



Malawi Government
National Statistical Office



TELEPHONE SURVEY ON THE ECONOMIC AND SOCIAL IMPACT OF COVID-19 IN MALAWI, 2020

THIS SURVEY IS BEING CONDUCTED BY THE NATIONAL STATISTICAL OFFICE UNDER THE AUTHORITY OF THE 2013 STATISTICS ACT.

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HOUSEHOLD QUESTIONNAIRE

HOUSEHOLD IDENTIFICATION

WRITE CODES FOR TA, STA, OR TOWN; EA; AND HH ID. WRITE NAME OF DISTRICT; TA; VILLAGE; AND HOUSEHOLD HEAD.

A01. DISTRICT:

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NAME

A02. TA, STA, or TOWN:

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A03. ENUMERATION AREA:

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A04. PLACE / VILLAGE NAME:

A07. NAME OF HOUSEHOLD HEAD:

A08: IHPS 2019 Y4-HHID:

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A10. LOCATION OF HOUSEHOLD:

A14. LANGUAGE PREVIOUS INTERVIEW WAS MAINLY CONDUCTED (**PREFILLED**)

SURVEY STAFF DETAILS

A16. ENUMERATOR CODE:

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A16_1. PREVIOUS ROUND ENUMERATOR CODE:

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 A17. SUPERVISOR CODE:

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A18_1. PREVIOUS ROUND DATE OF INTERVIEW:

| | | |
|----|----|------|
| | | |
| DD | MM | YYYY |

 A18. DATE OF INTERVIEW:

| | | |
|----|----|------|
| | | |
| DD | MM | YYYY |

1. Interview Information Panel

INTERVIEWER: RECORD A NEW ATTEMPT EVERY TIME YOU CALL A NUMBER (EVEN IF YOU ARE CALLING THE

[illegible]

[illegible]

Section 2A. Household Roster Update

INTERVIEWER READ OUT: Let's begin. First, I would like to check with you if the people we recorded during our last visit are still members of your household. By household I mean people who normally sleep in the same dwelling and share their meals together.

| | | 1. | 2. | 3. | 4. |
|--|--|---|--|--|--|
| I N D I V I D U A L I D | INTERVIEWER: ALL HOUSEHOLD MEMBERS RECORDED DURING THE [LAST INTERVIEW] ARE PRE-FILLED IN Q1. | NAME | CAP/INTERVIEWER: IS [NAME] A NEW MEMBER ADDED IN THIS INTERVIEW? | Is [NAME] still a member of the household? | Why did [NAME] leave the household? |
| | FOR ALL PRE-FILLED MEMBERS, ASK QUESTIONS Q3 AND Q4. | CAP: PRE-FILLED NAMES FROM LAST INTERVIEW | | | |
| | AFTER YOU HAVE ASKED ABOUT ALL PRE-FILLED MEMBERS, THEN ASK: "Is there anyone who is a member of your household that i haven't mentioned?" | INTERVIEWER: ADD NEW MEMBERS HERE | | | |
| | IF YES, THEN ASK, RECORD THEIR NAMES AND ASK Q5 - Q7. | | YES..1 >> Q5 NO..2 | YES..1 >>NEXT PERSON NO..2 | |
| | | | | | DIVORCE/SEPARATION.....1 LEFT FOR STUDIES/EDUCATIONAL OPPORTUNITY.....2 LEFT FOR WORK.....3 LEFT TO FIND BETTER LAND.....4 HEALTH REASONS.....5 SECURITY REASONS.....6 FOR MARRIAGE/ COHABITATION.....7 TO JOIN THEIR FAMILY ALREADY LIVING IN ANOTHER LOCATION...8 MOVED WITH FAMILY.....9 LEFT TO SET UP OWN HOME.....10 UNABLE TO STAY DUE TO CONFLICT (MILITANCY/INSURGENCY)....11 DISPUTE WITH OTHER HOUSEHOLD MEMBERS/COMMUNITY.....12 ABDUCTED/KIDNAPPED.....13 DEAD.....14 OTHER, (SPECIFY).....15 REFUSED.....99 >> NEXT PERSON |
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
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| 10 | | | | | |

[illegible]

[illegible]

