

English version questionnaire

Kebele: _____ Household ID _____

Name of Data Collector: _____ Signature _____ Date: _____

Part I: Socio-Economic and demographic characteristics

| S. No | Variable | Response | Skip |
|-------|---------------------------------------|---|------|
| 101 | Head of the household | 1. Male 2. Female | |
| 102 | Age of respondent: | _____ | |
| 103 | Sex of Respondent | 1. Male 2. Female | |
| 104 | Ethnicity of the respondent | 1. Oromo 2. Amhara 3. Harari 4. Gurage 5. Other specify _____ | |
| 105 | Religion of the respondent | 1. Muslim 2. Orthodox 3. Protestant 4. Other specify _____ | |
| 106 | Educational level respondent | 1. Unable to read and write 2. Able to read and write 3. Grade 1-8 4. Grade 9-12 5. College and above | |
| 107 | Current Marital status of respondents | 1. Single 2. Married 3. Divorced 4. Widowed 5. Others (specify) _____ | |

| | | | |
|-----|--|--|--|
| 108 | Occupation of respondents | 1. Merchant 2. Government employee 3. Daily laborer 4. Unemployed /not working/pensioned 5. Other specify_____ | |
| 109 | Number of individuals in the household | _____ | |
| 110 | Place of Residence | 1. Rural 2. Urban | |

Part II: Types of water source

| | | | |
|-----|--|---|--------------------|
| 201 | What is the immediate water source that is used by the household | 1. Piped water into dwelling 2. Piped water to yard 3. Public tap 4. Protected well 5. Protected spring 6. Other specify _____ | If 1 or 2, to Q204 |
| 202 | How long does it take to go there, get water and come back? | _____ in minutes | |
| 203 | Who usually goes to this source to fetch the water for your household? | 3. Adult woman 4. Adult man 5. Female child (under 15 years) 6. Male child (under 15 years) | |
| 204 | On average what is the per capita consumption of water for all purposes per day? | _____ liters | |
| 205 | Do you pay for water? | 1. Yes 2. No | |

Part III. Household water storage and handling

| | | | |
|-----|--|---|----------------|
| 301 | How frequent do you collect water? | <ol style="list-style-type: none"> 1. Every day 2. Every other day 3. Every 3 days 4. Every week 5. Others specify _____ | |
| 302 | For how long do you store drinking water | _____Days | |
| 303 | Type of water storage container | <ol style="list-style-type: none"> 1. Jerican 2. Bucket 3. Other specify _____ | |
| 304 | Does it have a cover (Observe) | <ol style="list-style-type: none"> 3. Yes 4. No | |
| 305 | Do you wash your storage container regularly | <ol style="list-style-type: none"> 1. Yes 2. No | If 2, to Q 307 |
| 306 | How frequently do you wash the storage container | <ol style="list-style-type: none"> 1. Daily ____ 2. Every 3 days 3. Weekly 4. Every 15 days 5. Never | |
| 307 | What method do you use to withdraw water from container | <ol style="list-style-type: none"> 1. Pouring 2. Dipping | If 1, to Q 309 |
| 308 | If Dipping does the utensil used to draw water from the container has a handle | <ol style="list-style-type: none"> 1. Yes 2. No | |
| 309 | Does the storage containers accessible to children | <ol style="list-style-type: none"> 1. Yes 2. No | |
| 310 | Where do you regularly place cups used for drinking | <ol style="list-style-type: none"> 1. On the floor 2. Place prepared for it 3. On the water container 4. Other specify _____ | |

Part IV: Housing and Sanitation facilities

| | | | |
|-----|---|---|----------------|
| 401 | What kind of toilet facility do members of your household usually use | <ol style="list-style-type: none"> 1. Pour flush 2. Ventilated improved pit latrine (VIP) 3. Pit latrine 4. No facilities or bush or field 5. Others specify _____ | |
| 402 | Do you share this facility with other households? | <ol style="list-style-type: none"> 1. Yes 2. No | If 2, to Q 404 |
| 403 | How many other households share this toilet? | _____ household | |
| 404 | Where do you dispose child feces? | <ol style="list-style-type: none"> 1. Child use latrine 2. Put/rinsed in to the latrine 3. Left open 4. Throw into the garbage 5. Other specify _____ | |
| 405 | Where the households usually dispose the solid waste? | <ol style="list-style-type: none"> 1. Open space 2. Dump in waste pit 3. Burning 4. Composting 5. Others specify _____ | |
| 406 | Where the households usually dispose the liquid waste? | <ol style="list-style-type: none"> 1. Soak pit 2. Latrine 3. Flash away 4. Others specify _____ | |
| 407 | Do animals share the house? | <ol style="list-style-type: none"> 1. Yes 2. No | |

