

Burkina Faso Baseline and Endline Instrument
WASHPlus Project
April 27 2015

Identification			
No.	Questions	Coding Categories	Skip
1	QUESTIONNAIRE NUMBER (Use same number as household identification number of sampling framework maps)		
2	How old are you? (Write in years)	_____ years	IF UNDER 18 YEARS OLD, STOP SURVEY
3	How many children between ages 1 and 9 do you have or care for?	None [] []	IF NONE, STOP SURVEY
4	What is your marital status?	Married 1 Not married..... 2 Widow..... 3 Divorced 4	
5	Interviewer	x..... 1 y 2 z 3	
6	Districts	x..... 1 y 2 z 3	
7	Name of village (Write name)		
8	Supervisor	x..... 1 y 2 z 3	
9	Date questionnaire reviewed	[] [] [] Day Month Year	
10	Reviewer's Name	x..... 1 y 2 z 3	

0100 - 120 Dwelling and Family Characteristics			
No.	Questions	Coding Categories	Skip
100	What type of dwelling are you visiting? <i>(OBSERVE ONLY)</i>	Stand alone home 1 House in communal compound ... 2 Other (Specify) 3	
101	What type of floor materials does the dwelling have? <i>(OBSERVE ONLY)</i>	Dirt..... 1 Concrete 2 Other (Specify)..... 3	
We would like to talk about your household. Let us first start with some of the characteristics of the family, including yourself.			
102	How many people (adults and children) live permanently in this household (ménage)? <i>(PLEASE WRITE THE NUMBER DIRECTLY).</i>	[] []	
103	How many wives does the head of the family have? <i>(PLEASE WRITE THE NUMBER DIRECTLY).</i>	[] []	
104	What is your position in the household?	1 st wife 1 2 nd wife..... 2 3 rd wife 3 4 th wife 4 Not wife	
105	Does the family own or rent the place where you live?	Own 1 Rent..... 2	
106	During the last 12 months, did you carry out any type of work that generated monetary or in-kind income?	No..... 1 Yes 2	→108
107	What was the main activity that generated that income?	Farmer 1 Worker in another home 2 Informal sector vendor 3 Tailor/seamstress..... 4 Stitches quilts/makes handicrafts 5 Small shop owner 6 Housewife 7 Raises poultry/livestock 8 Money lender..... 9 Trader (buys/sells grain) 10 Teacher 11 Construction..... 12 Other. Specify 13 Not generating income 14	
108	In this month, are you involved in any activity that generates income?	No..... 1 Yes 2	
109	What is currently your main occupation?	Farmer 1 Worker in another home 2 Informal sector vendor 3 Tailor/seamstress..... 4 Stitches quilts/makes handicrafts 5 Small shop owner 6 Housewife 7 Raises poultry/livestock 8 Money lender..... 9 Trader (buys/sells grain) 10 Teacher 11 Construction..... 12	

		Other. Specify _____ 13 Not generating income 14	
110	During the last 12 months, did your spouse/head of household carry out any activity that generated monetary or in-kind income?	No..... 1 Yes 2	→112
111	What was his main income generating activity?	Farmer 1 Worker in another home 2 Informal sector vendor 3 Tailor/seamstress..... 4 Stitches quilts/makes handicrafts 5 Small shop owner 6 Housewife 7 Raises poultry/livestock 8 Money lender..... 9 Trader (buys/sells grain) 10 Teacher 11 Construction..... 12 Other. Specify _____ 13 Not generating income 14	
112	This month, is he involved in any income generating activity?	No..... 1 Yes 2	
113	What is currently his main occupation?	Farmer 1 Worker in another home 2 Informal sector vendor 3 Tailor/seamstress..... 4 Stitches quilts/makes handicrafts 5 Small shop owner 6 Housewife 7 Raises poultry/livestock 8 Money lender..... 9 Trader (buys/sells grain) 10 Teacher 11 Construction..... 12 Other. Specify _____ 13 Not generating income 14	
114	How many family members bring income to this family? (PLEASE WRITE DIRECTLY THE NUMBER REPORTED).	[] []	
115	In a typical month, who earns more, you, your husband/head of household or another family member?	Respondent 1 Husband/Head of household..... 2 Another family member..... 3	

