

PMA Burkina Faso Phase 1 Household Questionnaire

001a. Your ID: \${your_name} Is this your ID?	○ Yes○ No	
001b. Enter your ID below. Please record your ID		
002a. Current date and time.		Day: Month: Year:
Is this date and time correct?	⊖ Yes ⊖ No	
002b. Record the correct date and time.		Day: Month: Year:
003a. Region	 BOUCLE DU MOUHOUN CASCADES CENTRE CENTRE EST CENTRE NORD CENTRE OUEST CENTRE SUD EST HAUTS BASSINS NORD PLATEAU CENTRAL SAHEL SUD OUEST 	
003b. Province		
003c. Commune, village		
004. Enumeration area		
005. Structure number Please record the structure number from the household listing form.		
006. Household number Please record the household number from the household listing form.		





structure and household? O Yes O No DOB. CHURCATE ANY FORM UNLESS YOU ARE CORRECTING A MISTAKE IN AN EARLIER FORM. WARNING: Contact your supervisor before sending this form again. U There are new household members on this form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form I are correcting a mistake made on a previous form disappeared from my phone without being sent I submitted the previous form and my supervisor told me that it was not received I other reason(s) WARNINC: Each household should have ONLY ONE household roster with all household members listed on the same form. Please contact your supervisor before sending this form. OO9a. Is a member of the household and competent respondent present and available to be interviewed today? No No No NFORMED CONSENT Find the competent femate respondent. Administer the consent procedures. Hello. My name is a previous form the government to better plan health services. Wateven inform the government to better plan health services. Wateven inform the government to better plan health services. Whateven inform the government to better plan health services. We alse of use inform the government to better plan health services. Wateven inform the government to better plan health services. Wateven inform the government to better plan health services. We alse uniform the government to better plan health services. We aver inform the government to better plan health services. Wateven inform the government to better plan health services. Wateven inform the government to better plan health services. We aver inform the government to better plan health services. Wateven inform the government to better plan health services. We aver inform the government to better plan health servi		
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	At this time, do you want to ask me anything about the survey?	





010a. Provide a paper copy of the Consent Form to the respondent and read it. / Read the verbal consent text. Then, ask: May I begin the interview now?	○ Yes ○ No
010b. Respondent's signature Please ask the respondent to sign or check the box in agreement of their participation.	
Checkbox	0
WARNING: The respondent has not signed or checked the box, despite agreeing to be interviewed in the previous question. To conduct the survey, the respondent must sign or touch the checkbox. You may go back to obtain a signature or check the box or you should go back to the previous question to indicate the respondent does not want to be interviewed.	
010c. Interviewer's ID: \${your_name} Mark your ID as a witness to the consent process.	0
010c. Interviewer's ID Please record your ID as a witness to the consent process. You previously entered "\${name_typed}."	
Section 1 – Househo	old Roster

I am now going to ask a series of questions about each usual member of the household or anyone who slept in the house last night.

Household membe	er
101. Name of household member / visitor Start with the head of the household.	
101a. Is this person the respondent? If yes, check this box.	
102. What is \${firstname}'s relationship to the head of household?	 Head Wife/Husband Son/Daughter Son/Daughter-in-law Grandchild Parent Parent in law Brother/Sister House help Other Do not know No response



103. Is \${firstname} male or female?	○ Male○ Female
104. How old was \${firstname} at their last birthday? If less than one year old, record 0	
105. What is \${firstname}'s current marital status? If not married, probe to determine if they have ever been married and, if so, if they are divorced/separated, or widowed.	 Married Living with a partner Divorced / separated Widow / widower Never married No response
106. Does \${firstname} usually live here?	○ Yes○ No○ No response
107. Did \${firstname} stay here last night?	○ Yes○ No○ No response
ERROR: Members on household roster must usually ive here or must have stayed here last night. Go back and remove this household member.	
LCL_101. What is the religion of \${firstname}?	 Muslim Catholic Protestant Traditional Other No religion No response
LCL_102. What is the ethnicity of \${firstname}?	 BOBO DIOULA FULFULDE/ PEULH GOURMANTCHE GOUROUNSI LOBI MOSSI SENOUFO TOUAREG/ BELLA DAGARA BISSA West African Other African Other nationality





