

Household Questionnaire					
NO	QUESTIONS AND FILTERS	CODING CATEGORIES			SKIP
IDENTIFICATION					
Please record the following identifying information prior to beginning the interview.					
A	Your name: Is this your name? [ODK will display the name associated with the phone's serial number.] <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>	Yes 1 No 0			
	Enter your name below. <i>Please record your name</i>	Interviewer's Name			
B	Current date and time. [ODK will display on screen] Is this date and time correct?	Yes 1 No 0			Skip to D if Yes
C	Record the correct date and time	Date	Month	Day	Year
		Time	Hour	Minutes	AM/PM
D1	Province	Kinshasa 1 Kongo Central 2			
D2	City (Kinshasa) / District (Kongo Central)	ODK will populate the city of Kinshasa and districts in Kongo Central based on the province selected.			
D3	Commune (Kinshasa) / Aire de santé (Kongo Central)	ODK will populate a list of appropriate communes in Kinshasa and <i>aire de santé</i> in Kongo Central based on the city or district selected.			If Kinshasa was selected in D1, skip to D6
D4	Quartier (Kinshasa) / Village (Kongo Central)	ODK will populate a list of appropriate quarters in Kinshasa and villages in Kongo Central and chiefdoms based on the commune or <i>aire de santé</i> selected.			
D5	Enumeration area	ODK will populate a list of appropriate enumeration areas based on the neighborhood in Kinshasa or the village in Kongo Central selected.			If Kongo Central selected in D1, skip to E
D6	Please note the street or avenue number where the household is located	<i>THE SUPERVISOR WILL GIVE YOU THE STREET OR AVENUE NAME.</i>			
E	Structure number <i>Please record the structure number from the household listing form.</i>	Number <input type="text"/>			

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F	Household number <i>Please record the household number from the household listing form.</i>	Number <input style="width: 100px; height: 20px;" type="text"/>	
	Check: Have you already sent a form for this structure and household? <i>Do not duplicate any form unless you are correcting a mistake in an earlier form.</i>	Yes 1 No 0	Skip to G if No
WARNING: Contact your supervisor before sending this form again.			
	CHECK: Why are you resending this form? <i>Choose al 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 is was not received 4 Other reason(s) 5	
G	Is a member of the household and competent respondent present and available to be interviewed today?	Yes 1 No 0	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	
INFORMED CONSENT			
Find a competent member of the household. Read the greeting on the following screen.			
<p>Hello. My name is _____ and I am working for the School of Public Health of Kinshasa in collaboration with the Ministry of Health. We are conducting a survey in Kinshasa and Kongo Central about various health issues in the Democratic Republic of Congo. 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 years.</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 32 if No
	Respondent's signature <i>Please ask the respondent to sign or check the box in agreement of their participation.</i>	Gather signature: Check box: <input type="checkbox"/>	

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I	<p>Interviewer's name</p> <p><i>Please record your name as a witness to the consent process. You previously entered "[NAME FROM HQ B]."</i></p>	<input data-bbox="778 275 1214 367" type="text"/>	
J	<p>Respondent's first name.</p> <p><i>Please record the first name of the respondent.</i></p>	<input data-bbox="778 427 1214 495" type="text"/>	



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	1	2	3	4	5	6	7	8
	First name	Sex	Age (years) If less than one year old, record 0.	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 Never Married 5 No response -99	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..... 1 Usual member of the household who did NOT sleep in the house last night..... 2 Visitor who slept in the house last night . 3 No response -99	Yes 1 No..... 0 ODK will determine and display eligibility
1								
2								
3								
4								
5								
After recording information for one household member, the following prompt is asked to activate a looping script to record information for another member								
9	Are there any other usual members of your household or persons who slept in the house last night?			Yes 1 No 0				
	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? <i>Remember to include all children in the household.</i>			Yes 1 No 0		Skip to 10 if Yes		