	Questions	Coding Categories	Skip																																										
116	Does your family have.....?: <i>(READ CHOICES AND CAPTURE ANSWER BY CIRCLING RESPONSE)</i>	<table border="0"> <tr> <td></td> <td style="text-align: right;">Yes</td> <td style="text-align: right;">No</td> </tr> <tr> <td>Electricity</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Solar panel</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Radio</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Television</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Mobile phone</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Landline phone</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Kerosene/butter lamp</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Improved fixed stove</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Improved movable stove</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>A bicycle.....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>A motorcycle or scooter ...</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>A car or truck.....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Horse/mule for transport only</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> </table>		Yes	No	Electricity	1	2	Solar panel	1	2	Radio	1	2	Television	1	2	Mobile phone	1	2	Landline phone	1	2	Kerosene/butter lamp	1	2	Improved fixed stove	1	2	Improved movable stove	1	2	A bicycle.....	1	2	A motorcycle or scooter ...	1	2	A car or truck.....	1	2	Horse/mule for transport only	1	2	
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117	If NO mobile phone at Q 116, skip to 118. What mobile operator do you use? <i>(WRITE NAME OF OPERATOR)</i>																																												
118	Does your family _____?: <i>(READ CHOICES AND CAPTURE ANSWER BY CIRCLING RESPONSE)</i>	<table border="0"> <tr> <td></td> <td style="text-align: right;">Yes</td> <td style="text-align: right;">No</td> </tr> <tr> <td>Own cattle</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Own horses/mules/donkeys</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Own sheep/goats/pigs.....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Own poultry</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Own an animal drawn cart....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Grow cash crops</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> </table>		Yes	No	Own cattle	1	2	Own horses/mules/donkeys	1	2	Own sheep/goats/pigs.....	1	2	Own poultry	1	2	Own an animal drawn cart....	1	2	Grow cash crops	1	2																						
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119	Did you ever attend school?	<table border="0"> <tr> <td>No.....</td> <td style="text-align: right;">1</td> </tr> <tr> <td>Yes</td> <td style="text-align: right;">2</td> </tr> </table>	No.....	1	Yes	2	→121																																						
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Yes	2																																												
120	What was the last grade that you completed? <i>(PLEASE WRITE DIRECTLY THE NUMBER REPORTED).</i>																																												
121	Can you please read the following sentence:	<table border="0"> <tr> <td>Reads it easily</td> <td style="text-align: right;">1</td> </tr> <tr> <td>Reads it with difficulty</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Could not read it</td> <td style="text-align: right;">3</td> </tr> <tr> <td>Declined to participate</td> <td style="text-align: right;">4</td> </tr> </table>	Reads it easily	1	Reads it with difficulty	2	Could not read it	3	Declined to participate	4																																			
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122	What is your religion?	<table border="0"> <tr> <td>Muslim.....</td> <td style="text-align: right;">1</td> </tr> <tr> <td>Catholic.....</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Other Christian</td> <td style="text-align: right;">3</td> </tr> <tr> <td>Other.....</td> <td style="text-align: right;">4</td> </tr> </table>	Muslim.....	1	Catholic.....	2	Other Christian	3	Other.....	4																																			
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200-206 Family Composition, Selection of Index Child and Observation of His/Her Face																																													
No	Questions	Coding Categories	Skip																																										
200	Could you please tell me the name, gender and age of your children under 10 years of age. You may start with the oldest. Randomly select the target child between 1 and 9. If not present, randomly select another. Repeat up to three eligible children. If none are present go to Q 304.	Name																																											
		Sex	1. Male 2. Female																																										
		Age in years																																											
Ask to meet the target child. Say hello to child and observe and note the following items about the child's face and hands																																													
201	Child has dust or dirt on face	No.....	1																																										
		Yes	2																																										
202	Child's eye/s has/have visible discharge	No.....	1																																										
		Yes	2																																										
203	Child's nose has visible discharge	No.....	1																																										
		Yes	2																																										
204	Child has food around mouth (when not eating)	No.....	1																																										
		Yes	2																																										

205	Child has flies on face	No.....	1	
		Yes	2	
206	Child's hands are dirty, dusty, or food encrusted	No.....	1	
		Yes	2	

0304 - 0320 Water Sources and Treatment for Drinking			
No.	Questions	Coding Categories	Skip
304	<p>What is the main source of drinking water for your family at this time of year? Does it look like any of these?</p> <p>(SHOW PICTURES)</p>	Piped water..... 1 Tube well or borehole..... 2 Dug well..... 3 Protected Dug Well..... 4 Unprotected Dug Well..... 5 Rainwater..... 6 Tanker Truck..... 7 Surface Water..... 8 (River/Dam/Lake/Ponds/Stream Canal/Irrigation Channel) 9 Bottled Water or Water from Sachet..... 10 Other (Specify) _____ 11	
305	<p>If main source is not on premises, skip to 307.</p> <p>Who usually goes to the source to fetch the drinking water for the household?</p> <p>Probe. Is this person 10 years of age or older? What is that person's sex?</p> <p>(Circle the code that best describes this person.)</p>	Men 10 years old or older 1 Women 10 years old or older.... 2 Boys 9 years or under..... 3 Girls 9 years or under 9..... 4	
306	<p>How long does it take to go there, get drinking water, and come back?</p> <p>(Use categories, above and under 30 minutes)</p>	Over 30 minutes.....1 30 minutes or below.....2 On premises.....3	
307	<p>Is that source used by your family all year round?</p>	No..... 1 Yes 2	

308	Where else do you get drinking water from during this time of year?	Piped water 1 Tube well or borehole 2 Dug well 3 Protected Dug Well..... 4 Unprotected Dug Well..... 5 Rainwater 6 Tanker Truck..... 7 Surface Water (River/Dam/Lake/ Ponds/Stream/Canal/Irrigation Channel)..... 8 Bottled Water or Water from Sachet..... 9 Other (Specify) _____ 10	
309	Where do you get your drinking water from at other times of the year?	Piped water 1 Tube well or borehole 2 Dug well 3 Protected Dug Well..... 4 Unprotected Dug Well..... 5 Rainwater 6 Tanker Truck..... 7 Surface Water (River/Dam/Lake/ Ponds/Stream/Canal/Irrigation Channel)..... 8 Bottled Water or Water from Sachet..... 9 Other (Specify) _____ 10	

310	What are the sources of water you use for other purposes than drinking (such as cooking, handwashing, and other household chores)? What other sources? (MULTIPLE RESPONSES ARE POSSIBLE.)	Piped Water Into Dwelling.....	1	
		Piped Water From A Neighbor.....	2	
		Piped Water Into Yard/Plot.....	3	
		Public Tap/Standpipe.....	4	
		Tube Well Or Borehole.....	5	
		Protected Dug Well.....	6	
		Unprotected Dug Well.....	7	
		Water From Protected Spring.....	8	
		Water From Unprotected Spring		
		Rainwater.....	9	
		Tanker Truck.....	10	
		Cart With Small Tank.....	11	
		Surface Water (River/Dam/Lake/Ponds/Stream/ Canal/Irrigation Channel)	12	
		Bottled Water.....	13	
Other (Specify) _____	14			
311	Could you please serve me a cup of water from where the children usually drink?	NOT OBSERVED	1	
		OBSERVED	2	
Use the time to make some observations about how water is obtained from the container and characteristics of the container.				
<ul style="list-style-type: none"> • Cover • • What used to get water • • Diameter of opening • 				
Thank you for the water. Let's continue.				
312	Did you or anyone in the household do anything to make this water safer to drink?	No.....	1	→319
		Yes.....	2	
313	What specifically was done to make this water safer to drink?	Liquid chlorine solution	1	If chlorine and coagulants used got to Q313a
		Chlorine tablets.....	2	
		Coagulant/flocculant.....	3	
		Ceramic filter.....	4	

