

mADDS –Household Roster

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
IDENTIFICATION											
Please record the following identifying information prior to beginning the interview.											
A	How many times have you visited this household?	1 st time 1 2 nd time 2 3 rd time 3									
B	Your name: Is this your name? <i>ODK will display the name associated with the phone's serial number</i>	Yes..... 1 No 0									
B2	If not, please record your name:										
C	CURRENT DATE AND TIME DISPLAYED ON SCREEN Is this date and time correct?	Yes..... 1 No 0	Skip to E if No								
D	Record the correct date and time	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Date</td> <td style="width: 25%;">Month</td> <td style="width: 25%;">Day</td> <td style="width: 25%;">Year</td> </tr> <tr> <td>Time</td> <td>Hour</td> <td>Minutes</td> <td>AM/PM</td> </tr> </table>	Date	Month	Day	Year	Time	Hour	Minutes	AM/PM	
Date	Month	Day	Year								
Time	Hour	Minutes	AM/PM								
E	Region PLEASE SELECT THE NAME OF THE REGION WHERE THE HOUSEHOLD IS LOCATED.	Tigray 1 Afar 2 Amhara 3 Oromia 4 Ethiopia Somali 5 Benishangul Gumuz 6 SNNPR 7 Gambella 8 Harari 9 Addis Ababa 10 Dire Dawa 11									
F	Zone PLEASE RECORD THE NAME OF THE ZONE WHERE THE HOUSEHOLD IS LOCATED.	<i>ODK will populate a list of appropriate zones based on the region selected for HQE</i>									
G	District PLEASE RECORD THE NUMBER OF THE DISTRICT WHERE THE HOUSEHOLD IS LOCATED.	<i>ODK will populate a list of appropriate districts based on the zone selected for HQF</i>									
H	Locality name PLEASE RECORD THE NAME OF THE LOCALITY WHERE THE HOUSEHOLD IS LOCATED.	<i>ODK will populate a list of appropriate localities based on the district selected in HQG. There may be only one choice.</i>									
I	Enumeration area PLEASE RECORD THE NUMBER OF THE ENUMERATION AREA WHERE THE HOUSEHOLD IS LOCATED.	<i>ODK will populate the appropriate EA</i>									
J	Structure number PLEASE RECORD THE NUMBER OF THE STRUCTURE OF WHICH THIS HOUSEHOLD IS A PART FROM THE										

	HOUSEHOLD LISTING FORM.		
K	Household number PLEASE RECORD THE NUMBER OF THE HOUSEHOLD FROM THE HOUSEHOLD LISTING FORM.		
	CHECK: Have you already sent a form for this structure and household? DO NOT DUPLICATE ANY FORM UNLESS YOU ARE CORRECTING A MISTAKE IN AN EARLIER FORM.	Yes..... 1 No 0	
L	Is a member of the household and competent respondent present and available to be interviewed today?	Yes..... 1 No 0	Skip to P if No
INFORMED CONSENT			
Find the competent member of the household. Read the following greeting:			
Hello. My name is _____ and I am working for the Addis Ababa University, and Federal Ministry of Health. We are conducting a local survey about various health issues. We would very much appreciate your participation in this survey. This information will help us inform the government to better plan health services. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team. Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important. I am going to ask you questions about your family and other household members. We would then like to ask a different set of questions to female members of this household who are between the ages of 15 and 49. At this time, do you want to ask me anything about the survey?			
M	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 P if No
N	Interviewer's name PLEASE RECORD YOUR NAME AS A WITNESS TO THE CONSENT PROCESS.	GATHER SIGNATURE:	
O	Respondent's first name. PLEASE RECORD THE FIRST NAME OF THE RESPONDENT.		

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old or persons who slept in the house it?	No 0	
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Section 2 – Household Characteristics				
Now I would like to ask you a few questions about the characteristics of your household.				
10	Does your household have:		<u>Yes</u>	<u>No</u>
	Electricity?		1	0
	A wall clock?		1	0
	A radio?		1	0
	A black/white television?		1	0
	A color television?		1	0
	A mobile phone?		1	0
	A landline telephone?		1	0
	A refrigerator?		1	0
	A freezer?		1	0
	Electric generator/invertor(s)?		1	0
	A washing machine?		1	0
	A computer?		1	0
	A digital photo camera?		1	0
	A non digital photo camera?		1	0
	A video deck?		1	0
	A DVD/CD?		1	0
	A sewing machine?		1	0
	A bed?		1	0
	A table?		1	0
	A cabinet/cupboard?		1	0
	A bicycle?		1	0
	A motorcycle or motor scooter?		1	0
A car or truck?		1	0	
A boat with a motor?		1	0	
A boat without a motor?		1	0	
None of the above		-77		
No response		-99		
READ OUT ALL TYPES AND SELECT ALL THAT APPLY.				
11	Are livestock kept on the homestead?	Yes.....	1	Skip to 13 if No
		No	0	
12	For each livestock, how many livestock are kept on the homestead? How many are owned?			
	Sheep / goats / pig on homestead	_____		
	Sheep / goats / pig owned	_____		
	Chicken / ducks / geese on homestead	_____		
	Chicken / ducks / geese owned	_____		
	Cattle / horses / donkeys / camels on homestead	_____		
	Cattle / horses / donkeys / camels owned	_____		
ZERO IS A POSSIBLE ANSWER. ENTER -88 FOR DO NOT KNOW. ENTER -99 FOR NO RESPONSE.				
Section 3 – Household Observation				
Please observe the floors, roof and exterior walls.				
13	Main material of the floor			
	OBSERVE	Natural Floor		
		Earth/Sand	11	
		Dung	12	
		Rudimentary Floor		
		Wood Planks	21	
		Palm/Bamboo	22	
		Finished Floor		
		Parquet or polished wood	31	
		Vinyl/Asphalt strips	32	