		Other No response
	This person IS NOT eligible for the female respondent questionnaire.	
	This person IS eligible for the female respondent questionnaire.	
	108. Are there any other usual members of your household or persons who slept in the house last night?	○ Yes ○ No
	There are other members of the household. Move forward and select "Add Group"	
	There are no other members of the household. Move forward and select "Do Not Add"	
Gc Fo	ROR: There is no household head. back, select a head. r each member, check that the relationship to the usehold head is accurate.	
\${ł Gc Fo	ROR: There are \${heads} household heads selected: head_name_joined} back, select only one head. r each member, check that the relationship to the usehold head is accurate.	
Th Wa Yo If t If t If t If t Int If t Int	a NO RESPONDENT ERROR. e checkbox for 101a (Is this person the respondent?) as never selected for any of the household members. u entered the following household members: names]. he respondent was entered in the roster but never ected as the respondent in 101a: Please go back and select e checkbox in 101a for the correct respondent. he respondent is a household member but left out of the of household members: Add the respondent to the list. he respondent is not a household member: Stop the erview. Find a household member and interview that rson. Be sure to ask for consent. a TOO MANY RESPONDENTS ERROR.	
wa Ple	e checkbox for 101a (Is this person the respondent?) is selected more than once. ease go back and make sure that it is only selected ce.	
\${r na ho	9. READ THIS CHECK OUT LOUD: There are num_HH_members} household members who are med \${names}. Is this a complete list of the usehold members? member to include all children in the household.	○ Yes ○ No
1		





Section 2 – Household Characteristics Now I would like to ask you a few questions about the characteristics of your household.	
201. Please tell me about items that your household owns. Does your household have: <i>Read out all types and select all that apply. Scroll to bottom to see all choices.</i> If an item is reported broken but said to be out of use only temporarily, select the item. Otherwise, do not select the item.	 Electricity? A radio? A television? A mobile phone? A mobile phone? A mobile phone? A landline telephone? A refrigerator? A TV Antenna? A cabel subscription? A cabel subscription? A cabel subscription? A dags or electric stove? A n improved stove? A n improved stove? A DVD/CD? An air conditioner? A computer? Home internet? A wall clock? Charruees ? A bicycle? A motorcycle or motor scooter? A canoe or fishing nets? A car or truck? A boat with a motor? None of the above No response
Check here to acknowledge you considered all options.	0
other farm animals, or poultry? These livestock can be kept anywhere, not necessarily on the	 Yes No No response
202b. How many of the following animals does this household own? The household can keep the livestock anywhere, but must own the livestock recorded here.	



Zero is a possible answer. Enter -88 for do not know. Enter -99 for no response.	
Pigs	
Cows or bulls	
Horses, donkeys or mules	
Goats	
Sheep	
Chickens	
Other	
Section 3 – Household	Observation
Please observe the floors, roof a	nd exterior walls.
301. Main material of the floor <i>Observe</i> .	 Earth / sand Cow dung Wooden boards Palm / bamboo Parquet or polished wood Tapes vinyl / asphalt Tiles Cement Carpet Other No answer
302. Main material of the roof <i>Observe</i> .	 No roof Thatch / palm Earth mottes Mats Palm / bamboo Wooden boards Cardboard Sheet metal Wood Zinc / fiber cement Tile Cement Shingles Other No answer
303. Main material of the exterior walls <i>Observe</i> .	 ○ No wall ○ Bamboo / cane / palm / trunk ○ Earth





🔘 Bamboo with mud
\bigcirc Stones with mud
\bigcirc Adobe not covered
○ Cardboard
○ Recovered wood
○ Cement
○ Stones with lime / cement
⊖ Bricks
O Cement blocks
O Covered adobe
\bigcirc Wood board / shingles
Other
○ No answer

Section 4 – Water Sanitation and Hygiene

Now I would like to ask you a few questions about water, sanitation and hygiene.

403. What is the main source of drinking water for members of your household?	 Piped Water: Piped into dwelling/indoor Piped Water: Pipe to yard/plot Piped Water: Public tap/standpipe Tube well or borehole Dug Well: Protected Well Dug Well: Unprotected Well Water from Spring: Protected Spring Water from Spring: Unprotected Spring Rainwater Tanker Truck Cart with Small Tank Surface water (River / Dam / Lake / Pond / Stream / Canal / Irrigation Channel) Bottled Water Sachet Water No response
410. What is the main toilet facility used by members of your household?	 Flush/pour flush toilets connected to: Piped sewer system Flush/pour flush toilets connected to: Septic tank Flush/pour flush toilets connected to: Pit Latrine Flush/pour flush toilets connected to: Elsewhere Flush/pour flush toilets connected





	to: Unknown / Not sure / Do not know Ventilated improved pit latrine Pit latrine with slab Pit latrine without slab / open pit Composting toilet Bucket Hanging toilet /Hanging latrine Other No facility / bush / field No response
Thank the respondent for his/her time. The respondent is finished, but there is still more for you to complete outside the home.	
Location and Question	naire result
096. Location Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6 m.	
097. How many times have you visited this household?	 ○ 1st time ○ 2nd time ○ 3rd time
098. In what language was this interview conducted?	 English French Moore Goumantchema Fulfulde Dioula Autre
099. Questionnaire Result Record the result of the questionnaire.	 Completed No household member at home or no competent respondent at home at time of visit Postponed Refused Partly completed Dwelling vacant or address not a dwelling Dwelling destroyed Dwelling not found Entire household absent for extended period