		Biosand filter 5 Membrane filter 6 Cloth filter 7 Settling..... 8 Boiling 9 Other. Specify 10	If these filters are used go to Q313b If settling or boiling is used, go to Q314
313a	If chlorine solution, chlorine tablets or a coagulant/flocculant is used, ask: Can you please show the product that is generally used to treat the water?	Able to show product 1 Unable to show product 2	If filters not used, skip to Q314
313b	If ceramic, biosand or membrane filter is used to treat the water ask: Can I please see the filter?	Able to show product 1 Unable to show product 2	->Q314
313c	If you see filter, verify if filtered water comes out of the filter	Water coming out of filter 1 No water coming out of filter 2	
314	For what reasons is the water in your household treated? What other reasons?	Health promotion received 1 <i>Specify source:</i> (School, health center, CHW, mass media etc.)... _____ Standard practice in household to treat water 2 I had water treatment kit this time..... 3 Source makes it unsafe for drinking without treatment..... 4 Someone is currently sick in the family so we must use treated water... 5 Other. <i>Specify</i> 6	
315	If health promotion in Q. 315, ask What specific information motivated your household to treat the water?	Avoid worms..... 1 Avoid diarrhea 2 Other. Specify 3 DK/Don't remember 4	

316	How many hours ago was this water treated? READ responses	Less than 12 HOURS Between 12 and 23 hours 24 or more hours Don't know	
317	How often do you treat drinking water this way?	Daily..... 1 Weekly..... 2 When somebody in the house is ill 3 During emergencies..... 4 Others. Specify _____ 5	
318	Who usually drinks treated water in your household? Probe: Does the (index child) usually drink it?	All children under 10 years old 1 Some children under 10 years old..... 2 No children under 10 years old 3 All people aged 10 or older..... 4 Some people aged 10 or older 5 No people aged 10 or older 6	ALL RESPO NDENT S → Q 401
319	For what reasons is this drinking water not treated? What other reasons? (Multiple responses are possible).	Not aware water should be treated 1 Standard practice in household not to treat water 2 I lacked water treatment kit this time 3 The source is safe for drinking without treating it 4 Nobody fell sick so we are just OK using this water 5 Other (Specify) _____ 6	

401-404 Soap

401	Is there any type of soap in the house?	NO.....	1	→ Q405
		YES.....	2	
402	Who in the family decided to buy the soap?	Self.....	1	
		Daughter.....	2	
		Husband.....	3	
		Son.....	4	
		Somebody else, specify_____	5	
403	For what purpose do people in this household commonly use soap?	Washing Clothes.....	1	
		Washing My Body	2	
		Washing my face.....	3	
		Washing My Children’s Faces.....	4	
		Washing Child’s Bottoms.....	5	
		Washing My Children’s Hands.....	6	
		Washing Child’s body.....	7	
		Washing my hands.....	8	
		Washing dishes.....	9	
		Washing vegetables.....	10	
404	Do people in this household use the same soap for everything?	NO.....	1	
		YES.....	2	

405 - 433 Handwashing and Face Washing

405. I am going **to read** to you different circumstances **when people may RINSE their hands**. Please tell me during which ones you wash your hands with water only. For each one of those circumstances I will need you to tell me if you engage in that practice: never, sometimes, often or always

	Never	Sometimes	Often	Always
Before washing your face	1	2	3	4
After going to the latrine	1	2	3	4
Before eating	1	2	3	4
Before cooking	1	2	3	4
Before feeding a child	1	2	3	4
Before washing child's face	1	2	3	4
After any form of work with my hands	1	2	3	4
After touching an animal	1	2	3	4
After cleaning a child's bottom	1	2	3	4
After washing child's face	1	2	3	4
After cleaning a latrine	1	2	3	4
After handling a sick person	1	2	3	4

406. Now, I am going **to read** the same list. This time please will tell me how frequently you **WASH** your hands **using soap** at each one of those occasions. Here we go.

	Never	Sometimes	Often	Always
Before washing your face	1	2	3	4
After going to the latrine	1	2	3	4
Before eating	1	2	3	4
Before cooking	1	2	3	4
Before feeding a kid	1	2	3	4
Before washing child's face	1	2	3	4
After work	1	2	3	4
After touching an animal	1	2	3	4
After cleaning a kid's bottom	1	2	3	4
After washing child's face	1	2	3	4
After cleaning a latrine	1	2	3	4

	After taking care of a sick person	1	2	3	4
407	Can you show me where you usually wash your hands? ASK TO SEE AND OBSERVE (Indicate all that are mentioned, if more than one)	No permission to see.....	1	→411	
		Inside/10 steps near latrine.....	2		
		Inside/near place of cooking	3		
		Elsewhere in yard/garden.....	4		
		Outside of yard/premises.....	5	→411	
		No specific place	6	→411	
Thank you. Let me take a couple of notes to remember what you are showing me.					
408	(OBSERVE) WHAT IS THE HAND WASHING DEVICE USED?	Pail/Bucket (movable)	1		
		Tippy tap (fixed)	2		
		Handwashing station introduced by WASHplus.	3		
		Other device, Explain _____	4		
409	(OBSERVE) Was water available at time of interview?	NO	1		
		YES.....	2		
410	OBSERVATION ONLY: IS THERE SOAP OR DETERGENT OR OTHER LOCALLY USED CLEANSING AGENT? THIS ITEM SHOULD BE EITHER IN PLACE OR BROUGHT BY THE INTERVIEWEE WITHIN 2 MINUTES. IF THE ITEM IS NOT PRESENT WITHIN THAT TIME CHECK NONE, EVEN IF PROVIDED LATER.	None.....	1		
		Soap	2		
		Detergent	3		
		Ash	4		
		Mud	5		
		Sand.....	6		
		Other (specify) _____	7		

OK. Let's continue.