		Ceramic Tile/Terazzo..... 33 Cement 34 Woolen Carpet/Synthetic Carpet 35 Linoleum/rubber carpet..... 36 Other..... 96 No response.....-99					
14	Main material of the roof OBSERVE	Natural Roof No Roof..... 11 Thatch/Palm Leaf/ Sod 12 Rudimentary Roofing Rustic Mat..... 21 Palm/Bamboo 22 Wood Planks..... 23 Cardboard..... 24 Finished Roofing Metal 31 Wood 32 Calamine/Cement Fiber..... 33 Ceramic Tiles/Brick Tiles 34 Cement 35 Roof Shingles 36 Asbestos/Slate Roofing Sheets 37 Other..... 96 No response.....-99					
15	Main material of the exterior walls OBSERVE	Natural Walls No Walls 11 Cane/Palm/Trunks 12 Rudimentary Walls Bamboo with Mud 21 Stone with Mud 22 Uncovered Adobe 23 Plywood 24 Cardboard..... 25 Reused Wood 26 Finished Walls Cement 31 Stone with Lime/Cement..... 32 Bricks 33 Cement Blocks..... 34 Covered Adobe..... 35 Wood Planks/Shingles..... 36 Other..... 96 No response.....-99					
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?	Yes..... 1 No 0 Don't know -88 No response -99	Skip to 19 if No				
17	Can you show it to me?	Yes..... 1 No 0	Skip to 19 if No				
18	AT THE PLACE WHERE THE HOUSEHOLD WASHES THEIR HANDS, OBSERVE IF: Soap is present.....		<table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th style="width: 50%;"><u>Yes</u></th> <th style="width: 50%;"><u>No</u></th> </tr> </thead> <tbody> <tr> <td>1</td> <td>0</td> </tr> </tbody> </table>	<u>Yes</u>	<u>No</u>	1	0
<u>Yes</u>	<u>No</u>						
1	0						

	<p>MAIN SOURCE. MUST BE A SELECTION IN HQ19.</p> <p>Piped Water</p> <p>Piped into dwelling/indoor 1</p> <p>Pipe to yard/plot 2</p> <p>Public tap/standpipe 3</p> <p>Tube well or borehole 4</p> <p>Dug Well 5</p> <p>Protected Well 6</p> <p>Unprotected Well 6</p> <p>Water from Spring 7</p> <p>Protected Spring 8</p> <p>Unprotected Spring 9</p> <p>Rainwater 10</p> <p>Tanker Truck 11</p> <p>Cart with Small Tank 11</p> <p>Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) 12</p> <p>Bottled Water 14</p> <p>Sachet Water -99</p> <p>No response -99</p>			
22	<p>QUESTIONS HQ22 TO HQ25 WILL REPEAT X TIMES, ONCE FOR EACH WATER SOURCE SELECTED IN HQ19. THESE SOURCES INCLUDE:</p> <p><i>The ODK software will list all sources selected in HQ19</i></p> <p>You mentioned you used [WATER SOURCE]. At any time of the year, does your family use water from this source for:</p> <p>Drinking 1 0</p> <p>Cooking 1 0</p> <p>Livestock 1 0</p> <p>Gardening / agriculture 1 0</p> <p>Business venture 1 0</p> <p>No response -99 0</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>		Yes	No
23	<p>Is [WATER SOURCE] typically available:</p> <p>All of the year 1</p> <p>Some of the year 2</p> <p>Small part of the year 3</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>			
24	<p>At a time when you expect to have water from [WATER SOURCE], is it usually available?</p> <p>Yes, always 1</p> <p>No, intermittent and predictable 2</p> <p>No, intermittent and unpredictable 3</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>			

