**DCF05 - Household WASH**

 *\*\*Instructions: Complete this form for all consented households:\*\**

 Q1. Date: *required*

 Q2. What is the main source of drinking water for the members of the households? *required*

* Piped water into dwelling
* Piped water into compound/yard/plot
* Piped to neighbour
* Public tap/standpipe
* Borehole or tube well
* Protected dug well
* Unprotected dug well
* Water from protected spring
* Water from unprotected spring
* Rainwater collection
* Delivered water - Tanker Truck
* Delivered water - Cart with small tank
* Water kiosk
* Packaged water - Bottled water
* Packaged water . Sachet water
* Surface water (river/stream/dam/lake/pond/canal/irrigation channel)
* Other

 Q3. If other, specify: *required*

 Q4. What is the main source of water used by members of your household for other purposes, such as cooking and hand washing? *required*

* Piped water into dwelling
* Piped water into compound/yard/plot
* Piped to neighbour
* Public tap/standpipe
* Borehole or tube well
* Protected dug well
* Unprotected dug well
* Water from protected spring
* Water from unprotected spring
* Rainwater collection
* Delivered water - Tanker Truck
* Delivered water - Cart with small tank
* Water kiosk
* Packaged water - Bottled water
* Packaged water . Sachet water
* Surface water (river/stream/dam/lake/pond/canal/irrigation channel)
* Other

 Q5. Where is that water collected from? *required*

* In own dwelling
* In own yard/plot
* Elsewhere

 Q6. How long does it take to go there, get water, and come back? Number of minutes (888 if NA, 999 if unknown) *required*

 Q7. How many times per day? Do you go there to collect water? *required*

 Q8. In the last month, has there been any time when your household did not have sufficient quantities of drinking water when needed? *required*

* Yes, at least once
* No, always sufficient
* Don't know

 Q9. What kind of toilet facility do members of your household usually use? (If ‘Flush’ or ‘Pour flush’, probe: Where does it flush to? If not possible to determine, ask permission to observe the facility.) *required*

* Flushed or pour flush to piped sewer system
* Flushed or pour flush to septic tank
* Flushed or pour flush to pit latrine
* Flushed or pour flush to open drain
* Flushed or pour flush, don't know where
* Dry pit latrine with slab
* Dry pit latrine without slab/open pit
* Ventilated improved pit (VIP)
* Composting toilets -Twin pit with slab
* Composting toilets -Twin pit without slab
* Other Composting toilet
* Bucket -container based sanitation
* Bucket -hanging toilet/hanging latrine
* No facility/bush/field
* Other, specify

 Q10. Specify other: *required*

 Q11. Do you share this facility with others who are not members of your household? *required*

* Yes
* No

 Q12. Where is this toilet facility located? *required*

* In own dwelling
* In own yard/plot
* Elsewhere

 Q13. Has your (pit latrine or septic tank) ever been emptied? *required*

* Yes, emptied
* Never emptied
* Don't know

 Q14. The last time it was emptied, where were the contents emptied to? (Was it removed by a service provider?) *required*

* Removed by service provider to a treatment plant
* Removed by service provider -buried in a covered pit
* Removed by service provider to don't know where
* Emptied by household buried in a cover pit
* Emptied by household to uncovered pit/open ground/ water body/elsewhere
* Other
* Don't know

 Q15. Specify other: *required*

 Q16. Can you please show me where members of your household most often wash their hands? *required*

* Fixed facility observed (skin/tap) in dwelling
* Fixed facility observed (skin/tap) in yard/plot
* Mobile object observed (bucket/jug/kettle)
* No handwashing place in dwelling/yard/plot
* No permission to see
* Other reason

 Q17. Specify other: *required*

 Q18. Observe availability of water at the place for handwashing. (Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.) *required*

* Water is available
* Water is not available

 Q19. Observe availability of soap or detergent at the place for handwashing. *required*

* Soap or detergent available
* Soap or detergent not available
* Form completed.
* Finish here