411	Who in the family generally makes sure that there is water at this hand washing station(s)?	Self..... 1 Daughter..... 2 Husband..... 3 Son..... 4 Somebody else, <i>specify</i> 5	
412	If #3 at Q 407, skip to 418 Is there a handwashing station in or near the area where you cook?	NO..... 1 YES..... 2	-> Q418
413	May I see this station?	NO..... 1 YES..... 2	-> Q418
414	(Observe) What is the hand washing device used?	Pail/Bucket (movable) 1 Tippy tap (fixed) 2 Handwashing station introduced by WASHplus. 3 Other device, Explain 4	
415	(Observe) Was water available at the time of the interview?	NO..... 1 YES..... 2	
416	(Observe) Was there soap or detergent or other locally used cleansing agent?	NO..... 1 YES..... 2	
417	Was this handwashing station set up within the past 10 months ?	NO..... 1 YES..... 2	
418	Can you show me where you usually wash your face?	No permission to see..... 1 Inside/10 steps near latrine..... 2 Inside/near place of cooking..... 3 Elsewhere in yard/garden..... 4 Outside of yard/premises..... 5 No specific place 6	

419	Can you show me where the child's face is usually washed?	No permission to see..... 1 Inside/10 steps near latrine..... 2 Inside/near place of cooking..... 3 Elsewhere in yard/garden..... 4 Outside of yard/premises..... 5 No specific place 6	
420	When do you wash the child's face or when does s/he wash it himself? Multiple answers possible	As soon as wake up..... 1 After eating breakfast..... 2 After using latrine..... 3 After lunch..... 4 Before sleeping..... 5 Before prayers 6 Other, <i>Specify</i> _____ 7	
421	How often is the child's face washed?	More than once a day..... 1 Once a day..... 2 Several times a week..... 3 Once a week..... 4 Less than once a week..... 5	
422	What things are usually used to wash the child's face?	Water only..... 1 Water and soap..... 2 Not wash..... 3 Don't know 4 Other, specify_____	

423	How is the child's face dried after it is washed?	Clothes she wears..... 1 Child's shirt/clothes..... 2 Don't dry/air dry..... 3 Towel..... 4 House cloth..... 5 Other 	→Q427 → Q427 →Q427 →Q427
424	What else is this towel/cloth generally used for?	No other uses..... 1 Drying hands..... 2 Drying other people's faces..... 3 Drying cooking utensils..... 4 Cleaning kitchen..... 5 Other uses. <i>Specify</i> _____ 6	
425	How long is this towel/cloth used for the child's face before using a new, clean one?	Less than a day..... 1 Once a day..... 2 Several days..... 3 Once a week..... 4 More than a week..... 5	
426	When do you wash your own face? Multiple answers possible	As soon as wake up..... 1 After eating breakfast..... 2 After using latrine..... 3 After lunch..... 4 Before sleeping..... 5 Before prayers Other, <i>specify</i> _____ 6	
427	How do you dry your face after washing it?	Clothes she wears..... 1 Child's shirt/clothes..... 2 Don't dry/air dry..... 3 Towel..... 4 House cloth..... 5 Other	→Q430 →Q430 →Q430 →Q430

428	What else is this towel/cloth used for?	No other uses..... 1 Drying hands..... 2 Drying other people's faces..... 3 Drying cooking utensils..... 4 Cleaning kitchen..... 5 Other uses. <i>Specify</i> _____ 6	
429	How long is this towel/cloth used to dry your face before using a new, clean one?	Less than a day..... 1 Once a day..... 2 Several days..... 3 Once a week..... 4 More than a week..... 5 More than once a day..... 6	
430	How often is laundry done?	Once a day..... 1 Once ever several days..... 2 Once a week..... 3 Longer than a week..... 4 More than once a day..... 5	
431	Where is laundry usually done?	Water point..... 1 Open source..... 2 Other, <i>specify</i> _____ 3	

0501-0526 Management of Human Feces

501	The last time the target child passed a stool, where did he/she defecate?	Used sanitation facility.....1 Used potty2 Used washable diapers3 Used disposable diapers4 Went in house/yard5 Went outside the premises.....6 Went in his/her clothes7 Don't know8 Other. <i>(Specify)</i> _____ 9	
502	The last time the target child passed stools, where were the feces disposed of?	Dropped into latrine facility1 Buried.....2 Solid waste/trash3 In yard4 Outside premises5 Public latrine.....6 Into sink or tub.....7 Thrown into waterway.....8 Thrown elsewhere <i>(specify)</i> _____ 9	
503	Where do members of your household usually go to defecate? (Show pictures to help make a decision).	Field, bush, yard, etc. (open defecation)..... 1 FLUSH OR POUR FLUSH LATRINE 2 Ventilated improved pit latrine.....3 Pit latrine with slab.....4 Pit latrine without slab/Open pit.....5 Composting latrine.....6 Hanging latrine/latrine.....7 Other. <i>Specify</i> _____ 8	→ Q523
504	Do any family members ever defecate in the yard/bush?	NO..... 1 YES..... 2	