Section 4. BEHAVIOR AND SOCIAL DISTANCING

INTERVIEWER READ: Now I want to ask you about some measures that you may have taken since the government put guidelines and restrictions in place for corona virus

| 7. | 8. | 8a | 8b | 8c | 8d |
|--|--|--|---|--|---|
| <p>In the last week, how often did you wash your hands with soap after being in public?</p> <p>More than you used to.....1 About the same as you typically do.....2 Less than you typically do.....3 Did not do at all...4</p> | <p>In the last week, how often did you wear a mask when in public?</p> <p>All of the time.....1 Most of the time.....2 About half of the time...3 Some of the time.....4 None of the time.....5 I have not been in public during the last 7 days.....6</p> | <p>If you could get tested for free for the COVID-19 virus, would you be willing to get tested?</p> <p>Yes.....1 No.....2 NOT SURE...3</p> | <p>If an approved vaccine to prevent coronavirus was available right now at no cost, would you agree to be vaccinated?</p> <p>Yes.....1 No.....2 NOT SURE...3</p> | <p>What are the reasons you would not agree to be vaccinated?</p> <p>I DONT THINK IT WILL WORK.....1 I DONT THINK IT WILL BE SAFE.....2 I AM WORRIED ABOUT THE SIDE EFFECTS.....3 I AM AGAINST VACCINE IN GENERAL.....4 IT IS AGAINST MY RELIGION.....5 I AM NOT AT RISK OF CONTRACTING COVID-19...6 OTHER, SPECIFY.....555</p> <p>8b==2</p> | <p>What are the reasons you are not sure whether you would agree to be vaccinated?</p> <p>I DONT THINK IT WILL WORK.....1 I DONT THINK IT WILL BE SAFE.....2 I AM WORRIED ABOUT THE SIDE EFFECTS.....3 I AM AGAINST VACCINE IN GENERAL.....4 IT IS AGAINST MY RELIGION.....5 I AM NOT AT RISK OF CONTRACTING COVID-19...6 OTHER, SPECIFY.....555</p> <p>8b==3</p> |
| | | | | | |

Section 5. ACCESS

Soap and Safe Water

| 1a1 | 1b1 | 1a2 | 1b2 | 1a2_1 | 1a2_2 | 3 |
|---|--|--|---|--|--|---|
| <p><u>Last week</u>, did you have sufficient soap to wash your hands when needed?</p> <p>YES1>>Q1a2 NO2</p> | <p>What were reasons you or members of your household were unable to access sufficient soap to wash hands?</p> <p>DO NOT READ OPTIONS</p> <p>SHOPS HAVE RUN OUT OF STOCK.....1 LOCAL MARKETS NOT OPERATING / CLOSED.....2 LIMITED / NO TRANSPORTATION.....3 RESTRICTION TO GO OUTSIDE.....4 INCREASE IN PRICE.....5 NO ACCESS TO CASH AND CANNOT PAY WITH CREDIT CARD.....6 CANNOT AFFORD IT.....7 AFRAID TO GET OUT AND GETTING THE VIRUS.....8 OTHER, SPECIFY.....95</p> | <p><u>Last week</u> did you have sufficient water to wash your hands when needed?</p> <p>YES1 NO2 >>Q1a2_1</p> | <p>What was the <u>main reason</u> your household was unable to access water to wash hands?</p> <p>Water source too far...1 Too many people at the water source.....2 Large household size..3 Restriction to go outside.....4 No money.....5 Other (Specify).....99</p> | <p><u>Last week</u>, was there any time when you did not have sufficient drinking water to meet household needs?</p> <p>Yes, at least once....1 No, always sufficient.2 >>Q3 Don't know.....3 >>Q3</p> | <p>What was the main reason your household was unable to access sufficient drinking water ?</p> <p>Water supply no longer available.....1 Water supply reduced.....2 Unable to access communal sources.....3 Unable to afford water...4 Afraid of going out and getting the virus.....5 Other.....95</p> | <p>Have you or any member of your household needed any medical services (treatment or consultation) in the past 4 weeks whether there was illness or not?</p> <p>YES1 NO.....2 >>Q6 REFUSED..99 >>Q6</p> |
| | | | | | | |

Preventive Measures at Shops/Supermarkets

| 3b | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|--|--|---|---|--|---|---|
| What type of service did you or any member of your household need? DO NOT READ OUT SELECT ALL THAT APPLY FAMILY PLANNING.....1 VACCINATION.....2 MATERNAL HEALTH/PREGANCY CARE.3 CHILD HEALTH.....4 ADULT HEALTH.....5 EMERGENCY CARE.....6 PHARMACY.....7 OTHER (SPECIFY).....96 | Were you or the member of your household able to access the medical treatment/services? YES1 >>NEXT SECTION NO2 REFUSED..99>>NEXT SECTION | What was the main reason you or the member of your household were not able to access the medical treatment/services? DO NOT READ OUT LACK OF MONEY1 NO MEDICAL PERSONNEL AVAILABLE2 TURNED AWAY BECAUSE FACILITY WAS FULL3 FACILITY WAS CLOSED.....4 LIMITED/NO TRANSPORTATION5 RESTRICTION TO GO OUTSIDE6 AFRAID OF GOING AND GETTING THE VIRUS7 HEALTH FACILITY IS TOO FAR8 HOSPITAL/CLINIC NOT HAVING ENOUGH SUPPLIES OR TESTS...9 OTHER...555 | Over the past 7 days, did you need to access a shop/supermarket? YES1 NO2>>NEXT MODULE | Before entering the shop, were you asked to Wear Mask? YES1 NO2 | Before entering the shop, were you asked to Wash Hands? YES1 NO2 | Before entering the shop, were you asked to Sanitize your Hands? YES1 NO2 | Before entering the shop, were you asked to wait on a line till space was available? YES1 NO2 |
| | | | | | | | |