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11b	<p>How many of the following animals does this household own?</p> <p>Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.</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="width: 80%;">Cows or bulls</td> <td style="width: 20%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Horses, donkeys, or mules</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Goats</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Sheep</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Hogs/pigs</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Ducks/canes</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Hens/ cocks/ other poultry</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Other</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table>	Cows or bulls		Horses, donkeys, or mules		Goats		Sheep		Hogs/pigs		Ducks/canes		Hens/ cocks/ other poultry		Other		
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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><i>Homestead includes the structure and yard that is close to the structure.</i></p>	<p>Yes 1</p> <p>No 0</p> <p>No response -99</p>	Skip to 13 if No or NR																
12b	<p>How many of the following animals does this household keep ON THE HOMESTEAD?</p> <p>Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.</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="width: 80%;">Cows or bulls</td> <td style="width: 20%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Horses, donkeys, or mules</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Goats</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Sheep</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Hogs/pigs</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Ducks/canes</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Hens/ cocks/ other poultry</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Other</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table>	Cows or bulls		Horses, donkeys, or mules		Goats		Sheep		Hogs/pigs		Ducks/canes		Hens/ cocks/ other poultry		Other		
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<p>Section 3 – Household Observation</p> <p>Please observe the floors, roof and exterior walls.</p>																			
13	<p>Main material of the floor</p> <p><i>Observe.</i></p>	<p>NATURAL MATERIAL</p> <p>EARTH / SAND 11</p> <p>COW DUNG 12</p> <p>RUDIMENTARY MATERIAL</p> <p>WOODEN BOARDS 21</p> <p>PALM / BAMBOO 22</p> <p>DEVELOPED MATERIAL</p> <p>PARQUET OR POLISHED WOOD .. 31</p> <p>TAPES VINYL / ASPHALT 32</p> <p>TILES 33</p> <p>CEMENT 34</p> <p>CARPET 35</p> <p>OTHER 96</p> <p>NO RESPONSE -99</p>																	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
14	Main material of the roof <i>Observe.</i>	NATURAL MATERIAL NO ROOF 11 THATCH/PALM ROOF 12 EARTH MOTTES..... 13 RUDIMENTARY MATERIAL MATS. 21 PALM / BAMBOO 22 WOODEN BOARDS 23 CARDBOARD 24 DEVELOPED MATERIAL SHEET METAL 31 WOOD..... 32 ZINC / FIBER CEMENT 33 TILE..... 34 CEMENT 35 SHINGLES 36 OTHER 96 NO REPONSE -99	
15	Main material of the exterior walls <i>Observe.</i>	NATURAL MATERIAL NO WALL 11 BAMBOO / CANE / PALM / TRUNK . 12 EARTH..... 13 RUDIMENTARY MATERIAL BAMBOO WITH MUD 21 STONES WITH MUD 22 ADOBE NOT COVERED 23 PLYWOOD..... 24 CARDBOARD 25 RECOVERED WOOD..... 26 DEVELOPED MATERIAL CEMENT 31 STONES WITH LIME / CEMENT ... 321 BRICKS..... 332 CEMENT BLOCKS 343 COVERED ADOBE..... 354 WOOD BOARD / SHINGLES 365 OTHER..... 96 NO RESPONSE..... -99	
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 1 Yes, movable container 2 No..... 0 Don't know -88 Refuse to answer..... -99	Skip to 19 if No Go to 17a if 16 is 1 Skip to 17b if 16 is 2
17a	Can you show it to me?	Yes 1 No..... 0	Skip to 19 if No

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18a	AT THE PLACE WHERE THE HOUSEHOLD WASHES THEIR HANDS, OBSERVE IF:	Soap is present.....	<u>Yes</u> 1	<u>No</u> 0	
		Water source is present: stored water	1	0	
		Water source is present: running water	1	0	
		Hand washing area is near a sanitation facility.....	1	0	
		None of the above.....	-77		
17b	Can you show me any soap, water, and movable container available in the household used for hand washing?	Yes	1		
		No.....	0		
18b	ANYWHERE WITHIN THE HOUSEHOLD, OBSERVE IF:	Soap is present.....	<u>Yes</u> 1	<u>No</u> 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	-77		
19	Which of the following water sources does your household use on a regular basis for any part of the year for any purpose? <i>Read out all types and check all that are used. Scroll to the bottom to see all choices.</i>	Piped Water	<u>Yes</u>	<u>No</u>	
		Piped into dwelling/indoor	1	0	If only one source is selected, skip to HQ22
		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	
		No Response	-99		
20	What is the main source of drinking water for members of your household? Selections from HQ19: [ODK will list water sources selected for HQ19] <i>Read out HQ19 selections only.</i>	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		
		No Response	-99		