505	What do you use for anal cleansing?	Water.....1 Paper.....2 Hand.....3 Leaves Other. <i>Specify</i> _____ 4	
506	Do all members of the family use this facility?	NO..... 1 YES..... 2	
507	Is it acceptable for men and women to use the same latrine?	NO..... 1 YES..... 2	
508	Where is your latrine facility?	Inside/attached to dwelling1 Elsewhere on the compound2 Outside the compound3 Public latrine.....4	
509	Do you share this facility with other households?	NO..... 1 YES..... 2	-> Q511
510	How many households share this facility? <i>(WRITE NUMBER OF HOUSEHOLDS)</i>	Number of households <input type="text"/> <input type="text"/>	
511	Who in the family decided to install the latrine?	Self1 Spouse2 Somebody else in compound3	
512	Who installed the latrine?	Husband1 Somebody else in compound.....2 Hired person.....3 Does not know4	
513	Who decided where to locate the latrine?	Wife.....1 Daughter.....2 Husband.....3 Son.....4 Somebody else, <i>specify</i> _____ 5 Does not know.....6	

514	How long have you had that latrine? (WRITE INFORMATION IN MONTHS/YEARS)	<input type="text"/> <input type="text"/> Years Months	
515	Did your household get a loan to install this latrine?	NO.....1 YES.....2 Does not know3	
516	Did your household get a subsidy to install the latrine?	NO.....1 YES.....2 Does not know3	
517	What were the top three reasons for building the facility? (Multiple choice, Do not read answers, record all answers - Up to 3 - provided.)	Status/Pride1 Comfort.....2 Convenience.....3 Privacy.....4 Avoid sharing with others.....5 Security.....6 Disease prevention.....7 Shame of environmental contamination8 Do help develop my community.....9 Other. (Specify)10	
518	Has any maintenance work been done on this latrine since it was constructed?	NO.....1 YES.....2	→ Q520
519	What was done?	Changed an element of the structure above the ground.....1 Changed to a new pit.....2 Emptied the pit3 Other4	
520	Was your latrine emptied since it was constructed?	NO.....1 YES.....2 Does not know3	→ Q522 → Q522

521	If emptied, where were the contents of the pit disposed?	Disposed in waterway.....1 Disposed in field far away from house.....2 Buried it elsewhere.....3 Burned it.....4 Used it for composting.....5 Other. <i>(Specify)</i> _____6	ALL SKIP TO Q. 523
522	What are the top three reasons for <u>not</u> building the latrine facility? <i>(Multiple choice, Do not read answers, record up to 3 answers provided.)</i>	Not having adequate plot of land/no land to construct the latrine1 Soil is loose2 Not having adequate construction materials3 No one to construct the latrine (No mason)4 Construction cost is expensive5 Not having knowledge on how to construct latrine.....6 Not being able to get permission from local authorities to construct the latrine7 We have other priorities8 No need/satisfied with current location/situation.9 Other. <i>(Specify)</i> _____10	
523	How satisfied are you with the place where your family defecates? <i>(Read answers)</i>	Very unsatisfied.....1 Somewhat unsatisfied.....2 No opinion.....3 Somewhat satisfied.....4 Very satisfied.....5 Other. <i>(Specify)</i> _____6	Skip to 525
524	What would you like to do to change your current sanitation situation?	Build a private latrine.....1 Improve the current private family latrine2 Help build a community latrine.....3 Request government/outside assistance for Improving situation.....4 Nothing, satisfied.....5 Other. <i>Specify</i> _____6 Do not know.....7	

525	Do you intend to install/change a sanitation facility in the next six months?	NO.....1 YES.....2	
526	What, if anything, does your household do to reduce the number of flies/insects in the house?	Mosquito nets.....1 Spray.....2 Coils.....3 Burn something.....4 Other, <i>specify</i>5	
0527 – 0547 Sanitation Observations and Gender Roles			
(If no latrine exists in the household, skip to question 545)			
527	ASK: Who cleans the latrine?	Wife.....1 Daughter.....2 Husband.....3 Son.....4 Somebody else, <i>specify</i>5	
528	May I see the latrine?	Not allowed.....1 Allowed to see it.....2	→545
529	SAY: I will be taking some notes and then may ask a few questions. (OBSERVE) Distance of the facility from the house?	Within house1 In yard.....2 1-20 meters from house.....3 21+ meters from house4	
530	Is the path to the latrine delineated? (OBSERVE)	NO.....1 YES.....2	
531	(OBSERVE) Does the latrine superstructure have walls?	NO.....1 YES.....2	
532	(OBSERVE) Does the latrine have a roof?	NO.....1 YES.....2	
533	(OBSERVE) Does latrine allow privacy? (It has a curtain or door or entrance is L shaped)	NO.....1 YES.....2	

534	<p>Is the squat hole small enough so a young child will not feel like s/he might fall in?</p> <p>(OBSERVE)</p>	<p>NO.....1</p> <p>YES.....2</p>	
535	<p>(OBSERVE)</p> <p>Is the pit covered?</p>	<p>NO.....1</p> <p>YES.....2</p>	
536	<p>(OBSERVE)</p> <p>Is it being used?</p> <p>(OBSERVE IF THERE ARE FECES IN THE PIT, THROW A ROCK AND LISTEN IF IT SEEMS WET, IF THERE IS EVIDENCE OF ANAL CLEANSING, AND/OR IF THE PATH TO THE LATRINE SEEMS TO HAVE BEEN WALKED ON. CHECK ALL THAT APPLY.)</p>	<p>Detected feces in pit using a flashlight.....1</p> <p>Observed anal cleansing materials in latrine.....2</p> <p>Detectable path to the latrine.....3</p> <p>Slab is wet.....4</p> <p>Slab is grey color.....5</p> <p>Smelly.....6</p> <p>Flies around it.....7</p>	

