p>61 ⇨WS4</p> <p>71 ⇨WS4</p> <p>72 ⇨WS4</p> <p>81 ⇨WS3</p> <p>96 ⇨WS3</p>

WS3. Where is that water source located?	IN OWN DWELLING 1 IN OWN YARD / PLOT 2 ELSEWHERE 3	1 ⇨ WS7 2 ⇨ WS7
WS4. How long does it take for members of your household to go there, get water, and come back?	MEMBERS DO NOT COLLECT 000 NUMBER OF MINUTES _ _ _ DK 998	000 ⇨ WS7
WS5. Who usually goes to this source to collect the water for your household? <i>Record the name of the person and copy the line number of this person from the LIST OF HOUSEHOLD MEMBERS Module.</i>	NAME LINE NUMBER _ _	
WS6. Since last (<i>day of the week</i>), how many times has this person collected water?	NUMBER OF TIMES _ _ DK 98	
WS7. In the last month, has there been any time when your household did not have sufficient quantities of drinking water?	YES, AT LEAST ONCE 1 NO, ALWAYS SUFFICIENT 2 DK 8	2 ⇨ WS9 8 ⇨ WS9
WS8. What was the main reason that you were unable to access water in sufficient quantities when needed?	WATER NOT AVAILABLE FROM SOURCE ... 1 WATER TOO EXPENSIVE 2 SOURCE NOT ACCESSIBLE 3 OTHER (<i>specify</i>) 6 DK 8	
WS9. Do you or any other member of this household do anything to the water to make it safer to drink?	YES 1 NO 2 DK 8	2 ⇨ WS11 8 ⇨ WS11
WS10. What do you usually do to make the water safer to drink? <i>Probe:</i> Anything else? <i>Record all methods mentioned.</i>	BOIL A ADD BLEACH / CHLORINE B STRAIN IT THROUGH A CLOTH C USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.) D LET IT STAND AND SETTLE F OTHER (<i>specify</i>) X DK Z	
WS11. What kind of toilet facility do members of your household usually use? <i>If 'Flush' or 'Pour flush', probe:</i> Where does it flush to? <i>If not possible to determine, ask permission to observe the facility.</i>	FLUSH / POUR FLUSH FLUSH TO PIPED SEWER PUPPIC SYSTEM 11 FLUSH TO SEPTIC TANK 12 FLUSH TO PIT LATRINE 13 FLUSH TO OPEN DRAIN 14 FLUSH TO DK WHERE 18 NO FACILITY / BUSH / FIELD 95 OTHER (<i>specify</i>) 96	11 ⇨ WS14 14 ⇨ WS14 18 ⇨ WS14 95 ⇨ End 96 ⇨ WS14

WS12. Has your (<i>answer from WS11</i>) ever been emptied?	YES, EMPTIED 1 NO, NEVER EMPTIED..... 4 DK 8	4 ⇒ WS14 8 ⇒ WS14
WS13. The last time it was emptied, where were the contents emptied to? <i>Probe:</i> Was it removed by a service provider?	REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT 1 BURIED IN A COVERED PIT 2 TO DON'T KNOW WHERE..... 3 EMPTIED BY HOUSEHOLD BURIED IN A COVERED PIT 4 TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE 5 OTHER (<i>specify</i>) 6 DK 8	
WS14. Where is this toilet facility located?	IN OWN DWELLING 1 IN OWN YARD / PLOT 2 ELSEWHERE 3	
WS15. Do you share this facility with others who are not members of your household?	YES 1 NO 2	2 ⇒ End
WS16. Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?	SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC) 1 SHARED WITH GENERAL PUBLIC 2	2 ⇒ End
WS17. How many households in total use this toilet facility, including your own household?	NUMBER OF HOUSEHOLDS (IF LESS THAN 10)..... <u>0</u> ____ TEN OR MORE HOUSEHOLDS 10 DK 98	

HANDWASHING		HW
HW1. We would like to learn about where members of this household wash their hands. Can you please show me where members of your household <u>most often</u> wash their hands? <i>Record result and observation.</i>	OBSERVED FIXED FACILITY OBSERVED (SINK / TAP) IN DWELLING 1 IN YARD / PLOT 2 MOBILE OBJECT OBSERVED (BUCKET / JUG / KETTLE) 3 NOT OBSERVED NO HANDWASHING PLACE IN DWELLING / YARD / PLOT 4 NO PERMISSION TO SEE..... 5 OTHER REASON (<i>specify</i>) 6	4 ⇨ HW5 5 ⇨ HW4 6 ⇨ HW5
HW2. Observe presence of water at the place for handwashing. <i>Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.</i>	WATER IS AVAILABLE 1 WATER IS NOT AVAILABLE..... 2	
HW3. Is soap or detergent or ash/mud/sand present at the place for handwashing?	YES, PRESENT..... 1 NO, NOT PRESENT 2	1 ⇨ HW7 2 ⇨ HW5
HW4. Where do you or other members of your household <u>most often</u> wash your hands?	FIXED FACILITY (SINK / TAP) IN DWELLING 1 IN YARD / PLOT 2 MOBILE OBJECT (BUCKET / JUG / KETTLE) 3 NO HANDWASHING PLACE IN DWELLING / YARD / PLOT 4 OTHER (<i>specify</i>) 6	
HW5. Do you have any soap or detergent or ash/mud/sand in your house for washing hands?	YES 1 NO..... 2	2 ⇨ End
HW6. Can you please show it to me?	YES, SHOWN 1 NO, NOT SHOWN..... 2	2 ⇨ End
HW7. Record your observation. <i>Record all that apply.</i>	BAR OR LIQUID SOAPA DETERGENT (POWDER / LIQUID / PASTE).....B ASH / MUD / SANDC	

