**ODK test questionnaire**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Unique ID |  |  |  |  |  |  |  |  |
| Date and time of Interview: | D | D | M | M | Y | Y | Y | Y |
| Interviewer’s Name & NFID Code (9 Digit): |  |  |  |  |  |  |  |  |  |
| Supervisor’s Name & NFID Code (9 Digit): |  |  |  |  |  |  |  |  |  |
| State Name & Code: |  |  |
| District Name & Code: |  |  |  |
| Type of Community: Urban………………………..1, Rural…………………………2 |  |
| PSU Number: |  |  |  |
| Household Number: |  |  |
| Name of the Head of the Household: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Do you agree to participate in the survey? | Respondent Agrees | 1 |
| Respondent does not agree  | 2🡪skip to Q210 |
| **Signature of Respondent:** |  |  |
| How many total members in the household | 4 If Total member is 4 I have entered in this field. The in the roster table it will not take the more than 4 members. It will auto exit from roster table if I have entered 4 members in roster table. – Check required for roster table |  |
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| --- | --- | --- | --- | --- | --- | --- | --- |
| **LINE NO.** | **101Name of USUAL RESIDENTS OF THE HH (start with HoH)** | **102 RELATIONSHIP WITH HoH**What is the relationship of (name) to the head of the household? | 103 SEXIs (name)Male or female or transgender?M = 1F= 2T = 3 | **104 AGE**How old is (Name)?*(****Age in completed years.******R****ecord 00= age less than 1 year,**99=if 99 or more* | 105 MARITAL STATUS | **106**If age is > and = 3 years ask, whether going to school/College? Yes-1No-2 | **107** HIGHEST EDUCATION COMPLETED What is the highest level of schooling/standard completed (Name) has successfully completed?  |
| 01 |  | **01 Check – In first row only 1 code is accept.** |  |  | **Check required - If Age is less than 12 than only Code 5 (Never married) should be accept here.** |  | **Check - This qst ask to >3 age only. Other wise it will skip to next Qst.** |
| 02 |  | **If I am enter 01 in second row onwards then it will not accept Check required here.** |  |  |  |  |  |
| 03 |  |  |  |  |  |  |  |
| 04 |  |  |  |  |  |  |  |
| 05 |  |  |  |  |  |  |  |
| 06 |  |  |  |  |  |  |  |

1. Family roster

| **Q102 CODES FOR relationship with the Head of the household**01=Head 02=Wife Or Husband03= Son Or Daughter 04=Son-In-Law/ Daughter-In-Law 05=Grandchild 06=Parent 07=Parent-In-Law 08=Brother Or Sister 09=Brother-In-Law/ Sister-In-Law 10=Niece Or Nephew 11=Other Relative 12=Adopted/ Foster /Step Child 13=Domestic Servant 14=Other Not Related 98= Don’t Know  | **(B) CODES FOR marital status**1=Currently Married and Gauna performed2= Currently married but Gauna not Performed 3= Widow/ Widower 4=Divorced/ Separated 5=Never Married6= Live-in relationship   |
| --- | --- |

**2. Details of respondent and the family**

| **Q.No.** | **Question** | **Response** | **Code** | **Skip** |
| --- | --- | --- | --- | --- |
| **201** | Religion of Head of the Household | Hindu | 1 |  |
| Muslim | 2 |
| Christian | 3 |
| Others | 4 |
| Not stated | 5 |
| **202** | Caste of Head of the Household | Scheduled Caste | 1 |  |
| Scheduled Tribe | 2 |
| Other Backward Caste | 3 |
| General | 4 |
| Not stated | 5 |

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| **BASIC DRINKING WATER & SANITATION FACILITIES IN THE HOUEHOLD**  |
| 203 | What is the source of drinking water for members of your household?Multiple option  | **OWN** |  |  |
|  Piped water/handpump/covered well | 1 |
| Open well | 2 |
| **PUBLIC** |  |
|  Piped water/handpump/covered well | 3 |
| Open well | 4 |
| Surface water/spring/river/stream/pond/lake/dam | 5 |
| rainwater | 6 |
| Tanker truck | 7 |
| Others specify………………… | 77 |
| 204 | What kind of toilet disposal facility does your household have? | Own flush toilet | 1 |  |
| Shared flush toilet |  2 |
| Own pit toilet |  3 |
| Shared pit toilet |  4 |
| No facility |  5 |
| Others specify…………………….. |  77 |
| 205 | How many members of the household use toilet facility  | Number of Females………Number of Males……….. |  |  |
| 206 | Does any member of the household own this house or any other house? | Yes | 1 |  |
|  No | 2 |  |
| Don’t know | 98 |  |
| 207 | Type of house? (observe) | Kutcha | 1 |  |
| Semi Pucca | 2 |  |
| Pucca | 3 |  |
| 208 | Take picture of house |  |  |  |

|  |  |  |
| --- | --- | --- |
| 209 | Considering your total experience with all aspects of the questions, how would you rate your satisfaction on a scale of 1 to 10 where 1 is the lowest and 10 is the highest?  **1****2****3****9****5****65****7****8****10****4**   Rating Scale |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **210** | Final Interview Result Code | Interview Completed | 1 |
| No eligible child in the household | 2 |
| Interview Partially Completed | 3 |
| Consent not given/Refused | 4 |
| No eligible respondent available | 5 |
| Household Locked | 6 |