**HOUSEHOLD UPDATE QUESTIONNAIRE**

1. Date of interview |\_\_|\_\_|/|\_\_|\_\_|/|\_\_|\_\_|\_\_|\_\_|
2. Province |\_\_\_|\_\_\_|
3. District |\_\_\_|\_\_\_|
4. Administrative post |\_\_\_|\_\_\_|
5. Locality |\_\_\_|\_\_\_|
6. Community |\_\_\_|\_\_\_|
7. Enumeration area
8. Hamlet/Communal unit |\_\_\_|\_\_\_|
9. Area/Block |\_\_\_|\_\_\_|
10. Household |\_\_\_|\_\_\_|\_\_\_|
11. What is the name of head of household \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Consent**

***INTERVIEWER: Read the consent form to the respondent. Ask the respondent if he or she has any questions. Once any questions are answered, ask the respondent if he or she is willing to take part in the study.***

***INTERVIEWER: Did respondent give consent? Yes=1, No=2,*** |\_\_|

* ***If Yes (1) → HH12.***
* ***If No (2) → Thank respondent for their time and end the interview.***

1. What is the respondent’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Interviewer: If the respondent is the head of household, just write the name then go to HH12b.*

HH12a. Does the head of household [Name] have a cellphone? Yes (1)/ No(2) /DK(9)

HH12ab. If YES, Can I have the number of the [Head of HH name]? Yes(1)/No(2)/DK(9)

HH11\_ph. If YES: What is the phone number? |\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|

HH12b. Do you [Respondent’s name] have a cellphone? Yes (1)/ No(2) /Am head HH(5)

HH12ba. If YES, Can I have your phone number? Yes(1)/No(2)

HH12\_ph, If YES: What is your phone number? |\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|

**Interviewer: if HH12ab=YES or HH12ba=YES ->HH13**

HH12c. Is there anyone in this household who has a phone? Yes / NO

HH12ca. If YES, Can I have the number of the [Head of HH name]? Yes/No

HH12cb. If YES What is his/her name? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

HH12cb\_ph. What is his/her [Name] phone number?|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|\_\_|

Household Residents

1. Number of usual residents of the household |\_\_\_|\_\_\_|

**HH13a. Number of other people (visitors) who slept last night in the household?        |\_\_\_|\_\_\_|**

1. **List of residents of the household**
2. *Please give me the names of the persons who usually live in your household and guests (visitor) of the household who stayed here last night.*
3. *Order members of the household as follow: start with the head of the household then the first wife (in case of multiple spouses living in the same household) then the youngest child of the wife living in the household, then next to the youngest, etc…*
4. *Write the full name (in capital letter) NAME SURNAME with space*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Full Name** | **Resident=1 or visitor=2** | **Sex (Male=1 ; Female=2)** | **Age in complete years**  **(record “0” for less than 1 year)** | **Relation to head of household** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

***Column Codes (6)***

1. Head of Household 02. Spouse 03. Biological child 04. Father/Mother 05. Non-biological child

06. Adoptive child 07. In-law 08. Grandchild 09. Other relationship

10. No relationship

**END OF SURVEY**