SALT IODISATION		SA
<p>SA1. We would like to check whether the salt used in your household is iodised. May I have a sample of the salt used <u>to cook meals</u> in your household?</p> <p><i>Apply 2 drops of test solution, observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p>	<p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3</p> <p>SALT NOT TESTED NO SALT IN THE HOUSE..... 4 OTHER REASON (specify) 6</p>	<p>2⇒HH13 3⇒HH13 4⇒HH13 6⇒HH13</p>
<p>SA2. I would like to perform one more test. May I have another sample of the same salt?</p> <p><i>Apply 5 drops of recheck solution. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p>	<p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3</p> <p>SALT NOT TESTED OTHER REASON (specify) 6</p>	

HH13. Record the time.	HOUR AND MINUTES..... __ __ : __ __	
HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:	NO CHILDREN..... 0	0⇒HH29
	1 CHILD 1	1⇒HH27
	2 OR MORE CHILDREN (NUMBER)..... __	

HH19. List each of the children age 5-17 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 5-17 years. Record the line number, name, sex, and age for each child.

HH20. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HH23. Sex from HL4		HH24. Age from HL6
RANK	LINE	NAME	M	F	AGE
1	__ __		1	2	__ __
2	__ __		1	2	__ __
3	__ __		1	2	__ __
4	__ __		1	2	__ __
5	__ __		1	2	__ __
6	__ __		1	2	__ __
7	__ __		1	2	__ __
8	__ __		1	2	__ __

○

HH25. Check the last digit of the household number (HH2) from the *HOUSEHOLD INFORMATION PANEL*. This is the number of the row you should go to in the table below.

Check the total number of children age 5-17 years in HH18 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH20) of the selected child.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
	2	3	4	5	6	7	8+
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

HH26. Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.

RANK NUMBER _

LINE NUMBER _ _

HH27. (When HH18=1 or when there is a single child age 5-17 in the household):
Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this child from the *LIST OF HOUSEHOLD MEMBERS*.

NAME

AGE _ _

HH28. Issue a *QUESTIONNAIRE FOR CHILDREN AGE 5-17* to be administered to the mother/caretaker of this child.

HH29. Check HL8 in the <i>LIST OF HOUSEHOLD MEMBERS</i> : Are there any women age 15-49?	YES, AT LEAST ONE WOMAN AGE 15-49 1 NO 2	2 ⇒ HH40
HH30. Issue a separate <i>QUESTIONNAIRE FOR INDIVIDUAL WOMEN</i> for each woman age 15-49 years.		
HH31. Check HL6 and HL8 in the <i>LIST OF HOUSEHOLD MEMBERS</i> : Are there any girls age 15-17?	YES, AT LEAST ONE GIRL AGE 15-17 1 NO 2	2 ⇒ HH40
HH32. Check HL20 in the <i>LIST OF HOUSEHOLD MEMBERS</i> : Is consent required for interviewing at least one girl age 15-17?	YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠90 1 NO, HL20=90 FOR ALL GIRLS AGE 15-17 2	2 ⇒ HH40

HH33. As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.

For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (*name(s) of female member(s) age 15-17*) later?

- ☐ 'Yes' for all girls age 15-17 ⇒ Continue HH40.
- ☐ 'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.
- ☐ 'No' for all girls age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.

HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE 1 NO 2	2 ⇒ HH42
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HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.

HH42. Check HH9 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for Water Quality Testing Questionnaire?	YES, HH9=1 1 NO, HH9=2 2	2 ⇒ HH45
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HH43. Issue a separate WATER QUALITY TESTING QUESTIONNAIRE for this household

<p>HH44. As part of the survey we are also looking at the quality of drinking water. We would like to do a simple test of your drinking water. A colleague will come and collect the water samples. May we do such a test?</p> <p><i>If the respondent requests to learn the results, explain that results will not be shared with individual households but will be made available to local authorities.</i></p>	<p>YES, PERMISSION IS GIVEN 1 NO, PERMISSION IS NOT GIVEN 2</p>	<p>2 ⇒ Record '02' in WQ31 on the WATER QUALITY TESTING QUESTIONNAIRE</p>
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HH45. Now return to the HOUSEHOLD INFORMATION PANEL and,

- Record '01' in question HH46 (Result of the Household Questionnaire interview),
- Record the name and the line number (from the LIST OF HOUSEHOLD MEMBERS) of the Respondent to the Household Questionnaire interview in HH47,
- Fill the questions HH48 – HH52,
- Thank the respondent for his/her cooperation and then
- Proceed with the administration of the remaining individual questionnaire(s) in this household.

If there is no individual questionnaire and no WATER QUALITY TESTING QUESTIONNAIRE to be completed in this household thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS	