

BEFORE SURVEY -- Instructions

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Instructions to survey administrators:

Before administering the survey, you must obtain verbal consent from each participant. Read the Verbal Script for Informed Consent form and ask them if they consent to participate. Emphasize that the results of this survey will not be linked to them and any information shared will be anonymous. If they agree, mark so on the survey, give them the contact information card, and continue with the survey. If they do not agree, thank them for their time and give them the contact information card so that they may reach the study team if they change their mind.

When administering the survey do not read the answer choices to the participants unless noted in the question. Anything listed in the survey after the “SAY” should be said to all survey participants. If a survey participant does not want to answer a question, they may skip that question and continue on with the survey. Please note each skipped question. If a question has been skipped, you may ask the participant about it again at the end of the survey.

BEFORE SURVEY -- Survey Administrator & Location Questions**1. Survey Administrator Name:****2. Second Survey Administrator Name (if applicable):****3. Survey Date (enter as DD/MM/YYYY):**

4. Survey Time (enter as 24-hour HH:MM):

5. Household Location:

Upazilla | Union Parishad

Ward

Village

6. Household Study Identification Number (HSIN) (UU-W-VV-HHH):

	Union UU	Ward W	Village VV	Household HHH
HSIN				

6.1. Landowner Name:

6.2. Father's Name:

6.3. Para Name:

BEFORE SURVEY -- Verbal Consent

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Read the entirety of the Verbal Script for Informed Consent Form to the household key informant.

7.

Did the household key informant indicate they understood the study purpose and their role?

☐ (1)Yes

☐ (2)No

8.

Did the household key informant have any questions?

☐ (1)Yes

☐ (2)No

8.1.

What were the questions?

9.

Did the household key informant consent to participate in this survey?

(If the key informant is under 18 years old, the parent or guardian must consent for them to continue.)

☐ (1)Yes

☐ (2)No

SURVEY -- Key Informant Demographics

. KEY INFORMANT DEMOGRAPHICS

SAY: Thank you for participating in our survey. Remember, your answers will not be linked to your name if the findings are shared. To begin, we would like to ask a few questions about you.

10. Key Informant Information

	Key Informant	Key Informant
	First name:	Last name:

	Key Informant	Key Informant
	First name:	Last name:
Key Informant	<input type="text"/>	<input type="text"/>

11. What is your religion?

- ☐ (1)Islam
- ☐ (2)Hinduism
- ☐ (3)Buddhism
- ☐ (4)Christianity
- ☐ (5)Other (specify)

12. Are you the head of household?

- ☐ (1)Yes
- ☐ (2)No

SURVEY -- Household Demographics

. HOUSEHOLD DEMOGRAPHICS

SAY: We would like to ask you about the people that live in your household. Please tell us how many people live in your house and some information about them.

13. Including you, how many people of all ages live in your household?

14. Household Demographics Table

	Age	Sex		Education	Usually lives here?	
	(in years)	(1)Male	(2)Female		Yes	No
01 - Head of household	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
02	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Age (in years)	Sex (1)Male (2)Female		Education	Usually lives here? Yes No	
03	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
04	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
05	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
06	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
07	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
08	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Who is the head of the household?

- | | | |
|------------------------------------|---|---|
| <input type="checkbox"/> (1)Father | <input type="checkbox"/> (4)Daughter | <input type="checkbox"/> (7)Grandfather |
| <input type="checkbox"/> (2)Mother | <input type="checkbox"/> (5)Son-in-law | <input type="checkbox"/> (8)Grandmother |
| <input type="checkbox"/> (3)Son | <input type="checkbox"/> (6)Daughter-in-law | <input type="checkbox"/> (9)Other (specify) |
| | | <input type="text"/> |

16. What is the profession of the main income earner?

- | | |
|---|---|
| <input type="checkbox"/> (1)Agriculture | <input type="checkbox"/> (6)Housewife |
| <input type="checkbox"/> (2)Business | <input type="checkbox"/> (7)Retired |
| <input type="checkbox"/> (3)Education | <input type="checkbox"/> (8)Unemployed |
| <input type="checkbox"/> (4)Healthcare | <input type="checkbox"/> (9)Other (specify) |
| | <input type="text"/> |
| <input type="checkbox"/> (5)Service (specify: Private, NGO, Government) | |
| <input type="text"/> | |

SURVEY -- Household Assets & Consumption

HOUSEHOLD ASSETS & CONSUMPTION

SAY: Now we are going to ask you a few questions about your household.

17. How many households are in the compound?

18. Does your household have a concrete floor inside?

19. What type of latrine does your household usually use?

- ☐ (1) No toilet facility/free range (bush, field)
- ☐ (2) Flush or pour toilet
- ☐ (3) Pit latrine (ventilated improved, with slab)
- ☐ (4) Bucket or pan
- ☐ (5) Other (specify)

20. Is this facility shared with other households?

- ☐ (1) Yes
- ☐ (2) No

21. Does your household have:

	Choose one:		If answered yes:
	Yes	No	How many?
(1) Electricity	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(2) Television	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(3) Mobile telephone	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(4) Gas burner	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(5) Refrigerator	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(6) Motorcycle	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(7) Rice godown (Rice warehouse)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(8) Tractor	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(9) Other (specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

22. Does your household have:

	Choose one:		If answered yes:
	Yes	No	How many?
(1)Cows	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(2)Chickens	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(3)Pigeons	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(4)Ducks	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(5)Goats	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(6)Fish (pond)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(7)Other (specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

23. Does your household have:

	Choose one:		If answered yes:
	Yes	No	How many disables?
(1)Agriculture land (own)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(2)Agriculture land (lease)	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(3)Property (home) land	<input type="radio"/>	<input type="radio"/>	<input type="text"/>
(4)Other (specify) <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="text"/>

SURVEY -- Water Quality & Source (Introduction)**. WATER QUALITY**

SAY: We are now going to talk about your water. We will be asking questions to learn about where you get your water and how you use water.

24. In your household, who usually collects the water you use for drinking and cooking?

(Select all that apply)

- | | | | |
|---|--|---|--|
| <input type="checkbox"/> (1)Head of household | <input type="checkbox"/> (4)Son | <input type="checkbox"/> (7)Daughter-in-law | <input type="checkbox"/> (10)Sibling |
| <input type="checkbox"/> (2)Husband | <input type="checkbox"/> (5)Daughter | <input type="checkbox"/> (8)Grandchild | <input type="checkbox"/> (11)Unrelated |
| <input type="checkbox"/> (3)Wife | <input type="checkbox"/> (6)Son-in-law | <input type="checkbox"/> (9)Parent | <input type="checkbox"/> (12)Other (specify) |

25. How do you store water once you bring it to your household?
(Select all that apply)

- | | | |
|---|---|---|
| <input type="checkbox"/> (1)Plastic container with lid | <input type="checkbox"/> (3)Metal container with lid | <input type="checkbox"/> (5)Natural container with lid |
| <input type="checkbox"/> (2)Plastic container without lid | <input type="checkbox"/> (4)Metal container without lid | <input type="checkbox"/> (6)Natural container without lid |
| <input type="checkbox"/> (7)Other (specify) | | |
| <input type="text"/> | | |

26. What type of water device(s) does your household use for drinking and cooking?
(Ask the key informant each of the options below and select all that apply)

	<u>Drinking water</u> (Select all that apply)	<u>Cooking water</u> (Select all that apply)
(1)AIRP (arsenic iron removal plant)	<input type="checkbox"/>	<input type="checkbox"/>
(2)DTW (Deep Tube Well) 6no. hand pump	<input type="checkbox"/>	<input type="checkbox"/>
(3)DTW Moon	<input type="checkbox"/>	<input type="checkbox"/>
(4)DTW Tara	<input type="checkbox"/>	<input type="checkbox"/>
(5)DWSF (dug well sand filter)	<input type="checkbox"/>	<input type="checkbox"/>
(6)Pond/river/baor	<input type="checkbox"/>	<input type="checkbox"/>
(7)PSF (pond sand filter)	<input type="checkbox"/>	<input type="checkbox"/>
(8)PWSS (piped water supply system)	<input type="checkbox"/>	<input type="checkbox"/>
(9)RW (ring well)	<input type="checkbox"/>	<input type="checkbox"/>
(10)RWH (rainwater harvest system)	<input type="checkbox"/>	<input type="checkbox"/>
(11)SIDKO Plant	<input type="checkbox"/>	<input type="checkbox"/>
(12)STW (shallow tube well) 6no. hand pump	<input type="checkbox"/>	<input type="checkbox"/>
(13)STW Tara	<input type="checkbox"/>	<input type="checkbox"/>
(14)Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>		

SURVEY -- Water Quality & Source Information (Dry Season)

. WATER QUALITY & SOURCE INFORMATION (DRY SEASON)

SAY: We are now going to talk about your water in the dry season only (March to June).

27. Drinking water device: primary source in the dry season:

	27a. Which <u>drinking</u> water devices do you use most often in dry season?	27b. Do you pay for water from this device?	27c. How satisfied are you with the <u>location</u> of this water device?	27d. How long does it take to get to the water, and how much does it cost? (Enter minutes and cost)
Primary drinking water source	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

28. Are there any issues with drinking water from this device?

(Select all that apply)

- ☐ (1)Bad taste
- ☐ (2)Bad smell
- ☐ (3)Color
- ☐ (4)Too warm/hot
- ☐ (5)Causes illness or discomfort
- ☐ (6)Arsenic
- ☐ (7)Iron too high
- ☐ (8)Cloudy
- ☐ (9)Other (specify)
- ☐ (10)No issues

28.1. What tells you that arsenic is an issue with your primary drinking water device?

29. Does anyone in the household do anything to the water before drinking it?

(Select all that apply)

- ☐ (1)Boil
- ☐ (2)Add chlorine
- ☐ (3)Use water filter
- ☐ (4)Strain through cloth
- ☐ (5)Use solar disinfection
- ☐ (6)Let iron settle out
- ☐ (7)Other (specify)
- ☐ (8)No

30. Are there any issues with drinking water availability in the dry season?
(Select all that apply)

- ☐ (1)Not available
- ☐ (2)Long wait time
- ☐ (3)Distance to collection point is too far
- ☐ (4)Area surrounding collection point is not clean
- ☐ (5)Minor maintenance needed (specify)
- ☐ (6)Major maintenance needed (specify)
- ☐ (7)Not socially acceptable to use
- ☐ (8)No

31. If you cannot get drinking water from your primary device in the dry season, where would you collect drinking water?

- ☐ (1)AIRP (arsenic iron removal plant)
- ☐ (2)DTW (deep tube well) 6no. hand pump
- ☐ (3)DTW Tara
- ☐ (4)DTW Moon
- ☐ (5)DWSF (dug well sand filter)
- ☐ (6)Pond/river/baor
- ☐ (7)PSF (pond sand filter)
- ☐ (8)PWSS (piped water supply system)
- ☐ (9)RW (ring well)
- ☐ (10)RWH (rainwater harvest system)
- ☐ (11)SIDKO Plant
- ☐ (12)STW (shallow tube well) 6no. hand pump
- ☐ (13)STW Tara

☐ (14)Other (specify)

32. Do you use different water devices for drinking water and cooking water?

☐ (1)Yes

☐ (2)No

33. Cooking water device: primary source in dry season:

	33a. Which of the above <u>cooking</u> water devices do you use most of the time in dry season?
Primary cooking water source	<input type="text"/>

33. Cooking water device: primary source in dry season:

	33a. Which <u>cooking</u> water devices do you use most often in the dry season?	33b. Do you pay for water from this device?	33c. How satisfied are you with the <u>location</u> of this water device?	33d. How long does it take to go there for water, if you come by foot? (Enter minutes)
Primary cooking water source	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

34. Are there any issues with cooking water from this device?

(Select all that apply)

☐ (1)Bad taste

☐ (2)Bad smell

☐ (3)Color

☐ (4)Too warm/hot

☐ (5)Causes illness or discomfort

☐ (6)Arsenic

☐ (7)Iron too high

☐ (8)Cloudy

☐ (9)Other (specify)

☐ (10) No issues

34.1. What tells you that arsenic is an issue with your primary cooking water device?

35. Does anyone in the household do anything to the water before cooking with it?

(Select all that apply)

- ☐ (1) Boil
- ☐ (2) Add chlorine
- ☐ (3) Use water filter
- ☐ (4) Strain through cloth
- ☐ (5) Use solar disinfection
- ☐ (6) Let iron settle out
- ☐ (7) Other
- ☐ (8) No

36. Are there any issues with cooking water availability in the dry season?

(Select all that apply)

- ☐ (1) Not available
- ☐ (2) Long wait time
- ☐ (3) Distance to collection point is too far
- ☐ (4) Area surrounding collection point is not clean
- ☐ (5) Minor maintenance needed (specify)
- ☐ (6) Major maintenance needed (specify)
- ☐ (7) Not socially acceptable to use
- ☐ (8) No