537	(Cleaning and operation—for dry latrines only. Observe conditions, first circling characteristics and subsequently reporting corresponding points in score column of table provided below. Add points to arrive at total score.)			
Latrine Component	No Cleaning/ Operation (Score of 0)	Limited Cleaning/Operation (Score of 1)	Adequate Cleaning/Operation (Score of 2)	Scores
Floor (concrete, soil, plastic, tile, wood, etc.)	Abundant fecal matter/used anal cleansing material on floor to the extent that entering facility without stepping on feces is difficult. Dried fecal matter is present.	Limited amount of fecal matter or used anal cleansing material on floor. Smear feces may be present.	No fecal matter or used anal cleansing material on floor.	
Hole Cover/Lid (if clearly part of original facility)	No hole cover present.	Hole cover defective, broken, or not used.	Hole cover placed over hole and tight fitting.	
Anal Cleansing Material	Soiled anal cleansing material accumulated on floor of latrine.	Some soiled anal cleansing material on latrine floor.	No soiled anal cleansing material visible.	
538	(OBSERVE) Is there a broom nearby?		NO.....1 YES.....2	
539	(OBSERVE) Is there a hand washing station inside or near the latrine (not more than 10 paces away from the latrine)?		NO.....1 YES.....2	→ Q545
540	(OBSERVE) Is there water at that hand washing station near the latrine?		NO.....1 YES.....2	→ Q544
541	(OBSERVE) What container is used for water at the HW station?		Pail/Bucket (movable) 1 Tippy tap (fixed) 2 Handwashing station introduced by WASHplus. 3 Other device, Explain _____ 4	

542	<p>(OBSERVE)</p> <p>What cleansing agent is at this hand washing station inside/near the latrine?</p> <p>RECORD ALL PRESENT</p>	<p>None.....0</p> <p>Soap.....1</p> <p>Detergent.....2</p> <p>Ash.....3</p> <p>Other (specify)_____4</p>	
543	<p>ASK</p> <p>Who brings the water to the hand washing station here?</p>	<p>Self.....1</p> <p>Daughter.....2</p> <p>Husband.....3</p> <p>Son.....4</p> <p>Somebody else, <i>specify</i>_____5</p>	
544	<p>ASK:</p> <p>Who makes sure there is a cleansing agent available?</p>	<p>No such agent.....0</p> <p>Self.....1</p> <p>Daughter.....2</p> <p>Husband.....3</p> <p>Son.....4</p> <p>Somebody else, <i>specify</i>_____5</p>	
545	<p>(OBSERVE)</p> <p>Human or animal feces visible in household or yard?</p>	<p>None easily visible.....1</p> <p>Some visible.....2</p> <p>Many visible.....3</p>	
546	<p>(OBSERVE)</p> <p>Animals – livestock or domestic – inside or within 10 meters of house</p>	<p>None.....1</p> <p>Some.....2</p> <p>Many.....3</p>	
547	<p>(OBSERVE)</p> <p>Garbage pit inside or within 10 meters of household</p>	<p>NO.....1</p> <p>YES.....2</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
600 – 613: Schisto, intestinal worms and trachoma			
600	How often do you wear any shoes, including flipflops, when you leave the house for any reason?	Always.....1 Sometimes.....2 Never.....3	→603
601	For what reasons do you not wear shoes whenever you go out?	Don't have any shoes.....1 Other, specify _____ 2 No answer/don't know.....3	
602	How often do you wear any kind of shoes, including flipflops, when you go to do your business? (faire vos besoins)	Always.....1 Sometimes.....2 Never.....3	
603	How often does (insert name of index child) wear any shoes, including flipflops, when s/he leaves the house for any reason?	Always.....1 Sometimes.....2 Never.....3	
604	For what reasons does target child not wear shoes whenever he/she goes out?	Don't have any shoes.....1 Other, specify _____ 2 No answer/don't know.....3	→605
604a	How often does target child wear any kind of shoes, including flipflops, when s/he goes to do his business? (faire ses besoins)	Always.....1 Sometimes..... 2 Never..... 3	
605	How often do you bathe?	More than once a day.....1 Once a day.....2 Several times a week.....3 Once a week.....4 Less than once a week.....5	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
606	How often does target child bathe/ do you bathe target child?	More than once a day.....1 Once a day.....2 Several times a week.....3 Once a week.....4 Less than once a week.....5	
606a	Where does target child bathe?	In house In yard In Water source (River/Dam/Lake/Ponds/ Stream/Canal/Irrigation Channel)..... Other, specify _____	→ 607a
607	What water does/is (insert name of the index child) usually use for bathing?	Piped Water Into yard, neighbor, standpipe..... 1 Tube Well Or Borehole...2 Protected Dug Well.....3 Unprotected Dug Well.....4 Water From Protected Spring.....5 Water From Unprotected Spring6 Rainwater.....7 Truck.....8 Surface Water (River/Dam/Lake/Ponds/ Stream/Canal/Irrigation Channel).....9	
607a	Where do you usually bathe?	In house In yard In Water source (River/Dam/Lake/Ponds/ Stream/Canal/Irrigation Channel)..... Other, specify _____	→ 609

