# c:w Household Survey v4.0 - November 2020

## Informed Consent and Metadata

Welcome to charity: water Household survey.

Ask to speak to the female head of household. If head of household is not available, ask to speak to an adult (18 years or older) household member who can assist. Read the following:

"Good day, I am [INSERT NAME]. I am representing [INSERT PARTNER ORGANIZATION]. I am part of a team interviewing people about water, sanitation, and handwashing in [INSERT NAME OF DISTRICT OR AREA]. This will help us learn about practices and improve water, sanitation, and health in the future.

You have been randomly selected to participate in this survey. If you agree, I will ask you questions about your family, and about your drinking water, handwashing, and sanitation practices. I may take photos of your latrine if you have one. These questions usually take about 10 minutes.

You have the choice to participate in this survey. If you do not want to participate, that is okay. You can stop at any time, or skip any questions you do not want to answer. The information you give will be confidential. That means no one except me will know it was you who gave these answers.

## 1. Are you interested in participating in this survey today?

- ⊖ Yes
- $\bigcirc$  No Thank the respondent and move to another household.

## 2. Today's date and time

## 3. Select Baseline, Endline, or Post-Implementation Monitoring

- ⊖ Baseline
- ⊖ Endline
- Post-Implementation Monitoring

## 4. Enumerator name

If 3. Select Baseline, Endline, or Post-Implementation Monitoring is one of Baseline, Endline:

## 5a. Community Name

*If 3. Select Baseline, Endline, or Post-Implementation Monitoring is Post-Implementation Monitoring:* **5b. Community ID** 

6. [Direct Observation] Is the respondent male or female?

 $\bigcirc$  Male

⊖ Female

If 1. Are you interested in participating in this survey today? is Yes :

## Household Characteristics

7. How many people live in your household? (Household means number of people living together and eating together, including you)

If 1. Are you interested in participating in this survey today? is Yes :

## Household Water Collection

## 8. Did anyone in your household collect drinking water yesterday?

 $\bigcirc$  Yes

- $\bigcirc$  No
- $\bigcirc$  Decline to state

If 8. Did anyone in your household collect drinking water yesterday? is Yes:

8.1. Which containers did household members fill and bring home yesterday? [Mark all that apply]

- □ 25 liter
- □ 20 liter
- □ 15 liter
- □ 10 liter
- □ 5 liter
- □ Other (please specify)

*If 8.1. Which containers did household members fill and bring home yesterday?* [Mark all that apply] *includes 25 liter:* 

# 8.1a. Yesterday, how many total containers of this [25 liter] size did household members fill and bring home?

*If 8.1. Which containers did household members fill and bring home yesterday?* [Mark all that apply] includes 20 *liter:* 

8.1b. Yesterday, how many total containers of this [20 liter] size did household members fill and bring home?

*If 8.1. Which containers did household members fill and bring home yesterday?* [Mark all that apply] includes 15 *liter:* 

8.1c. Yesterday, how many total containers of this [15 liter] size did household members fill and bring home?

*If 8.1. Which containers did household members fill and bring home yesterday?* [Mark all that apply] includes 10 *liter:* 

8.1d. Yesterday, how many total containers of this [10 liter] size did household members fill and bring home?

If 8.1. Which containers did household members fill and bring home yesterday? [Mark all that apply] includes 5 liter:

8.1e. Yesterday, how many total containers of this 5 liter size did household members fill and bring home?

If 8.1. Which containers did household members fill and bring home yesterday? [Mark all that apply] includes Other (please specify):

8.1f. Yesterday, how many total containers of this other size did household members fill and bring home?

If 1. Are you interested in participating in this survey today? is Yes :

## Water Sources

9. I am now going to ask you several questions about your household's primary drinking water source. Which source you consider to be your primary drinking water source?

