

**HOUSEHOLD INFORMATION PANEL** **HH**

<b>HH1. Cluster number:</b> _____		<b>HH2. Household number:</b> _____	
<b>HH3. Interviewer's name and number:</b> NAME _____		<b>HH4. Supervisor's name and number:</b> NAME _____	
<b>HH5. Day / Month / Year of interview:</b> _____ / _____ / <u>2 0 1</u> _____		<b>HH7. Island Division:</b> TONGATAPU..... 1 VAVA'U..... 2 HA'APAI..... 3 'EUA..... 4 ONGO NIUA..... 5	
<b>HH6. Area:</b>	URBAN..... 1 RURAL..... 2		
<b>HH8. Is the household selected for Questionnaire for Men?</b>	YES..... 1 NO..... 2		
<b>HH9. Is the household selected for Water Quality Testing?</b>	YES..... 1 NO..... 2	<b>HH10. Is the household selected for blank testing?</b>	YES.....1 NO.....2

<p><i>Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.</i></p>	<b>HH11. Record the time.</b>
	HOURS : MINUTES ____ : ____

**HH12.** Hello, my name is (**your name**). We are from Tonga Statistics Department Office. We are conducting a survey about the situation of children, families and households. I would like to talk to you about these subjects. This interview usually takes about 40 minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or stop the interview, please let me know. May I start now?

YES.....1	1 ⇨ LIST OF HOUSEHOLD MEMBERS
NO / NOT ASKED.....2	2 ⇨ HH46

<b>HH46. Result of Household Questionnaire interview:</b>  <i>Discuss any result not completed with Supervisor.</i>	COMPLETED..... 01 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT..... 02 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME..... 03 REFUSED..... 04 DWELLING VACANT OR ADDRESS NOT A DWELLING..... 05 DWELLING DESTROYED..... 06 DWELLING NOT FOUND..... 07  OTHER (specify) _____ 96
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<b>HH47. Name and line number of the respondent to Household Questionnaire interview:</b>
NAME _____
HOUSEHOLD MEMBERS
WOMEN AGE 15-49
<i>If household is selected for Questionnaire for Men:</i> MEN AGE 15-49
CHILDREN UNDER AGE 5
CHILDREN AGE 5-17

<i>To be filled after the Household Questionnaire is completed</i>	
TOTAL NUMBER	
<b>HH48</b>	___
<b>HH49</b>	___
<b>HH50</b>	___
<b>HH51</b>	___
<b>HH52</b>	___

<i>To be filled after all the questionnaires are completed</i>	
COMPLETED NUMBER	
<b>HH53</b>	___
<b>HH54</b>	___
<b>HH55</b>	___
<b>HH56</b>	ZERO ..... 0 ONE ..... 1

First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, make sure to probe for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as servants, friends) but who usually live in the household. Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box:

HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household.  Probe for additional household members.	HL3. What is the relationship of (name) to (name of the head of household)?	HL4. Is (name) male or female?  1 MALE 2 FEMALE	HL5. What is (name)'s date of birth?	HL6. How old is (name)?  Record in complete d years.  If age is 95 or above, record '95'.	HL8. Record line number if woman and age 15-49.	HL9. Record line number if man, age 15-49 and HH8 is yes.	HL10. Record line number if age 0-4.	HL11. Age 0-17?	HL12. Is (name)'s natural mother alive?	HL13. Does (name)'s natural mother live in this household?	HL14. Record the line number of mother and go to HL16.	HL15. Where does (name)'s natural mother live?	HL16. Is (name)'s natural father alive?	HL17. Does (name)'s natural father live in this household?	HL18. Record the line number of father and go to HL20.	HL19. Where does (name)'s natural father live?	HL20. Copy the line number of mother from HL14. If blank, ask:  Who is the primary caretaker of (name)?  If 'No one' for a child age 15-17, record '90'.
LINE	NAME	RELATION *	M F	MONTH	YEAR	AGE	W 15-49	M 15-49	0-4	Y N	Y N DK	Y N	MOTHER	Y N DK	Y N	FATHER		
01		0 1	1 2	___	_____	___	01	01	01	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
02		___	1 2	___	_____	___	02	02	02	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
03		___	1 2	___	_____	___	03	03	03	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
04		___	1 2	___	_____	___	04	04	04	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
05		___	1 2	___	_____	___	05	05	05	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
06		___	1 2	___	_____	___	06	06	06	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
07		___	1 2	___	_____	___	07	07	07	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
08		___	1 2	___	_____	___	08	08	08	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
09		___	1 2	___	_____	___	09	09	09	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
10		___	1 2	___	_____	___	10	10	10	1 2	1 2 8	1 2	___	1 2 8	1 2	___	1 2 3 4 8	___
		01 HEAD 02 SPOUSE / PARTNER 03 SON / DAUGHTER 04 SON-IN-LAW / DAUGHTER-IN-LAW			05 GRANDCHILD 06 PARENT 07 PARENT-IN-LAW 08 BROTHER / SISTER			09 BROTHER-IN-LAW / SISTER-IN-LAW 10 UNCLE/AUNT 11 NIECE / NEPHEW 12 OTHER RELATIVE			13 ADOPTED / FOSTER 14 SERVANT (LIVE-IN) 15 CHILD OF SPOUSE/STEPCHILD 96 OTHER (NOT RELATED) 98 DK							