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
608	What water do you usually use for bathing?	Piped Water Into yard, neighbor, standpipe..... 1 Tube Well Or Borehole...2 Protected Dug Well.....3 Unprotected Dug Well.....4 Water From Protected Spring.....5 Water From Unprotected Spring6 Rainwater.....7 Truck.....8 Surface Water (River/Dam/Lake/Ponds/Stream/Canal/Irrigation Channel).....9	
609	Where do you regularly urinate?	Latrine.....1 Inside Compound.....2 Outside Compound on ground.....3 Surface Water (River/Dam/Lake/Ponds/Stream/Canal/Irrigation Channel) 4 Other.....5	
610	Where does (insert index child's name) usually urinate?	Latrine.....1 Inside Compound.....2 Outside Compound on ground.....3 Surface Water (River/Dam/Lake/Ponds/Stream/Canal/Irrigation Channel) 4 Other..... 5	
611	How often does (insert name of index child) swim in or play near or in an open body of water?	More than once a day.....1 Once a day.....2 Several times a week.....3 Once a week.....4 Less than once a week.....5	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
612	How often does (insert name of index child work (fish, other) near or in an open body of water?	More than once a day.....1 Once a day.....2 Several times a week.....3 Once a week.....4 Less than once a week.....5	
613	Where does (inset name of index child) target child usually eat? IF SHE SAYS FLOOR, OR OUTSIDE ON GROUND, DETERMINE IF IT'S BARE FLOOR/GROUND OR IF IT IS ON SOMETHING PLACED ON THE GROUND UNDER THE FOOD.	Bare floor in house.....1 Surface above floor in house.....2 On blanket/mat in house.....3 Outside on bare ground.....4 Outside surface above the ground.....5 On blanket/mat outside the house.....6 Other	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
614-27: Awareness/Knowledge			
614	Have you heard of trachoma?	NO.....1 YES.....2	→618
615	What Is trachoma?	A disease that causes blindness Other Don't Know	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
616	What is the main reason children get trachoma?	Does not know.....1 Handwashing with soap2 No facewashing.....3 Drinking contaminated water4 Eating contaminated food.....5 Sucking/putting dirty fingers in \ mouth6 Flies7 Walking around without wearing shoes.....8 Spending time in open water.....9 Eating on floor.....10 Other reasons. Specify _____11	
617	How can one prevent trachoma in children?	Clean face.....1 Using a latrine.....2 Keeping living area clean.....3 Keeping flies away4 Other (specify)_____5 Pills/treatment/MDA.....6 Does not know7	
618	Have you heard of bilharzia (bloody urine)?	NO.....1 YES.....2	→622
619	What is bilharzia?	Disease causing swollen belly and malnutrition.....1 Other _____2 Don't Know.....3	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
620	What is the main reason people get bilharzia?	Does not know.....1 Handwashing with soap2 No facewashing.....3 Drinking contaminated water4 Eating contaminated food.....5 Sucking/putting dirty fingers in \ mouth6 Flies7 Walking around without wearing shoes.....8 Spending time in open water.....9 Eating on floor.....10 Other reasons. Specify _____11	
621	How can one prevent bilharzia in children?	Don't do laundry in open water source.....1 Don't collect water from open water source2 Don't recreate in open water bodies..... 3 Don't urinate in open water source.....4 Boil water.....5 Other treatment of water, specify: _____6 Pills/treatment/MDA.....7	
622	Have you heard of intestinal worms?	NO.....1 YES.....2	→626
623	What are intestinal worms?	Disease that causes malnutrition.....1 Other (specify) _____2 Don't know.....3	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
624	What is the main reason children get intestinal worms?	Does not know.....1 Handwashing with soap2 No face washing.....3 Drinking contaminated water4 Eating contaminated food.....5 Sucking/putting dirty fingers in \ mouth6 Flies7 Walking around without wearing shoes.....8 Spending time in open water.....9 Eating on floor.....10 Other reasons. Specify _____11	
625	How can one prevent intestinal worms in children?	Wearing shoes.....1 Washing hands before food preparation.....2 Wash hands before eating/feeding child.....3 No open defecation.....4 Clean latrine/latrine free of fecal material..5 Food hygiene.....6 Not eating on dirt floor.....7 Pills/treatment/MDA.....8 Other reasons, Specify _____ 9	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
626	<p>Often people wash their hands before or after doing certain activities. What do you think are the most important occasions to wash hands? What other occasions?</p> <p>MULTIPLE RESPONSES ARE POSSIBLE. RECORD ALL MENTIONED</p>	<p>After any latrine visit.....1</p> <p>After defecation.....2</p> <p>Before eating.....3</p> <p>After cleaning a child/washing a diaper....4</p> <p>After cleaning the latrine.....5</p> <p>After handling any materials for household chores.....6</p> <p>After cleaning a potty.....7</p> <p>Before food preparation.....8</p> <p>Before feeding a child.....9</p> <p>After handling a sick person.....10</p> <p>After eating.....11</p> <p>Other (specify)_____12</p> <p>Does not know.....13</p>	
627	<p>What are the reasons for washing hands with soap/ash?</p> <p>RECORD ALL MENTIONED</p>	<p>Prevent diarrhea.....1</p> <p>Prevent worms.....2</p> <p>Prevent trachoma.....3</p> <p>Prevent other diseases.....4</p> <p>Remove germs.....5</p> <p>Prevent dirt getting into mouth.....6</p> <p>Prevent dirt from getting into food.....7</p> <p>Smells good.....8</p> <p>Others (specify)_____9</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
0631-0643 Psycho social determinants of latrine ownership			
Now, I am going to ask a series of questions to get a sense of your opinions. I would appreciate it if you answered by telling me if you agree, if you disagree or if you have no opinion on the matter. However, if you agree or disagree, I would like you to let me know if you totally or partially agree or if you totally disagree or you- partially disagree.			
OK. Let's get started. Please tell me your opinion of each of the following statements. Having a latrine:			
631	Makes owners appear to be more traditional	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
632	Makes owners more respected by visitors that come to their house	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
633	Makes family members ashamed	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
634	Helps keep the family compound clean	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
635	Does not help to reduce the number of flies in the house	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
636	Allows you to defecate easily when you are sick	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
637	Reduces the possibility of disease in your family	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
638	Does not Give people more privacy	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
639	It is a nuisance to go to the latrine all the time to defecate.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
640	Avoids the dangers of defecating in the bush at night	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
641	It requires a lot of effort to maintain an operating latrine	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
642	It is embarrassing to go to the latrine because everyone can see when you go	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
643	It is bad for community development	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
0700-0710 Psycho social determinants of hand and face washing			
<p>Now, I am going to ask similar questions about handwashing. As before, I would appreciate it if you answered by telling me if you agree, if you disagree or if you have no opinion on the matter. However, if you agree or disagree, I would like you to let me know if you totally or partially agree or if you totally disagree or you partially disagree.</p>			
700	You only need to wash your hands with soap if they look dirty or smell bad (reverse coding)	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
701	Soap and water are never available in your house to wash hands before eating.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
702	I hate the smell of my hands if I do not wash them with soap after defecating.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
703	I like how my hands smell after I wash them with soap.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
704	People who wash their hands with soap deserve to be congratulated	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
705	It is shameful to be eating with unwashed hands in front of your friends.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
706	Good mothers make sure to wash their hands with soap before preparing food.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
707	Good mothers don't need to make sure to wash their hands with soap after going to the latrine (Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
708	My children are my pride and joy and I wash my hands with soap to protect them.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
709	It is not necessary to wash a child's face every day.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	
710	Children with dirty faces have bad mothers.	Totally agree.....4 Partially agree.....3 Partially disagree.....2 Totally disagree.....1 Indifferent, no opinion.....0	