25	<p>How many minutes does it take to make a one-way trip to [WATER SOURCE]?</p> <p>ZERO IS A POSSIBLE ANSWER. INCLUDES WAITING TIME IN LINE. ENTER -88 FOR DO NOT KNOW, -99 FOR NO RESPONSE.</p> <p><i>The same question will be generated by the ODK software for all water sources selected in HQ19</i></p>	Minutes		
26	Does your family have a garden?	Yes..... 1 No 0 No response.....-99		
27	<p>Do members of your household use any of the following toilet facilities?</p> <p>READ OUT ALL TYPES AND CHECK ALL THAT ARE USED. SCROLL TO BOTTOM TO SEE ALL CHOICES.</p> <p>Flush/pour flush toilets connected to:</p> <p> Piped sewer system.....</p> <p> Septic tank</p> <p> Elsewhere</p> <p> Unknown / Not sure / Don't know</p> <p>Ventilated improved pit latrine</p> <p>Pit latrine with slab</p> <p>Pit latrine without slab</p> <p>Composting toilet</p> <p>Bucket toilet</p> <p>Hanging toilet /Hanging latrine.....</p> <p>Other (please explain):</p> <p>No facility / bush / field.....</p> <p>No response.....</p>		<p><u>Yes</u></p> <p>1 1 1 1 1 1 1 1 1 1 1 1 1 -99</p>	<p><u>No</u></p> <p>0 0 0 0 0 0 0 0 0 0 0 0 0</p>
28	<p>What is the main toilet facility used by members of your household?</p> <p>READ OUT ALL TYPES AND CHECK THE MAIN FACILITY. MUST BE SELECTED IN HQ27.</p> <p>Flush/pour flush toilets connected to:</p> <p> Piped sewer system.....</p> <p> Septic tank</p> <p> Elsewhere</p> <p> Unknown / Not sure / Don't know</p> <p>Ventilated improved pit latrine</p> <p>Pit latrine with slab</p> <p>Pit latrine without slab</p> <p>Composting toilet</p> <p>Bucket toilet</p> <p>Hanging toilet /Hanging latrine.....</p> <p>Other:.....</p> <p>No facility/bush/field</p> <p>No response</p>			<p>1 2 3 4 5 6 7 8 9 10 11 12 -99</p>
29	QUESTIONS HQ29-29c WILL REPEAT X TIMES, ONCE FOR EACH SANITATION FACILITY SELECTED IN HQ27. THESE			

	<p>FACILITIES INCLUDE:</p> <p><i>The ODK software will list all sources selected in HQ27</i></p> <p>How often does your family typically use [TOILET FACILITY TYPE]?</p> <p>REGULAR PRACTICES AT THE HOUSEHOLD ONLY</p> <p><i>The same question will be generated by the ODK software for all toilet facility types selected in HQ27</i></p>																																				
29b	Do you share this toilet facility with other households or the public? [Select one]	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																																	
29c	Enter the number of households that share the main toilet facility. MUST BE BETWEEN 0 AND 10. IF 10 OR GREATER, SWIPE BACK TO HQ29b AND CHOOSE "SHARED WITH TEN OR MORE HOUSEHOLDS". ENTER -99 FOR NO RESPONSE.	_____																																			
30	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. ENTER -99 FOR NO RESPONSE.	Number of people																																			
31	For all children under age five: what methods, if any, does your household use to dispose of children's waste? DO NOT READ THE POSSIBLE RESPONSES OUT LOUD. Children use a latrine / toilet Leave waste where it is Bury waste in field / yard..... Dispose of waste in latrine / toilet Dispose of waste with rubbish / garbage Dispose of waste with waste water Use it as manure..... Burn it Don't know No response <i>The ODK software will only ask this question to households that listed children under 5 in the household roster (HQ3)</i>		<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>Children use a latrine / toilet 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Leave waste where it is 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Bury waste in field / yard..... 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Dispose of waste in latrine / toilet 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Dispose of waste with rubbish / garbage 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Dispose of waste with waste water 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Use it as manure..... 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Burn it 1</td> <td>1</td> <td>0</td> </tr> <tr> <td>Don't know -88</td> <td>-88</td> <td></td> </tr> <tr> <td>No response -99</td> <td>-99</td> <td></td> </tr> </tbody> </table>		Yes	No	Children use a latrine / toilet 1	1	0	Leave waste where it is 1	1	0	Bury waste in field / yard..... 1	1	0	Dispose of waste in latrine / toilet 1	1	0	Dispose of waste with rubbish / garbage 1	1	0	Dispose of waste with waste water 1	1	0	Use it as manure..... 1	1	0	Burn it 1	1	0	Don't know -88	-88		No response -99	-99		
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Thank the respondent for his/her time. THE RESPONDENT IS FINISHED, BUT THERE ARE STILL TWO MORE QUESTIONS FOR YOU TO COMPLETE OUTSIDE THE HOME.																																					

LOCATION AND QUESTIONNAIRE RESULT			
P	Take a GPS point outside near the entrance to the household. Record location when the accuracy is smaller than 6m. GPS COORDINATES CAN ONLY BE COLLECTED WHEN OUTSIDE.	<i>Instructions are given directly by the ODK software</i> RECORD LOCATION	
Qa	Ask permission to take a photo of the entrance of the house. Did you get consent to take the photo?	Yes..... 1 No 0	Skip to R if No
Qb	Ensure that no people are in the photo	<i>Instructions are given directly by the ODK software</i> TAKE PICTURE CHOOSE IMAGE	
R	Record the result of the Service Delivery Point Survey	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..... 9	