EDUCATION 1											ED										
ED1. Line number	ED2. Name and age.  Copy names and ages of <u>all</u> members of the household from HL2 and HL6 to below <u>and</u> to next page of the module.		ED3. Age 3 or above?  1 YES 2 NO ☺ <i>Next Line</i>		ED4. Has ( <i>name</i> ) ever attended school or any Early Childhood Education programme?  1 YES 2 NO ☺ <i>Next Line</i>		ED5. What is the highest level and class, form or year of school ( <i>name</i> ) has ever <u>attended</u> ?  LEVEL: 0 ECE ☺ <i>ED7</i> 1 PRIMARY 2 LOWER SECONDARY 3 UPPER SECONDARY 4 TECHNICAL AND VOCATIONAL 5 TERTIARY / UNIVERITY 8 DK				ED6. Did ( <i>name</i> ) ever <u>complete</u> that (class/form/year)?  1 YES 2 NO 8 DK			ED7. Age 3-24?  1 YES 2 NO ☺ <i>Next Line</i>		ED8. Check ED4: Ever attended school or ECE?  1 YES 2 NO ☺ <i>Next Line</i>					
LINE	NAME	AGE	YES	NO	YES	NO	LEVEL				CLASS/YEAR	Y	N	DK	YES	NO	YES	NO			
01		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
02		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
03		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
04		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
05		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
06		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
07		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
08		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
09		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2
10		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2

EDUCATION 2												ED
ED1. Line number	ED2. Name and age.		ED9. At any time during the 2019 school year did ( <i>name</i> ) attend school or any Early Childhood Education programme?	ED10. During 2019 school year, which level and class, form or year is ( <i>name</i> ) attending?		ED11. Is (he/she) attending a public school?	ED12. In the 2019 school year, has ( <i>name</i> ) received any school tuition support?	ED13. Who provided the tuition support?	ED14. For the 2019 school year, has ( <i>name</i> ) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies?	ED15. At any time during the 2018 school year did ( <i>name</i> ) attend school or any Early Childhood Education programme?	ED16. During 2018 school year, which level and grade or year did ( <i>name</i> ) attend?	
			1 YES 2 NO ☹ ED15	LEVEL: 0 ECE ☹ ED15 1 PRIMARY 2 LOWER SEC. 3 UPPER SEC. 4 TECHNICAL/ VOCATIONAL 5 TERTIARY/ UNIVERSITY 8 DK	CLASS/FORM/ YEAR: 98 DK	If "Yes", record '1'. If "No", probe to code who controls and manages the school. 1 GOVT./PUBLIC 2 RELIGIOUS/FAITH ORG./CHURCH 3 PRIVATE 6 OTHER 8 DK	If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.  1 YES 2 NO ☹  8 DK ☹ ED14 ED14	Record all mentioned.  A GOVT./PUBLIC B RELIGIOUS/FAITH ORG. D KALAPU E EX-STUDENT F COMMUNITY X OTHER Z DK	If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.  1 YES 2 NO 8 DK	1 YES 2 NO ☹ 8 DK ☹ Next Line Next Line	LEVEL: 0 ECE ☹ Next Line 1 PRIMARY 2 LOWER SEC. 3 UPPER SEC. 4 TECHNICAL/ VOCATIONAL 5 TERTIARY/ UNIVERSITY 8 DK	CLASS/FORM/ YEAR: 98 DK
LINE	NAME	AGE	YES NO	LEVEL	CLASS/YEAR	AUTHORITY	YES NO DK	TUITION	YES NO DK	YES NO DK	LEVEL	CLASS/YEAR
01		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
02		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
03		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
04		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
05		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
06		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
07		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
08		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
09		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___
10		___	1 2	0123458	___	1 2 3 6 8	1 2 8	A B D E F X Z	1 2 8	1 2 8	0123458	___

**HOUSEHOLD CHARACTERISTICS**

**HC**

<p><b>HC1A.</b> What is the religion of (<i>name of the head of the household from HL2</i>)?</p>	<p>FREE WESLEYAN CHURCH (FWC) ..... 01                  LATTER DAY SAINTS (LDS) ..... 02                  ROMAN CATHOLIC (RC) ..... 03                  FREE CHURCH OF TONGA (FCOT)..... 04                  CHURCH OF TONGA (COT) ..... 05                  ASSEMBLY OF GOD (AOG) ..... 06                  SEVENTH DAY ADVENTIST (SDA) ..... 07                  TOKAIKOLO/MAAMAFO'OU ..... 08                  CONSTITUTIONAL CHURCH                  OF TONGA (CCOT) ..... 09                  BAHAI FAITH..... 10                  ISLAM ..... 11                  HINDUISM ..... 12                  JEHOVAH WITNESS ..... 13</p> <p>OTHER RELIGION                  (<i>specify</i>) _____ 96</p> <p>NO RELIGION..... 97</p>	
<p><b>HC1B.</b> What is the mother tongue/native language of (<i>name of the head of the household from HL2</i>)?</p>	<p>TONGAN ..... 1                  ENGLISH..... 2                  CHINESE..... 3                  HINDI ..... 4                  FIJIAN ..... 5</p> <p>OTHER LANGUAGE                  (<i>specify</i>) _____ 6</p>	
<p><b>HC2.</b> To what ethnic group does (<i>name of the head of the household from HL2</i>) belong?</p>	<p>TONGAN ..... 01                  PART TONGAN ..... 02                  EUROPEAN..... 03                  FIJIAN ..... 04                  FIJI-INDIAN ..... 05                  CHINESE..... 06                  OTHER PACIFIC ISLANDER ..... 07                  OTHER ASIAN..... 08</p> <p>OTHER (<i>specify</i>) _____ 96</p>	
<p><b>HC3.</b> How many rooms do members of this household usually use for sleeping?</p>	<p>NUMBER OF ROOMS.....__ __</p>	

<p><b>HC4. Main material of the dwelling floor.</b></p> <p><i>Record observation.</i></p> <p><i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i></p>	<p><b>NATURAL FLOOR</b>  EARTH / SAND ..... 11</p> <p><b>RUDIMENTARY FLOOR</b>  WOOD PLANKS..... 21  PALM / BAMBOO ..... 22</p> <p><b>FINISHED FLOOR</b>  PARQUET OR POLISHED WOOD..... 31  CERAMIC TILES..... 33  CEMENT/CONCRETE/BRICKS..... 34  CARPET..... 35</p> <p>OTHER (<i>specify</i>) ..... 96</p>	
<p><b>HC5. Main material of the roof.</b></p> <p><i>Record observation.</i></p>	<p>NO ROOF ..... 11</p> <p><b>NATURAL ROOFING</b>  THATCH / PALM LEAF ..... 12</p> <p><b>RUDIMENTARY ROOFING</b>  WOOD PLANKS..... 23  CARDBOARD ..... 24</p> <p><b>FINISHED ROOFING</b>  METAL / TIN..... 31  WOOD ..... 32  CALAMINE / CEMENT FIBRE..... 33  CERAMIC TILES..... 34  CEMENT..... 35  ROOFING SHINGLES ..... 36</p> <p>OTHER (<i>specify</i>) ..... 96</p>	
<p><b>HC6. Main material of the exterior walls.</b></p> <p><i>Record observation.</i></p>	<p>NO WALLS ..... 11</p> <p><b>NATURAL WALLS</b>  CANE / PALM / TRUNKS ..... 12</p> <p><b>RUDIMENTARY WALLS</b>  PLYWOOD ..... 24  CARDBOARD ..... 25  REUSED WOOD..... 26  METAL/TIN..... 27</p> <p><b>FINISHED WALLS</b>  CEMENT..... 31  STONE WITH LIME / CEMENT ..... 32  BRICKS..... 33  CEMENT BLOCKS..... 34  WOOD PLANKS / SHINGLES ..... 36</p> <p>OTHER (<i>specify</i>) ..... 96</p>	

<p><b>HC7.</b> Does your household have: 'Oku ma'u he 'api ni ha:</p> <p>[A] A fixed telephone line?</p> <p>[B] A radio?</p> <p>[C] A sofa</p> <p>[D] A Bed</p> <p>[E] A Table</p> <p>[F] A Chair</p> <p>[G] A Cupboard or cabinet</p> <p>[H] A Water storage tank</p>	<p style="text-align: right;">YES NO</p> <p>FIXED TELEPHONE LINE ..... 1 2</p> <p>RADIO ..... 1 2</p> <p>SOFA ..... 1 2</p> <p>BED ..... 1 2</p> <p>TABLE..... 1 2</p> <p>CHAIR ..... 1 2</p> <p>CUPBOARD/CABINET..... 1 2</p> <p>WATER TANK..... 1 2</p>	
<p><b>HC8.</b> Does your household have electricity?</p>	<p>YES, INTERCONNECTED GRID..... 1</p> <p>YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM)..... 2</p> <p>NO ..... 3</p>	<p>3 ⇒ HC10</p>
<p><b>HC9.</b> Does your household have:</p> <p>[A] A television?</p> <p>[B] A refrigerator?</p> <p>[C] A freezer</p> <p>[D] A washing machine?</p> <p>[E] A DVD player?</p> <p>[F] A microwave?</p> <p>[G] An electric sewing machine?</p> <p>[H] An air conditioner?</p> <p>[I] A water heater?</p>	<p style="text-align: right;">YES NO</p> <p>TELEVISION..... 1 2</p> <p>REFRIGERATOR ..... 1 2</p> <p>FREEZER ..... 1 2</p> <p>WASHING MACHINE ..... 1 2</p> <p>DVD PLAYER..... 1 2</p> <p>MICROWAVE..... 1 2</p> <p>ELECTRIC SEWING MACHINE..... 1 2</p> <p>AIR CONDITIONER..... 1 2</p> <p>WATER HEATER..... 1 2</p>	

HC10. Does any member of your household own:	YES	NO
[A] A wristwatch?	WRISTWATCH .....1	2
[B] A bicycle?	BICYCLE.....1	2
[C] A motorcycle or scooter?	MOTORCYCLE / SCOOTER .....1	2
[D] Animal-Drawn Cart?	ANIMAL-DRAWN CART .....1	2
[E] A car, truck or van?	CAR / TRUCK / VAN .....1	2
[F] A boat with a motor?	BOAT WITH MOTOR .....1	2
[G] A generator?	GENERATOR .....1	2
[H] A solar panel?	SOLAR PANEL .....1	2
HC11. Does any member of your household have a computer or a tablet?	YES.....1 NO .....2	
HC12. Does any member of your household have a mobile telephone?	YES.....1 NO .....2	
HC13. Does your household have access to internet at home?	YES.....1 NO .....2	
<p>HC14. Do you or someone living in this household own this dwelling?</p> <p><i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i></p> <p><i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i></p>	OWN.....1 RENT .....2 OCCUPY FREE .....3  OTHER ( <i>specify</i> ) .....6	
HC15. Does any member of this household own any land that can be used for agriculture?	YES.....1 NO .....2	2⇒HC17
<p>HC16. How many acres of agricultural land do members of this household own?</p> <p><i>If less than 1, record '00'.</i></p>	ACRES..... ____ 95 OR MORE..... 95 DK ..... 98	
HC17. Does this household own any livestock, herds, other farm animals, or poultry?	YES.....1 NO .....2	2⇒HC19

<p><b>HC18.</b> How many of the following animals does this household have?</p> <p>[A] Milk cows or bulls?</p> <p>[B] Other cattle?</p> <p>[C] Horses/donkeys?</p> <p>[D] Goats?</p> <p>[E] Sheep?</p> <p>[F] Chickens?</p> <p>[G] Pigs?</p> <p>[H] Ducks</p> <p><i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i></p>	<p>MILK COWS OR BULLS .....__ __</p> <p>OTHER CATTLE.....__ __</p> <p>HORSES .....__ __</p> <p>GOATS .....__ __</p> <p>SHEEP .....__ __</p> <p>CHICKENS.....__ __</p> <p>PIGS.....__ __</p> <p>DUCKS .....__ __</p>	
<p><b>HC19.</b> Does any member of this household have a bank account?</p>	<p>YES..... 1</p> <p>NO ..... 2</p>	

**SOCIAL TRANSFERS**

**ST**

**ST1.** I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

	[A] AGED-CARE SERVICES FOR ELDERLY  POLOKALAMA TOKANGA'I KAU TOULEKELEKA	[B] DISABILITY WELFARE  POLOKALAMA TOKONI KI HE KAU FAINGATA'IA	[C] EARLY CHILDREN INTERVENTION SERVICES (0 – 4 YEARS OLD)  POLOKALAMA TOKONIA FANAU IIKI (0 – 4 YEARS OLD)	[D] ANY RETIREMENT PENSION  MA'U'ANGA VAHENGAL MALÖLÖ	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME  HA FA'AHINGA TOKONI MAKEHE PE MEI TU'A
<b>ST2.</b> Are you aware of ( <i>name of programme</i> )?	YES..... 1 NO ..... 2 ☺ [B]	YES ..... 1 NO ..... 2 ☺ [C]	YES..... 1 NO ..... 2 ☺ [D]	YES ..... 1 NO ..... 2 ☺ [X]	YES (specify) _____ 1 NO..... 2 ☺ End
<b>ST3.</b> Has your household or anyone in your household received assistance through ( <i>name of programme</i> )?	YES..... 1 ☺ ST4 NO ..... 2 ☺ [B] DK ..... 8 ☺ [B]	YES ..... 1 ☺ ST4 NO ..... 2 ☺ [C] DK ..... 8 ☺ [C]	YES..... 1 ☺ ST4 NO ..... 2 ☺ [D] DK ..... 8 ☺ [D]	YES ..... 1 ☺ ST4 NO ..... 2 ☺ [X] DK ..... 8 ☺ [X]	YES ..... 1 ☺ ST4 NO ..... 2 ☺ End DK ..... 8 ☺ End
<b>ST4.</b> When was the <u>last time</u> your household or anyone in your household received assistance through ( <i>name of programme</i> )?  <i>If less than one month, record '1' and record '00' in Months.</i> <i>If less than 12 months, record '1' and record in Months.</i> <i>If 1 year/12 months or more, record '2' and record in Years.</i>	MONTHS AGO... 1 ___ ☺ [B] YEARS AGO ..... 2 ___ ☺ [B] DK ..... 998 ☺ [B]	MONTHS AGO ...1 ___ ☺ [C] YEARS AGO .....2 ___ ☺ [C] DK ..... 998 ☺ [C]	MONTHS AGO... 1 ___ ☺ [D] YEARS AGO ..... 2 ___ ☺ [D] DK ..... 998 ☺ [D]	MONTHS AGO .. 1 ___ ☺ [X] YEARS AGO ..... 2 ___ ☺ [X] DK ..... 998 ☺ [X]	MONTHS AGO ...1 ___ ☺ End YEARS AGO .....2 ___ ☺ End DK ..... 998 ☺ End

HOUSEHOLD ENERGY USE		EU
<b>EU1.</b> In your household, what type of cookstove is <u>mainly</u> used for <u>cooking</u> ?	ELECTRIC STOVE.....01	01 ⇒EU5
	SOLAR COOKER .....02	02 ⇒EU5
	LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE .....03	03 ⇒EU5
	BIOGAS STOVE .....05	05 ⇒EU5
	LIQUID FUEL STOVE.....06	06 ⇒EU4
	MANUFACTURED SOLID FUEL STOVE.....07	
	TRADITIONAL SOLID FUEL STOVE.....08	
	THREE STONE STOVE / OPEN FIRE.....09	09 ⇒EU4
	OTHER ( <i>specify</i> ) _____ 96	96 ⇒EU4
NO FOOD COOKED IN HOUSEHOLD .....97	97 ⇒EU9	
<b>EU2.</b> Does it have a chimney?	YES ..... 1	
	NO..... 2	
	DK..... 8	
<b>EU3.</b> Does it have a fan?	YES ..... 1	
	NO..... 2	
	DK..... 8	
<b>EU4.</b> What type of fuel or energy source is used in this cookstove?  <i>If more than one, record the main energy source for this cookstove.</i>	ALCOHOL / ETHANOL .....01	
	GASOLINE / DIESEL .....02	
	KEROSENE / PARAFFIN .....03	
	COAL / LIGNITE .....04	
	CHARCOAL .....05	
	WOOD .....06	
	GARBAGE / PLASTIC.....10	
OTHER ( <i>specify</i> ) _____ 96		
<b>EU5.</b> Is the cooking usually done in the house, in a separate building, or outdoors?  <i>If in main house, probe to determine if cooking is done in a separate room.</i>  <i>If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.</i>	IN MAIN HOUSE NO SEPARATE ROOM..... 1	
	IN A SEPARATE ROOM ..... 2	
	IN A SEPARATE BUILDING ..... 3	
	OUTDOORS OPEN AIR ..... 4	
	ON VERANDA OR COVERED PORCH..... 5	
	OTHER ( <i>specify</i> ) _____ 6	

<p><b>EU9.</b> At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p>	<p>ELECTRICITY .....01  SOLAR LANTERN .....02  RECHARGEABLE FLASHLIGHT,  TORCH OR LANTERN .....03  BATTERY POWERED FLASHLIGHT,  TORCH OR LANTERN .....04  BIOGAS LAMP .....05  GASOLINE LAMP .....06    KEROSENE OR PARAFFIN LAMP .....07  CHARCOAL .....08  WOOD .....09  ANIMAL DUNG / WASTE .....11  OIL LAMP .....12  CANDLE .....13    OTHER (<i>specify</i>) _____ 96    NO LIGHTING IN HOUSEHOLD .....97</p>	
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Food Insecurity Experiences	FIES	
<b>FIE1.</b> During the last 12 months, was there a time when you worried/there were concerns/ that you or any adult in the household would not have enough food to eat because of lack of enough money or other resources?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE2.</b> During the last 12 months, was there any time when you or any other adult in your household were unable to eat /healthy and nutritious/good/ food because of a lack of money or other resources?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE3.</b> During the last 12 months, were there periods when you or any other adult in your household had to eat only a few kinds of foods, because of a lack of money or other resources?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE4.</b> During the last 12 months, was there any time when, because of lack of money or other means to get food, you or any other adult in your household had to skip a meal?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE5.</b> During the last 12 months, was there any time when, because of lack of money or other resources to get food, you or any other adult in your household ate less than you thought you should?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE6.</b> During the last 12 months, did it ever happen that your household ran out of food because of a lack of money or other resources?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE7.</b> During the last 12 months, was there any time when, because of lack of money or other resources to get food, you or any other adult in your household were hungry but did not eat?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	
<b>FIE8.</b> During the last 12 months, was there any time when, because of lack of money or other resources to get food, you or any other adult in your household went without eating for a whole day?	YES..... 1 NO ..... 2 DON'T KNOW ..... 8	

**WATER AND SANITATION**

**WS**

**WS1.** What is the main source of drinking water used by members of your household?

*If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).*

<b>PIPED WATER</b>		
PIPED INTO DWELLING .....	11	11 ⇨WS7
PIPED TO YARD / PLOT .....	12	12 ⇨WS7
PIPED TO NEIGHBOUR .....	13	13 ⇨WS3
PUBLIC TAP / STANDPIPE.....	14	14 ⇨WS3
<b>DUG WELL</b>		
PROTECTED WELL .....	31	31 ⇨WS3
UNPROTECTED WELL.....	32	32 ⇨WS3
<b>RAINWATER</b>		
OWN CEMENT OR OTHER TANK.....	52	
NEIGHOR'S CEMENT OR OTHER TANK.....	53	
COMMUNITY CEMENT OR OTHER TANK.....	54	
TANKER TRUCK .....	61	61 ⇨WS4
<b>PACKAGED WATER</b>		
BOTTLED WATER .....	91	
OTHER ( <i>specify</i> ).....	96	96 ⇨WS3

**WS2.** What is the main source of water used by members of your household for other purposes such as cooking and handwashing?

*If unclear, probe to identify the place from which members of this household most often collect water for other purposes.*

<b>PIPED WATER</b>		
PIPED INTO DWELLING .....	11	11 ⇨WS7
PIPED TO YARD / PLOT .....	12	12 ⇨WS7
PIPED TO NEIGHBOUR .....	13	
PUBLIC TAP / STANDPIPE.....	14	
<b>DUG WELL</b>		
PROTECTED WELL .....	31	
UNPROTECTED WELL.....	32	
<b>RAINWATER</b>		
OWN CEMENT OR OTHER TANK.....	52	
NEIGHOR'S CEMENT OR OTHER TANK.....	53	
COMMUNITY CEMENT OR OTHER TANK.....	54	
TANKER TRUCK .....	61	61 ⇨WS4
<b>PACKAGED WATER</b>		
BOTTLED WATER .....	91	
OTHER ( <i>specify</i> ).....	96	

**WS3.** Where is that water source located?

IN OWN DWELLING.....	1	1 ⇨WS7
IN OWN YARD / PLOT .....	2	2 ⇨WS7
ELSEWHERE .....	3	

<p><b>WS4.</b> How long does it take for members of your household to go there, get water, and come back?</p>	<p>MEMBERS DO NOT COLLECT ..... 000</p> <p>NUMBER OF MINUTES.....__ __</p> <p>DK ..... 998</p>	<p>000 ⇨WS7</p>
<p><b>WS5.</b> Who usually goes to this source to collect the water for your household?</p> <p><i>Record the name of the person and copy the line number of this person from the LIST OF HOUSEHOLD MEMBERS Module.</i></p>	<p>NAME_____</p> <p>LINE NUMBER.....__ __</p>	
<p><b>WS6.</b> Since last (<i>day of the week</i>), how many times has this person collected water?</p>	<p>NUMBER OF TIMES ..... __ __</p> <p>DK ..... 98</p>	
<p><b>WS7.</b> In the last month, has there been any time when your household did not have sufficient quantities of drinking water?</p>	<p>YES, AT LEAST ONCE ..... 1</p> <p>NO, ALWAYS SUFFICIENT..... 2</p> <p>DK ..... 8</p>	<p>2 ⇨WS9</p> <p>8 ⇨WS9</p>
<p><b>WS8.</b> What was the main reason that you were unable to access water in sufficient quantities when needed?</p>	<p>WATER NOT AVAILABLE FROM SOURCE ... 1</p> <p>WATER TOO EXPENSIVE..... 2</p> <p>SOURCE NOT ACCESSIBLE ..... 3</p> <p>OTHER (<i>specify</i>)..... 6</p> <p>DK ..... 8</p>	
<p><b>WS9.</b> Do you or any other member of this household do anything to the water to make it safer to drink?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DK ..... 8</p>	<p>2 ⇨WS11</p> <p>8 ⇨WS11</p>

<p><b>WS10.</b> What do you usually do to make the water safer to drink?</p> <p><i>Probe:</i> Anything else?</p> <p><i>Record all methods mentioned.</i></p>	<p>BOIL..... A</p> <p>ADD BLEACH / CHLORINE ..... B</p> <p>STRAIN IT THROUGH A CLOTH..... C</p> <p>USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.) ..... D</p> <p>SOLAR DISINFECTION .....E</p> <p>LET IT STAND AND SETTLE.....F</p> <p>OTHER (<i>specify</i>)..... X</p> <p>DK .....Z</p>	
<p><b>WS11.</b> What kind of toilet facility do members of your household usually use?</p> <p><i>If 'Flush' or 'Pour flush', probe:</i> Where does it flush to?</p> <p><i>If not possible to determine, ask permission to observe the facility.</i></p>	<p><b>FLUSH / POUR FLUSH</b></p> <p>FLUSH TO PIPED SEWER SYSTEM..... 11</p> <p>FLUSH TO SEPTIC TANK..... 12</p> <p>FLUSH TO PIT LATRINE ..... 13</p> <p>FLUSH TO OPEN DRAIN ..... 14</p> <p>FLUSH TO DK WHERE ..... 18</p> <p><b>PIT LATRINE</b></p> <p>VENTILATED IMPROVED PIT LATRINE..... 21</p> <p>PIT LATRINE WITH SLAB..... 22</p> <p>PIT LATRINE WITHOUT SLAB / OPEN PIT ..... 23</p> <p>COMPOSTING TOILET..... 31</p> <p>BUCKET ..... 41</p> <p>HANGING TOILET / HANGING LATRINE ..... 51</p> <p>NO FACILITY / BUSH / FIELD ..... 95</p> <p>OTHER (<i>specify</i>)..... 96</p>	<p>11 ⇒WS14</p> <p>14 ⇒WS14</p> <p>18 ⇒WS14</p> <p>41 ⇒WS14</p> <p>51 ⇒WS14</p> <p>95 ⇒End</p> <p>96 ⇒WS14</p>
<p><b>WS12.</b> Has your (<i>answer from WS11</i>) ever been emptied?</p>	<p>YES, EMPTIED ..... 1</p> <p>NO, NEVER EMPTIED ..... 4</p> <p>DK ..... 8</p>	<p>4 ⇒WS14</p> <p>8 ⇒WS14</p>
<p><b>WS13.</b> The last time it was emptied, where were the contents emptied to?</p> <p><i>Probe:</i> Was it removed by a service provider?</p>	<p><b>REMOVED BY SERVICE PROVIDER</b></p> <p>TO A TREATMENT PLANT ..... 1</p> <p>BURIED IN A COVERED PIT..... 2</p> <p>TO DON'T KNOW WHERE ..... 3</p> <p><b>EMPTIED BY HOUSEHOLD</b></p> <p>BURIED IN A COVERED PIT..... 4</p> <p>TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE..... 5</p> <p>OTHER (<i>specify</i>)..... 6</p> <p>DK ..... 8</p>	
<p><b>WS14.</b> Where is this toilet facility located?</p>	<p>IN OWN DWELLING..... 1</p> <p>IN OWN YARD / PLOT ..... 2</p> <p>ELSEWHERE ..... 3</p>	

<b>WS15.</b> Do you share this facility with others who are not members of your household?	YES ..... 1 NO ..... 2	2 ⇒ End
<b>WS16.</b> Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?	SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC) ..... 1 SHARED WITH GENERAL PUBLIC ..... 2	2 ⇒ End
<b>WS17.</b> How many households in total use this toilet facility, including your own household?	NUMBER OF HOUSEHOLDS (IF LESS THAN 10) ..... <u>0</u> —  TEN OR MORE HOUSEHOLDS ..... 10  DK ..... 98	