37. If you cannot get cooking water from your primary device in the dry season, where do you collect cooking water?

- ☐ (1) AIRP (arsenic iron removal plant)
- ☐ (2) DTW (deep tube well) 6no. hand pump
- ☐ (3) DTW Tara

- ☐ (4)DTW Moon
- ☐ (5)DWSF (dug well sand filter)
- ☐ (6)Pond/river/baor
- ☐ (7)PSF (pond sand filter)
- ☐ (8)PWSS (piped water supply system)
- ☐ (9)RW (ring well)
- ☐ (10)RWH (rainwater harvest system)
- ☐ (11)SIDKO Plant
- ☐ (12)STW (shallow tube well) 6no. hand pump
- ☐ (13)STW Tara
- ☐ (14)Other

SURVEY -- Water Quality & Source Information (Rest of Year)

. WATER QUALITY & SOURCE INFORMATION (REST OF YEAR)

SAY: We are now going to talk about your water in the rest of the year only (July to February).

38. Do you use different water devices for drinking water in the dry season and the rest of the year?

- ☐ (1)Yes
- ☐ (2)No

39. Drinking water device: primary source in the rest of the year:

	39a. Which <u>drinking</u> water devices do you use most often in the rest of the year?	39b. Do you pay for water from this device?	39c. How satisfied are you with the <u>location</u> of this water device?	39d. How long does it take to go there, get water, and come back? (Enter in minutes)
Primary drinking water source	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

40. Are there any issues with drinking water from this device?

(Select all that apply)

- ☐ (1)Bad taste
- ☐ (2)Bad smell
- ☐ (3)Color
- ☐ (4)Too warm/hot
- ☐ (5)Causes illness or discomfort
- ☐ (6)Arsenic
- ☐ (7)Iron too high
- ☐ (8)Cloudy
- ☐ (9)Other (specify)
- ☐ (10)No issues

40.1. What tells you that arsenic is an issue with your primary drinking water device?

41. Does anyone in the household do anything to the water before drinking it?

(Select all that apply)

- ☐ (1)Boil
- ☐ (2)Add chlorine
- ☐ (3)Use water filter
- ☐ (4)Strain through cloth
- ☐ (5)Use solar disinfection
- ☐ (6)Let iron settle out
- ☐ (7)Other
- ☐ (8)No

42. Are there any issues with drinking water availability in the the rest of the year?

(Select all that apply)

- ☐ (1)Not available
- ☐ (2)Long wait time
- ☐ (3)Distance to collection point is too far
- ☐ (4)Area surrounding collection point is not clean
- ☐ (5)Minor maintenance needed (specify)

- ☐ (6)Major maintenance needed (specify)
- ☐ (7)Not socially acceptable to use
- ☐ (8)No

43. If you cannot get drinking water from your primary device in the the rest of the year, where do you collect drinking water?

- ☐ (1)AIRP (arsenic iron removal plant)
- ☐ (2)DTW (deep tube well) 6no. hand pump
- ☐ (3)DTW Tara
- ☐ (4)DTW Moon
- ☐ (5)DWSF (dug well sand filter)
- ☐ (6)Pond/river/baor
- ☐ (7)PSF (pond sand filter)
- ☐ (8)PWSS (piped water supply system)
- ☐ (9)RW (ring well)
- ☐ (10)RWH (rainwater harvest system)
- ☐ (11)SIDKO Plant
- ☐ (12)STW (shallow tube well) 6no. hand pump
- ☐ (13)STW Tara
- ☐ (14)Other

44. Do you use different water devices for cooking water in the dry season and the rest of the year?

- ☐ (1)Yes
- ☐ (2)No

45. Cooking water device: primary source in the rest of the year:

Primary cooking water source	<p>45a. Which of the above <u>cooking</u> water devices do you use most of the time in the rest of the year?</p> <div style="border: 1px solid black; height: 20px; width: 100%; position: relative;"> <div style="position: absolute; right: 5px; top: 5px;">▼</div> </div>
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45. Cooking water device: primary and secondary sources in the rest of the year:

	45a. Which <u>cooking</u> water devices do you use most often in the rest of the year?	45b. Do you pay for water from this device?	45c. How satisfied are you with the <u>location</u> of this water device?	45d. How long does it take to go there, get water, and come back? (Enter as minutes)
Primary cooking water source	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

46. Are there any issues with cooking water from this device?

(Select all that apply)