Part V- Hygienic Practice

| | | | |
|-----|---|---|----------------|
| 501 | Do you wash your hands before water collection? | <ol style="list-style-type: none"> 1. Yes 2. No | If 2, to Q 503 |
| 502 | Do you wash your hand after visiting a toilet? | <ol style="list-style-type: none"> 1. Yes 2. No | If 2, to Q 505 |

| | | | |
|-----|--|---------------------------------|----------------|
| 503 | If yes to Q502 do you use a soap to wash your hands? | 1. Yes 2. No | |
| 504 | Do you wash your hand after cleaning a child | 1. Yes 2. No | If 2, to Q 507 |
| 505 | If yes to Q504 do you use a soap to wash your hands? | 1. Yes 2. No | |
| 506 | Do you wash your hands before feeding children? | 1. Yes 2. Sometimes 3. No | If 3, to 508 |
| 507 | If yes to Q506 do you use a soap to wash your hands? | 1. Yes 2. No | |
| 508 | Is there a place for washing hands? (observe) | 3. Yes 4. No | If 2, to Q601 |
| 509 | Is the water available? (observe) | 1. Yes 2. No | |
| 510 | Is there any soap or cleansing agent like ash? (observe) | 1. Yes 2. No | |

Part VI: Household water treatment

| | | | |
|-----|--|--|--|
| 601 | Does the family/household use any water treatment? | 1. Yes 2. No | |
| 602 | If Yes to above question , which method | 1. Add bleach/ chlorine 2. Strain it through a cloth 3. Let it stand and settle 4. Boiling 5. Others specify _____ | |

Part VII: Knowledge on the causes of drinking water contamination

| | | | |
|-----|---|---|--|
| 701 | Where do you think drinking water contamination occurs? | 1. At source 2. In household 3. Both 4. Others specify | |
| 702 | Do you think cleansing water collection and storage material prevent water contamination? | 1. Yes 2. No | |
| 703 | Do you think washing hands before water collection can prevent water contamination? | 1. Yes 2. No | |
| 704 | Do you think washing hands after defecation can prevent water contamination? | 1. Yes 2. No | |
| 705 | Do you think proper utilization of latrine can prevent water contamination? | 1. Yes 2. No | |
| 706 | Do you think treating water in household can prevent water contamination? | 1. Yes 2. No | |
| 707 | Do you receive WASH education in the last months | 1. Yes 2. No | |

Part VIII: Questions to assess the current family wealth (Economic condition)

Could you tell me if you have the following in your house?

| Asset type | Response | |
|-------------------------|----------|---------|
| Domestic animals | | |
| Ox | No (0) | Yes (1) |
| Cow | No (0) | Yes (1) |
| Calf | No (0) | Yes (1) |
| Sheep | No (0) | Yes (1) |
| Goat | No (0) | Yes (1) |
| Horse | No (0) | Yes (1) |
| Donkey | No (0) | Yes (1) |
| Cock and Hen | No (0) | Yes (1) |

| | | |
|----------------------------------|--|--------------------------------------|
| Durable assets | | |
| Television | No (0) | Yes (1) |
| Radio | No (0) | Yes (1) |
| Electricity | No (0) | Yes (1) |
| Refrigerator | No (0) | Yes (1) |
| Conventional telephone | No (0) | Yes (1) |
| Mobile phone | No (0) | Yes (1) |
| Car | No (0) | Yes (1) |
| Motorcycle | No (0) | Yes (1) |
| Cycle | No (0) | Yes (1) |
| Cart | No (0) | Yes (1) |
| Gold, money | No (0) | Yes (1) |
| Ownership of owned living house | No (0) | Yes (1) |
| Ownership of agricultural land | No (0) | Yes (1) |
| Productive assets | | |
| Plough plow | No (0) | Yes (1) |
| Axe | No (0) | Yes (1) |
| Hoe | No (0) | Yes (1) |
| Shovel | No (0) | Yes (1) |
| Sickle | No (0) | Yes (1) |
| Modern beehive | No (0) | Yes (1) |
| Traditional beehive | No (0) | Yes (1) |
| Housing characteristics | | |
| Indoor plumbing/ pipe water | No (0) | Yes (1) |
| Type of flooring | Earth/dung (0) | Cement/raw wood (1) |
| Toilet facility | Unsanitary or traditional pit latrine/ no toilet (0) | Sanitary or improved pit latrine (1) |
| Other household materials | | |
| Sofa | No (0) | Yes (1) |
| Bed | No (0) | Yes (1) |
| Table | No (0) | Yes (1) |
| Chair | No (0) | Yes (1) |

| | | |
|-------|--------|---------|
| Stove | No (0) | Yes (1) |
|-------|--------|---------|

Part IX: Household (Point of use) Water Sample Collection

| | |
|-------------------------|----------------------|
| Household ID _____ | Date collected _____ |
| Name of Kebele _____ | Time collected _____ |
| Village Name _____ | |
| Water source name _____ | |
| Water sample code _____ | |

Name of data collector _____ Signature _____

Part X: Water Sample Collection from Water Sources

| | |
|-------------------------|----------------------|
| Water Source Name _____ | Date collected _____ |
| Name of Kebele _____ | Time collected _____ |
| Village Name _____ | |
| Water sample code _____ | |

Name of Sample collector _____ Signature _____

Part XI: Laboratory result reporting format

| No. | Type of Test | Result | Remark |
|------------|----------------------------|---|---------------|
| 1. | Membrane Filtration | _____ Thermotolerant Coliform colonies/100ml | |

Name of laboratory investigator _____

Signature: _____

Date: _____