HANDWASHING	HW	
<p><b>HW1.</b> We would like to learn about where members of this household wash their hands.</p> <p>Can you please show me where members of your household <u>most often</u> wash their hands?</p> <p><i>Record result and observation.</i></p>	<p><b>OBSERVED</b></p> <p>FIXED FACILITY OBSERVED (SINK / TAP)</p> <p>IN DWELLING ..... 1</p> <p>IN YARD / PLOT ..... 2</p> <p>MOBILE OBJECT OBSERVED (BUCKET / JUG / KETTLE/TINI VAI) ..... 3</p> <p><b>NOT OBSERVED</b></p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT ..... 4</p> <p>NO PERMISSION TO SEE ..... 5</p> <p>OTHER REASON (<i>specify</i>) ..... 6</p>	<p>4 ⇨ HW5</p> <p>5 ⇨ HW4</p> <p>6 ⇨ HW5</p>
<p><b>HW2.</b> Observe presence of water at the place for handwashing.</p> <p><i>Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.</i></p>	<p>WATER IS AVAILABLE..... 1</p> <p>WATER IS NOT AVAILABLE..... 2</p>	
<p><b>HW3.</b> Is soap or detergent present at the place for handwashing?</p>	<p>YES, PRESENT..... 1</p> <p>NO, NOT PRESENT ..... 2</p>	<p>1 ⇨ HW7</p> <p>2 ⇨ HW5</p>
<p><b>HW4.</b> Where do you or other members of your household most often wash your hands?</p>	<p>FIXED FACILITY (SINK / TAP)</p> <p>IN DWELLING ..... 1</p> <p>IN YARD / PLOT ..... 2</p> <p>MOBILE OBJECT (BUCKET / JUG / KETTLE/TINI VAI) ..... 3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT ..... 4</p> <p>OTHER (<i>specify</i>) ..... 6</p>	
<p><b>HW5.</b> Do you have any soap or detergent or ash/sand/leaves in your house for washing hands?</p>	<p>YES..... 1</p> <p>NO..... 2</p>	<p>2 ⇨ End</p>
<p><b>HW6.</b> Can you please show it to me?</p>	<p>YES, SHOWN..... 1</p> <p>NO, NOT SHOWN ..... 2</p>	<p>2 ⇨ End</p>
<p><b>HW7.</b> Record your observation.</p> <p><i>Record all that apply.</i></p>	<p>BAR OR LIQUID SOAP ..... A</p> <p>DETERGENT (POWDER / LIQUID / PASTE)..... B</p> <p>ASH / SAND/LEAVES..... C</p>	

**SALT IODISATION**

**SA**

**SA1.** We would like to check whether the salt used in your household is iodised. May I have a sample of the salt used to cook meals in your household?

*Apply 2 drops of test solution, observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.*

**SALT TESTED**

0 PPM (NO REACTION) ..... 1  
 BELOW 15 PPM (BETWEEN 0 AND 15 PPM).. 2  
 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3

2 ⇨HH13  
 3 ⇨HH13

**SALT NOT TESTED**

NO SALT IN THE HOUSE..... 4  
 OTHER REASON  
 (specify) \_\_\_\_\_ 6

4 ⇨HH13  
 6 ⇨HH13

**SA2.** I would like to perform one more test. May I have another sample of the same salt?

*Apply 5 drops of recheck solution. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.*

**SALT TESTED**

0 PPM (NO REACTION) ..... 1  
 BELOW 15 PPM (BETWEEN 0 AND 15 PPM).. 2  
 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3

**SALT NOT TESTED**

OTHER REASON  
 (specify) \_\_\_\_\_ 6

<b>HH13.</b> Record the time.	HOUR AND MINUTES .....__ __ : __ __	
<b>HH14.</b> Language of the Questionnaire.	ENGLISH..... 1 TONGAN..... 2	
<b>HH15.</b> Language of the Interview.	ENGLISH..... 1 TONGA..... 2 CHINESE..... 3  OTHER LANGUAGE (specify) _____ 6	
<b>HH16.</b> Native language of the Respondent.	ENGLISH..... 1 TONGAN..... 2 CHINESE..... 3  OTHER LANGUAGE (specify) _____ 6	
<b>HH17.</b> Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE..... 1 YES, PART OF QUESTIONNAIRE..... 2 NO, NOT USED..... 3	
<b>HH18.</b> Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:	NO CHILDREN..... 0 1 CHILD..... 1 2 OR MORE CHILDREN (NUMBER) ..... __	0 ⇒ HH29 1 ⇒ HH27

**HH19.** List each of the children age 5-17 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 5-17 years. Record the line number, name, sex, and age for each child.

<b>HH20.</b> Rank number	<b>HH21.</b> Line number from HL1	<b>HH22.</b> Name from HL2	<b>HH23.</b> Sex from HL4		<b>HH24.</b> Age from HL6
RANK	LINE	NAME	M	F	AGE
1	__ __		1	2	__ __
2	__ __		1	2	__ __
3	__ __		1	2	__ __
4	__ __		1	2	__ __
5	__ __		1	2	__ __
6	__ __		1	2	__ __
7	__ __		1	2	__ __
8	__ __		1	2	__ __

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**HH25.** Check the last digit of the household number (HH2) from the HOUSEHOLD INFORMATION PANEL. This is the number of the row you should go to in the table below.

Check the total number of children age 5-17 years in HH18 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH20) of the selected child.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
	2	3	4	5	6	7	8+
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

**HH26.** Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.

RANK NUMBER ..... \_ \_

**HH27.** (When HH18=1 or when there is a single child age 5-17 in the household): Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this child from the LIST OF HOUSEHOLD MEMBERS.

LINE NUMBER..... \_ \_

NAME \_\_\_\_\_

AGE..... \_ \_

**HH28.** Issue a QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the mother/caretaker of this child.

**HH29.** Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?

YES, AT LEAST ONE WOMAN AGE 15-49 ..... 1  
NO..... 2

2 ⇒ HH34

**HH30.** Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.

**HH30A**  
. CHECK HL8 IN THE LIST OF HOUSEHOLD MEMBERS: ARE THERE ANY WOMEN AGE 15-49?

1 YES, AT LEAST ONE WOMAN AGE 15-49 ... 1  
2 OR MORE WOMEN (NUMBER)..... \_

1 ⇒ HH30I

**HH30B.** List each of the women age 15-49 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include women outside of the age range 15-49 years. Record the line number, name, and age for each woman.