- ☐ (1) Bad taste
- ☐ (2) Bad smell
- ☐ (3) Color
- ☐ (4) Too warm/hot
- ☐ (5) Causes illness or discomfort
- ☐ (6) Arsenic
- ☐ (7) Iron too high
- ☐ (8) Cloudy
- ☐ (9) Other (specify)
- ☐ (10) No issues

46.1. What tells you that arsenic is an issue with your primary cooking water device?

47. Does anyone in the household do anything to the water before cooking with it?

(Select all that apply)

- ☐ (1) Boil
- ☐ (2) Add chlorine
- ☐ (3) Use water filter
- ☐ (4) Strain through cloth
- ☐ (5) Use solar disinfection
- ☐ (6) Let iron settle out
- ☐ (7) Other

☐ (8)No

48. Are there any issues with cooking water availability in the rest of year?

(Select all that apply)

- ☐ (1)Not available
- ☐ (2)Long wait time
- ☐ (3)Distance to collection point is too far
- ☐ (4)Area surrounding collection point is not clean
- ☐ (5)Minor maintenance needed (specify)
- ☐ (6)Major maintenance needed (specify)
- ☐ (7)Not socially acceptable to use
- ☐ (8)No

49. If you cannot get cooking water from your primary and secondary devices in the dry season, where do you collect cooking water?

- ☐ (1)AIRP (arsenic iron removal plant)
- ☐ (2)DTW (deep tube well) 6no. hand pump
- ☐ (3)DTW Tara
- ☐ (4)DTW Moon
- ☐ (5)DWSF (dug well sand filter)
- ☐ (6)Pond/river/baor
- ☐ (7)PSF (pond sand filter)
- ☐ (8)PWSS (piped water supply system)
- ☐ (9)RW (ring well)
- ☐ (10)RWH (rainwater harvest system)
- ☐ (11)SIDKO Plant
- ☐ (12)STW (shallow tube well) 6no. hand pump
- ☐ (13)STW Tara
- ☐ (14)Other

SURVEY -- Water Quality & Source (Conclusion)

50.

Is there anything you can think of that would make this drinking and/or cooking water system better?

51. Do you know if other villages have a better drinking and/or cooking water arrangement? If yes, tell me about the way(s) you think their system better?

SURVEY -- Water Supply: Maintenance & Repair

WATER SUPPLY: MAINTENANCE & REPAIR

SAY: These next questions will focus on how the safe water supply is maintained and repaired, and about the upkeep of water source areas. This is about all water in general, not about your water devices.

52. Who do you feel should be responsible for making sure the drinking water is safe?
(Select all that apply)

- ☐ (1) Household/Myself
- ☐ (2) All households that use safe water device
- ☐ (3) Local Government - Union Parishad
- ☐ (4) Local Government - Upazilla Parishad
- ☐ (5) Government - Department of Public Health and Engineering (DPHE)
- ☐ (6) Water device caretaker
- ☐ (7) Non-governmental organizations (NGOs) (specify)
- ☐ (8) Other (specify)
- ☐ (9) No one
- ☐ (10) Don't know

53. Who is responsible for making sure the drinking water is safe?
(Select all that apply)

- ☐ (1) Household/Myself
- ☐ (2) All households that use safe water device

- ☐ (3)Local Government - Union Parishad
- ☐ (4)Local Government - Upazilla Parishad
- ☐ (5)Government - Department of Public Health and Engineering (DPHE)
- ☐ (6)Water device caretaker
- ☐ (7)Non-governmental organizations (NGOs)
- ☐ (8)Other (specify)
- ☐ (9)No one
- ☐ (10)Don't know

54. Who do you feel should be responsible for making sure the cooking water is safe?
(Select all that apply)

- ☐ (1)Household/Myself
- ☐ (2)All households that use safe water device
- ☐ (3)Local Government - Union Parishad
- ☐ (4)Local Government - Upazilla Parishad
- ☐ (5)Government - Department of Public Health and Engineering (DPHE)
- ☐ (6)Water device caretaker
- ☐ (7)Non-governmental organizations (NGOs) (specify)
- ☐ (8)Other (specify)
- ☐ (9)No one
- ☐ (10)Don't know

55. Who is responsible for making sure the cooking water is safe?
(Select all that apply)

- ☐ (1)Household/Myself
- ☐ (2)All households that use safe water device
- ☐ (3)Local Government - Union Parishad
- ☐ (4)Local Government - Upazilla Parishad
- ☐ (5)Government - Department of Public Health and Engineering (DPHE)
- ☐ (6)Water device caretaker
- ☐ (7)Non-governmental organizations (NGOs) (specify)
- ☐ (8)Other (specify)
- ☐ (9)No one
- ☐ (10)Don't know

SAY: For the next questions, please answer based upon the drinking water device you use most often.