- $\bigcirc$  Piped water into dwelling
- $\bigcirc$  Piped water into yard or plot
- $\bigcirc$  Public tap or standpipe
- Mechanized borehole
- Borehole with handpump
- Protected dug well with handpump
- Protected dug well
- Unprotected dug well
- Protected spring
- Unprotected spring
- Rainwater collection
- $\bigcirc$  Pay another person to collect
- Bottled water, sachet water
- $\bigcirc$  Cart with small tank or drum
- ◯ Tanker truck
- Surface water (river, dam, lake, pond, stream, canal, irrigation channels)
- $\bigcirc$  Decline to state

□ Don't Know

If 3. Select Baseline, Endline, or Post-Implementation Monitoring is one of Endline, Post-Implementation Monitoring:

# **10.** Is your primary water source [the charity: water funded water point]? *Hint:*

 $\bigcirc$  Yes

- $\bigcirc$  No
- $\bigcirc$  Decline to state
- □ Don't Know

### mWater Portal

If 10. Is your primary water source [the charity: water funded water point]? is any of No:

## 10.1. Why does your household not use this water source?

□ It is too far away

- $\Box$  I don't want to pay
- $\Box$  I don't like the taste of the water
- □ Long lines
- $\Box$  It is broken
- □ Other (please specify)

□ Decline to state

Don't Know

If 1. Are you interested in participating in this survey today? is Yes :

## Water Accessability

11. How long do you have to walk to get to the water source? Please estimate the time that is required to walk to the water source, not the time that is required for a round trip. (In minutes)

12. The last time you went, how long did you have to wait to collect water from the water source? (in minutes)

If 1. Are you interested in participating in this survey today? is Yes :

## Water Point Reliability

13. Are there months during the year when water is not regularly available from this water source because it is dry?

 $\bigcirc$  Yes

- $\bigcirc$  No
- Decline to state
- 🗆 Don't Know
- □ Not Applicable

### mWater Portal

If 9. I am now going to ask you several questions about your household's primary drinking water source. Which source you consider to be your primary drinking water source? is any of Piped water into dwelling, Piped water into yard or plot, Public tap or standpipe, Mechanized borehole, Borehole with handpump, Protected dug well with handpump, Protected dug well, Protected spring:

14. In the past 12 months, were there times that management decided to lock or turn off the water source?

 $\bigcirc$  Yes

 $\bigcirc$  No

○ Decline to state

🗆 Don't Know

□ Not Applicable

If 14. In the past 12 months, were there times that management decided to lock or turn off the water source? is Yes:

14.1. When this happened, was it communicated so your household knew when water would be available?

 $\bigcirc$  Yes

 $\bigcirc$  No

 $\bigcirc$  Decline to state

🗆 Don't Know

If 1. Are you interested in participating in this survey today? is Yes :

## Water Service Satisfaction

15. How satisfied are you with your water service?

- Not Satisfied
- $\bigcirc$  Neutral
- ⊖ Satistfied
- Decline to State

If 15. How satisfied are you with your water service? is Not Satisfied:

## 15.1. Why are you not satisfied with your water service?

- $\bigcirc$  Long lines
- $\bigcirc$  It is too expensive
- $\bigcirc$  Water tastes bad
- $\bigcirc$  It is too far away
- $\bigcirc$  It is broken
- $\bigcirc$  Water has a bad smell, color, or quality
- $\bigcirc$  Other (please specify)

If 1. Are you interested in participating in this survey today? is Yes and 3. Select Baseline, Endline, or Post-Implementation Monitoring is one of Baseline, Endline:

## Household Sanitation

16. Some people prefer to defecate in the open, some prefer to defecate in a latrine, and some prefer other places. What are the places that adult men and women in this household defecate? [Probe to ask "is there any other place" until they finish, and mark all that apply]

- □ Latrine/toilet
- □ In the open/no sanitation facilities
- □ In water body river or lake
- $\Box$  Decline to state

## □ Don't Know

17. Where are the places that children over 3 in this household go to defecate [Mark all that apply and probe to ask "is there any other place" until they finish]

- □ Latrine/toilet
- □ Potty
- □ In the open/no sanitation facilities
- □ In water body river or lake
- □ Not applicable, no one between the ages of 3-17 lives in this household
- □ Decline to state

🗆 Don't Know

## 18. How is feces from children under 3 in this household disposed of?

- Child uses latrine
- $\bigcirc$  It is put or rinsed into latrine
- It is put or rinse into garbage bin
- $\bigcirc$  It is put or rinsed on the ground or in the open
- $\bigcirc$  It is buried
- Other (please specify)
- $\bigcirc$  Not applicable, no one under 3 lives in this household
- Decline to state