HH30C Rank number	HH30D Line number from HL1	HH30E Name from HL2	HH30F Age from HL6
RANK	LINE	NAME	AGE
1	— —		— —
2	— —		— —
3	— —		— —
4	— —		— —
5	— —		— —
6	— —		— —
7	— —		— —
8	— —		— —

**HH30G.** Check the last digit of the household number (HH2) from the HOUSEHOLD INFORMATION PANEL. This is the number of the row you should go to in the table below.

Check the total number of women age 15-49 years in HH30A above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH30C) of the selected woman for Domestic Violence module.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE WOMEN IN THE HOUSEHOLD (FROM HH30A)						
	2	3	4	5	6	7	8+
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

**HH30H.** Record the rank number (HH30C), line number (HH30D), name (HH30E) and age (HH30F) of the selected woman.

RANK NUMBER .....

LINE NUMBER .....

**HH30I.** (When HH30A=1 or when there is a single woman age 15-49 in the household): Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this woman from the LIST OF HOUSEHOLD MEMBERS.

NAME .....

AGE — —

**HH30J.** Administer Domestic Violence Module to this woman while interviewing for Questionnaire for Individual Woman

<b>HH31.</b> Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?	YES, AT LEAST ONE GIRL AGE 15-17 ..... 1 NO..... 2	2 ⇒ HH34
<b>HH32.</b> Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?	YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠90..... 1 NO, HL20=90 FOR ALL GIRLS AGE 15-17..... 2	2 ⇒ HH34
<p><b>HH33.</b> As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.</p> <p>For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.</p> <p>May we interview (<i>name(s) of female member(s) age 15-17</i>) later?</p> <p><input type="checkbox"/> 'Yes' for all girls age 15-17 ⇒ Continue with HH34.</p> <p><input type="checkbox"/> 'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH34.</p> <p><input type="checkbox"/> 'No' for all girls age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH34.</p>		
<b>HH34.</b> Check HH8 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for Questionnaire for Men?	YES, HH8=1..... 1 NO, HH8=2 ..... 2	2 ⇒ HH40
<b>HH35.</b> Check HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any men age 15-49?	YES, AT LEAST ONE MAN AGE 15-49 ..... 1 NO..... 2	2 ⇒ HH40
<b>HH36.</b> Issue a separate QUESTIONNAIRE FOR INDIVIDUAL MEN for each man age 15-49 years.		
<b>HH37.</b> Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any boys age 15-17?	YES, AT LEAST ONE BOY AGE 15-17 ..... 1 NO..... 2	2 ⇒ HH40
<b>HH38.</b> Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one boy age 15-17?	YES, AT LEAST ONE BOY AGE 15-17 WITH HL20≠90..... 1 NO, HL20=90 FOR ALL BOYS AGE 15-17..... 2	2 ⇒ HH40
<p><b>HH39.</b> As part of the survey we are also interviewing men age 15-49. We ask each person we interview for permission. A male interviewer conducts these interviews.</p> <p>For boys age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.</p> <p>May we interview (<i>name(s) of male member(s) age 15-17</i>) later?</p> <p><input type="checkbox"/> 'Yes' for all boys age 15-17 ⇒ Continue with HH40.</p> <p><input type="checkbox"/> 'No' for at least one boy age 15-17 and 'Yes' to at least one boy age 15-17 ⇒ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.</p> <p><input type="checkbox"/> 'No' for all boys age 15-17 ⇒ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.</p>		
<b>HH40.</b> Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE..... 1 NO..... 2	2 ⇒ HH42
<b>HH41.</b> Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.		

<b>HH42.</b> Check HH9 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for Water Quality Testing Questionnaire?	YES, HH9=1 ..... 1 NO, HH9=2 ..... 2	2 ⇒ HH45
<b>HH43.</b> Issue a separate WATER QUALITY TESTING QUESTIONNAIRE for this household		
<b>HH44.</b> As part of the survey we are also looking at the quality of drinking water. We would like to do a simple test of your drinking water. A colleague will come and collect the water samples. May we do such a test?  <i>If the respondent requests to learn the results, explain that results will not be shared with individual households but will be made available to local authorities.</i>	YES, PERMISSION IS GIVEN.....1 NO, PERMISSION IS NOT GIVEN.....2	2 ⇒ Record '02' in WQ31 on the WATER QUALITY TESTING QUESTIONNAIRE
<b>HH45.</b> Now return to the HOUSEHOLD INFORMATION PANEL and, <ul style="list-style-type: none"> <li>• Record '01' in question HH46 (Result of the Household Questionnaire interview),</li> <li>• Record the name and the line number (from the LIST OF HOUSEHOLD MEMBERS) of the Respondent to the Household Questionnaire interview in HH47,</li> <li>• Fill the questions HH48 – HH52,</li> <li>• Thank the respondent for his/her cooperation and then</li> <li>• Proceed with the administration of the remaining individual questionnaire(s) in this household.</li> </ul> <i>If there is no individual questionnaire and no WATER QUALITY TESTING QUESTIONNAIRE to be completed in this household thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.</i>		

**INTERVIEWER'S OBSERVATIONS**

**SUPERVISOR'S OBSERVATIONS**