56. Do you believe regular maintenance of your device is necessary to make water safe to drink?

- ☐ (1)Yes
- ☐ (2)No

56.1. What maintenance of your device is necessary for safe drinking water?

- ☐ (1)Tube well painting
- ☐ (2)Tube well oiling
- ☐ (3)Gate valve opening
- ☐ (4)Sand bed scraping
- ☐ (5)Gravel chamber washing
- ☐ (6)Keeping collection point clean
- ☐ (7)Keeping area surrounding collection point clean
- ☐ (8)Other (specify)

57. If maintenance of your device does not occur regularly, what will happen?

- ☐ (1)Water will smell bad
- ☐ (2)Water will taste bad
- ☐ (3)Arsenic level will increase
- ☐ (4)Filter will stop working
- ☐ (5)Hand pump will be damaged
- ☐ (6)Filter will be damaged
- ☐ (7)Other (specify)
- ☐ (8)Don't know
- ☐ (9)Nothing will happen

58. Does this maintenance of your device cost money?

- ☐ (1)Yes
- ☐ (2)No

58.1. What does maintenance cost?**59. Does repair of your device cost money?**

- ☐ (1)Yes
- ☐ (2)No

59.1. What does repair cost?

SAY: Please remember, these questions are based upon the drinking water device you use most often.

60. Who maintains your drinking water device?

- ☐ (1)Household/Myself
- ☐ (2)Landowner
- ☐ (3)1-3 households
- ☐ (4)4-6 households
- ☐ (5)All users
- ☐ (6)Other (specify)
- ☐ (7)No one

61. Who repairs your drinking water device?

- ☐ (1)Household/Myself
- ☐ (2)Landowner
- ☐ (3)1-3 households
- ☐ (4)4-6 households
- ☐ (5)All users
- ☐ (6)Other (specify)

☐ (7) No one

62. Do you spend money to maintain your drinking water device?

☐ (1) Yes

☐ (2) No

62.1. How much do you spend? (in Tk/year)

62.1. Why not?

☐ (1) Landowner does not ask

☐ (2) Cannot afford payment

☐ (3) No need to pay

☐ (4) Other (specify)

63. Do you believe users should pay for regular maintenance?

☐ (1) Yes

☐ (2) No

63.1. How much? (in Tk/year)

64. If maintenance is not regular, do you believe the repair cost will be high?

☐ (1) Yes

☐ (2) No

☐ (3) Don't know

65. If maintenance of your device does not happen, who suffers?

- ☐ (1)Me/My household
- ☐ (2)Anyone using the safe water device
- ☐ (3)Everyone in the community
- ☐ (4)Landowner
- ☐ (5)Other (specify)
- ☐ (6)No one

65.1. How do they suffer?**SURVEY -- Water Supply: Arsenic Testing****66.****If you wanted to test the safety (or quality) of your water, what would you do?**

- ☐ (1)Test it myself (specify)
- ☐ (2)Ask Asia Arsenic Network to test it
- ☐ (3)Ask government to test it (specify)
- ☐ (4)It is not possible to test the water (specify)
- ☐ (5)Don't know
- ☐ (6)Other (specify)

67.**If this drinking water source tested above government limit for arsenic, what would you do?**

- ☐ (1)Keep using this drinking water source without change
- ☐ (2)Keeping using this drinking water source and make a change (specify)
- ☐ (3)Use a different safe drinking water source
- ☐ (4)Pay for water
- ☐ (5)Other (specify)

68.

If there was a service to test your drinking water for arsenic levels, would you want to pay 150Tk to check arsenic levels of your drinking water?

☐ (1)Yes

☐ (2)No

68.1. Why not?

☐ (1)Cost is too high

☐ (2)Not necessary

☐ (3)Know the arsenic level

☐ (4)Tested recently

☐ (5)Government should test

☐ (6)Other (specify)

SURVEY -- Conclusion

END OF SURVEY

SAY: This is the end of the survey. Thank you so much for taking the time to answer the questions. We are so grateful for your help!

69. Do you have any questions?

70. Do you have any comments?

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