0801 – 824 Exposure Information

Please let us talk about something else now

No.	Question	Coding Categories	Skip
801	In the past three months, have you heard or seen any information on hand washing?	NO.....1 YES.....2	→803
802	What was the source of that information? Where else? RECORD ALL MENTIONED	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify)_____7	
802a	Do you recall any of the main messages?	NO.....1 YES.....2	→803
802 b	What was one of the main messages you recall? Write verbatim	<hr/>	
803	In the past 3 months, have you heard or seen any information on face washing?	NO.....1 YES.....2	→ 805
804	What was the source of that information? Where else? RECORD ALL MENTIONED	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify)_____7	
804a	Do you recall any of the main messages?	NO.....1 YES.....2	→ 805
804 b	What was one of the main messages you recall? Write verbatim	<hr/>	

805	In the past 3 months, have you heard or seen any information about wearing shoes?	NO.....1 YES.....2	→807
806	What was the source of that information? Where else? RECORD ALL MENTIONED	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify)_____7	
806a	Do you recall any of the main messages?	NO.....1 YES.....2	→807
806 b	What was one of the main messages you recall? Write verbatim	_____ _____	
807	In the past 3 months, have you heard or seen any information about using public water sources?	NO.....1 YES.....2	→809
808	What was the source of that information? Where else? RECORD ALL MENTIONED	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify)_____7	
808a	Do you recall any of the main messages?	NO.....1 YES.....2	→If no go to 809
808 b	What was one of the main messages you recall?	_____ _____	
809	In the past 3 months, have you heard or seen any information about treating the water you drink?	NO.....1 YES.....2	→811
810	What was the source of that information? <i>where else?</i>	During medicine distribution (MDA).....1	

	RECORD ALL MENTIONED	Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify)_____7	
810a	Do you recall any of the main messages?	NO.....1 YES.....2	→811
810 b	What was one of the main messages you recall? Write verbatim		
811	In the past 3 months have you heard or seen anything about using latrines/sanitation?	NO.....1 YES.....2	→813
812	What was the source of that information? Where else? RECORD ALL MENTIONED	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify)_____7	
812a	Do you recall any of the main messages?	NO.....1 YES.....2	If No skip to question 813
812 b	What was one of the main messages you recall?	_____ _____	
813	Did your village participate in any activity to stop open defecation in the past 12 months?	NO.....1 YES.....2 Don't know.....3	
814	Did your village participate in a Walk of Shame?	NO.....1 YES.....2 Don't know.....3	
815	Has your community ever been given Open Defecation Free Status?	NO.....1 YES.....2 Don't know..... 3	
816	Have you been visited in the past 12 months by a village health educator to stop open defecation?	NO.....1 YES.....2	→819

817	Have you been visited in the past 12 months by a village health educator to improve your latrine?	NO.....1 YES.....2	
818	Have you and VHE selected an action in the past 12 months for you to try?	NO.....1 YES.....2	
819	When was the last time you attended a mass distribution of medicine for the community?	[] [] months [] [] years Don't know/remember	→821
820	About how many times have you attended/participated in MDA in the last 3 years?	[] [] times	
821	In your opinion, which is the most reliable source of information about child health issues?	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Through other channels (Specify).....7	
822	In your opinion, which is the most reliable source of information about water and sanitation issues?	During medicine distribution (MDA).....1 Through health center/health worker.....2 Through village health educator.....3 Through the area chiefs public meeting.....4 Through children that go to school.....5 Through the radio.....6 Village leader.....7 Sanitation/water workers.....8 Extension workers.....9 Through other channels (Specify).....10	
823	How often do you listen to the radio?	Every day..... 1 Several times a week..... 2 About once a week..... 3 Less than once a week..... 4	
824	What radio stations do you listen to?	Our community radio..... 1 RTB..... 2 Other, specify..... 3	