□ Don't Know

## 19. Can I see the toilet facility that you use?

- Yes, shows facility
- Has a facility, but does not show
- $\bigcirc$  Does not have facility

If 19. Can I see the toilet facility that you use? is Yes, shows facility:

## 19.1. [Direct Observation] What type of sanitation facility is it?

- Flush/pour flush
- Ventilated improved pit latrine (VIP)
- Pit latrine
- Composting toilet
- ⊖ Bucket
- Hanging toilet/hanging latrine

## 🗆 Don't Know

If 19.1. [Direct Observation] What type of sanitation facility is it? is Flush/pour flush :

## 19.2. Where does it flush to?

- Piped Sewer System
- Septic Tank
- Pit Latrine
- $\bigcirc$  To the ground or water body
- $\bigcirc$  Decline to state
- □ Don't Know

If 19.1. [Direct Observation] What type of sanitation facility is it? is one of Flush/pour flush :

## 19.3. [Direct Observation] Is there enough water present to flush the toilet?

- $\bigcirc$  Yes
- $\bigcirc$  No
- □ Don't Know

If 19. Can I see the toilet facility that you use? is Yes, shows facility:

## 19.4. [Direct Observation] What is the condition of the floor?

- Good condition (no cracks or gaps)
- O Medium (some damage, but safe to stand on)
- Bad (dangerous to stand on)

□ Don't Know

## Not Applicable

If 19. Can I see the toilet facility that you use? is Yes, shows facility:

19.5. [Direct observation] How well does this latrine superstructure (walls, door) provide privacy?

- Offers full privacy (has walls and a door )
- Offers some privacy (has walls but no door)
- Offers little to no privacy (very poor quality)
- $\bigcirc$  No superstructure at all

### mWater Portal

If 19.1. [Direct Observation] What type of sanitation facility is it? is one of Ventilated improved pit latrine (VIP), Pit latrine, Composting toilet :

## 19.6. [Direct Observation] Is the pit full? (within 0.5 meters of the top)

⊖ Yes

 $\bigcirc$  No

□ Don't Know

□ Not Applicable

If 19. Can I see the toilet facility that you use? is Yes, shows facility:

19.7. [Direct Observation] Is the user able to access the latrine right now (it is not locked, or they can open it)?

○ Yes○ No

Don't Know

If 19. Can I see the toilet facility that you use? is Yes, shows facility:

19.8. [Photo] Take a photo of the inside of the sanitation facility.

If 19. Can I see the toilet facility that you use? is Yes, shows facility:

19.9. [Photo] Take a photo of the outside of the sanitation facility.

If 1. Are you interested in participating in this survey today? is Yes and 3. Select Baseline, Endline, or Post-Implementation Monitoring is one of Baseline, Endline:

## Hygiene

20. When do you personally wash your hands? [Do not read options to respondent. Probe to ask "Are there any other times that you wash your hands?" until they finish. Mark all that apply]

- □ After defecation
- □ After cleaning or changing a baby
- □ Before food preparation
- □ Before eating
- □ Before feeding child
- □ Before praying
- □ After working in the dirt
- $\Box$  Other (please specify)

## □ Decline to state

□ Don't Know

## 21. Can you please show me where and how you usually wash your hands?

- ⊖ Yes
- $\bigcirc$  No

If 21. Can you please show me where and how you usually wash your hands? is Yes:

21.1. [Direct observation] Does the respondent use soap, ash, or another cleanser?

- ⊖ Soap
- $\bigcirc \mathsf{Ash}$
- Other cleanser or detergent
- $\bigcirc$  None shown

If 21. Can you please show me where and how you usually wash your hands? is Yes:

21.2. [Direct Observation] Does respondent use water to wash their hands?

- ⊖ Yes
- $\bigcirc$  No

If 1. Are you interested in participating in this survey today? is Yes :

## Conclusion of survey

## 22. Scan the GPS coordinates

*Hint: Make sure the accuracy is less than 10 meters. If you cannot automatically register GPS within 3 attempts, choose Not Applicable.* 

□ Not Applicable

## 23. Thank the Respondent for their time [Record any observations here]