





## **SURVEY FORM**

Date:	/ Research Assistant ID: Kebele name:				
1 6					
<u>ı. Ger</u>	neral (ASK QUESTION G1, G2 and G3 before you start observation)				
1.1	Household ID:				
1.2	How many people live in the HH? (People who sleep and eat here every day. No visitors)				
1.3	How many children under 5 years old are in the family?				
1.4	What level of adjustion have you completed?				
1.4	What level of education have you completed?				
	☐ Primary School ☐ Secondary school ☐ Higher education ☐ No education				
	☐ No answer				
1.5	How much income (money) does your family generate per week on average?				
	birr				
1.6 Do you own any animals?					
	☐ Goat, how many?				
	☐ Cow, how many?				
	☐ Sheep, how many?				
	☐ Donkey, how many?				
	☐ Chicken, how many?				
	☐ Camel, how many?				
	☐ No animals				
2	LIFE IN MOYALE				
2.1	How long have you lived in this location				
	Months <b>or</b> years				
2.2	If the household are IDPs, what was the reason for displacement?  □ Drought □ Job opportunity □ Conflict □ Illness □ Other:				







2.3	What is your religion?				
2.4	Have you attended any events run by humanitarian organisations in the last 3 months where they talked about hygiene?				
	☐ Yes	□ No			
3	Water				
3.1	How much water do you collect for the whole family per day?				
	☐ 20 litres ☐ 40 litres ☐ 60 litres ☐ 80 litres ☐ 100 litres ☐ 120 litres ☐ 140 litres ☐ More than 14	40 litres			
3.2	Is the water eno  ☐ Yes ☐ No	ugh for your family?			
3.3		in water source?			
	☐ Rainwater (☐ Water truck☐ Cart with sr	r borehole vell (covered) d well covered cistern/tank) uncovered cistern/tank) c nall tank ter (river, dam, lake, pond, stream, canal, irrigation channel) achet water			
3.4	How many minu queuing in the to	tes does it take for you to go fetch water at this source and come back? Include otal time.			
	minute	s and Hours			







## 4 Sanitation/waste

4.1	Where do you defecat	te?			
	☐ Pit latrine with cor ☐ Pit latrine without ☐ Bucket ☐ Bag ☐ Open defecation ( ☐ Other:	no facilities)			
4.2	How many people ir	n total use your latrine?			
5	Hygiene				
5.1	Do you have enough soap for all members of the family?				
	☐ Yes	□ No			
5.2	Is soap affordable for you?				
	☐ Yes	□ No			
5.3	Can you list some of the advantages of handwashing with soap?				
6	Spot checks				
6.1	Check if the following items were available (ask to see them)				
	☐ Liquid Soap	☐ Green (nice) bar soap	☐ Mirror above handwashing stand		
	☐ Bar soap	☐ Laundry soap	☐ Handwashing facility		
6.2	Where was the soap kept (e.g. inside house, at handwashing facility or in kitchen ++)				
Only	answer 6.3 and 6.4 if th	nere is a handwashing facility prese	<u>ent</u>		
6.3	Was there water in the handwashing facility? (Say yes if there was water in facility during observation)				
	□ Yes	□ No			
6.4	Did the household build a handwashing stand for the facility?				
	☐ Yes	□ No			