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21	<p>What is the main source of water used by your household for other purposes such as cooking and hand washing?</p> <p>Selections from HQ19: [ODK will list water sources selected for HQ19]</p> <p><i>Read out HQ19 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 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>																									
	<p>Questions HQ 22 to HQ 25 will repeat x times, once for each water source selected in HQ 19. These sources include:</p> <p>[ODK will display HQ19 selections.]</p>																										
22	<p>You mentioned that you used [WATER SOURCE]. At any time of the year, does your household use water from this source for:</p>	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Drinking</td> <td>1</td> <td>0</td> </tr> <tr> <td>Cooking</td> <td>1</td> <td>0</td> </tr> <tr> <td>Livestock</td> <td>1</td> <td>0</td> </tr> <tr> <td>Gardening / agriculture</td> <td>1</td> <td>0</td> </tr> <tr> <td>Business venture.....</td> <td>1</td> <td>0</td> </tr> <tr> <td>Washing</td> <td>1</td> <td>0</td> </tr> <tr> <td>No response.....</td> <td>-99</td> <td></td> </tr> </tbody> </table>		Yes	No	Drinking	1	0	Cooking	1	0	Livestock	1	0	Gardening / agriculture	1	0	Business venture.....	1	0	Washing	1	0	No response.....	-99		
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23	<p>Is [WATER SOURCE] typically available:</p> <p><i>Read all choices out loud.</i></p>	<p>All of the year 1 Some of the year 2 Small part of the year 3 No response..... -99</p>																									
24	<p>At a time of year when you expect to have water from [WATER SOURCE], is it usually available?</p>	<p>Yes, always 1 No, intermittent and predictable 2 No, intermittent and unpredictable 3 No response..... -99</p>																									
25	<p>How long does it take to go to [WATER SOURCE], get water, and come back?</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: <input style="width: 100px; height: 20px;" type="text"/></p>																									
26	<p>Does your household have a garden?</p> <p><i>A garden is a place to grow vegetables.</i></p>	<p>Yes 1 No..... 0 No response..... -99</p>																									

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27	<p>Do members of your household use any of the following toilet facilities?</p> <p><i>Read out all types and check all that are used. Scroll to the bottom to see all choices.</i></p>	<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> Unknown / 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</td> <td>1</td> <td>0</td> </tr> <tr> <td>Bucket toilet.....</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>No facility / bush / field</td> <td>1</td> <td>0</td> </tr> <tr> <td>Other:</td> <td>1</td> <td>0</td> </tr> <tr> <td>No Response</td> <td>-99</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	Unknown / Not sure / Don't know.....	1	0	Ventilated improved pit latrine.....	1	0	Pit latrine with slab	1	0	Pit latrine without slab	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		
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28	<p>What is the main toilet facility used by members of your household?</p> <p>HQ27: [ODK will display HQ27 selections]</p> <p><i>The main facility must be selected in HQ 27.</i></p>	<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 toilet.....</td> <td>8</td> </tr> <tr> <td>Composting toilet</td> <td>9</td> </tr> <tr> <td>Hanging toilet /Hanging latrine</td> <td>10</td> </tr> <tr> <td>No facility / bush / field</td> <td>11</td> </tr> <tr> <td>Other:</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 toilet.....	8	Composting toilet	9	Hanging toilet /Hanging latrine	10	No facility / bush / field	11	Other:	12	No Response	-99																			
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	<p>Question HQ 29 will repeat x times, once for each sanitation facility selected in HQ27. These facilities include:</p> <p>HQ27: [ODK will display HQ27 selections]</p>																																																		
29	<p>How often does your household typically use: [TOILET FACILITY TYPE]?</p> <p><i>Regular practices at the household only.</i></p>	<table border="1"> <tbody> <tr> <td>Always</td> <td>1</td> </tr> <tr> <td>Most of the time.....</td> <td>2</td> </tr> <tr> <td>Occasionally.....</td> <td>3</td> </tr> <tr> <td>Rarely.....</td> <td>4</td> </tr> <tr> <td>No response.....</td> <td>-99</td> </tr> </tbody> </table>	Always	1	Most of the time.....	2	Occasionally.....	3	Rarely.....	4	No response.....	-99																																							
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29b	<p>Do you share this toilet facility with other households or the public?</p>	<table border="1"> <tbody> <tr> <td>Not shared.....</td> <td>1</td> </tr> <tr> <td>Shared with less than ten households</td> <td>2</td> </tr> <tr> <td>Shared with ten or more households</td> <td>3</td> </tr> <tr> <td>Shared with the public.</td> <td>4</td> </tr> <tr> <td>No response.....</td> <td>-99</td> </tr> </tbody> </table>	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																																						
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29c	<p>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></p>	<p>Number of Households: <input type="text"/></p>	
30	<p>How many people within your household regularly use the bush / field at home or at work? There are x people in this household. Enter -88 for do not know, -99 for no response.</p>	<p>Number of People: <input type="text"/></p>	
31	<p>Ask permission to take a photo of the entrance of the house. Did you get consent to take the photo?</p>	<p>Yes 1 No 0</p>	Skip L if No
<p>Thank the respondent for her/his time. <i>The respondent is finished, but there is still more for you to complete outside the home.</i></p>			
LOCATION AND QUESTIONNAIRE RESULT			
K	<p>Location Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6m.</p>	RECORD LOCATION	
	CHECK 32: Permission to take photo?		Skip to M if No
L	Ensure that no people are in the photo	TAKE PICTURE CHOOSE IMAGE	
M	How many times have you visited this household?	1 st time 1 2 nd time 2 3 rd time 3	
N	<p>Questionnaire result <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	