Section 6B. Employment

| | STATUS IN EMPLOYMENT | | | WHY NOT CURRENTLY WORKING | |
|--|--|---|--|--|---|
| FILTER | 1 | 1a | 1b | 1c | 3 |
| <p>TWO CASES BASED ON RESPONSE IN LAST INTERVIEW:</p> <p>CASE 1: RESPONDENT WAS WORKING IN [LAST_INTERVIEW]</p> <p>CASE 2: RESPONDENT WAS NOT WORKING [LAST_INTERVIEW]</p> | <p>Last week, that is from Monday [DATE] up to Sunday [DATE], did you do any work for pay, do any kind of business, farming or other activity to generate income, even if only for one hour?</p> <p>YES...1 IF CASE 1 >>Q4A IF CASE 2 >>Q5 NO....2</p> | <p>Even though you did not work last week, do you have a job, business or family farm from which you were absent last week to which you</p> <p>YES...1 NO....2 >> Q3 IF CASE 1, Q3a IF CASE 2</p> | <p>When do you expect to return to this job?</p> <p>WITHIN ONE WEEK.....1 WITHIN ONE MONTH.....2 WITHIN THREE MONTHS.....3 IN MORE THAN THREE MONTHS...4 DON'T KNOW.....98</p> | <p>Why did you not work last week?</p> <p>DO NOT READ OPTIONS</p> <p>BUSINESS / OFFICE CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS.....1 BUSINESS / OFFICE CLOSED FOR ANOTHER REASON.....2 LAID OFF WHILE BUSINESS CONTINUES.....3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE (FURLOUGHED).....4 VACATION5 ILL / QUARANTINED6 NEED TO CARE FOR ILL RELATIVE7 SEASONAL WORKER.....8 RETIRED9 NOT ABLE TO GO TO FARM DUE TO MOVEMENT RESTRICTIONS10 NOT ABLE TO FARM DUE TO LACK OF INPUTS11 NOT FARMING SEASON12 ROTATION OF PERSONEL DUE TO CORONAVIRUS (MY TURN IS NEXT WEEK)13 OTHER (SPECIFY)96</p> <p>>> Q4a IF CASE=1, >> Q4a IF CASE=2, OR >> Q5 IF CASE=3</p> | <p>Why did you stop working?</p> <p>DO NOT READ OPTIONS</p> <p>BUSINESS / GOV'T CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS1 BUSINESS / GOV'T CLOSED FOR ANOTHER REASON2 LAID OFF WHILE BUSINESS CONTINUES3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE (FURLOUGHED)4 VACATION5 ILL / QUARANTINED6 NEED TO CARE FOR ILL RELATIVE7 SEASONAL WORKER8 RETIRED9 NOT ABLE TO GO TO FARM DUE TO MOVEMENT RESTRICTIONS10 NOT ABLE TO FARM DUE TO LACK OF INPUTS11 NOT FARMING SEASON12 ROTATION OF PERSONEL DUE TO CORONAVIRUS (MY TURN IS NEXT WEEK)13 OTHER (SPECIFY)96</p> |
| | | | | | |

| JOB SEARCH | | CHANGE IN JOBS | | ACTUAL JOB | |
|--|--|--|--|--|---|
| 3a | 3b | 4a. | 4b. | 5a. | 5 |
| <p>During the last four weeks, did you do anything to find a paid job or start a business?</p> <p>YES..1 NO..2 >>NEXT MODULE</p> | <p>What did you mainly do in the last four weeks to find a paid job or start a business?</p> <p>DO NOT READ OPTIONS</p> <p>APPLY TO PROSPECTIVE EMPLOYERS.....1 PLACE OR ANSWER JOB ADVERTISEMENTS.....2 STUDY OR READ JOB ADVERTISEMENTS.....3 REGISTER WITH (EMPLOYMENT CENTER).....4 REGISTER WITH PRIVATE RECRUITMENT OFFICES.....5 TAKE A TEST OR INTERVIEW.....6 SEEK HELP FROM RELATIVES, FRIENDS, OTHERS.....7 CHECK AT FACTORIES, WORK SITES.....8 WAIT ON THE STREET TO BE RECRUITED.....9 SEEK FINANCIAL HELP TO START A BUSINESS.....10 LOOK FOR LAND, BUILDING, EQUIPMENT, MATERIALS TO START A BUSINESS.....11 APPLY FOR PERMIT OR LICENSE TO START A BUSINESS.....12 OTHER (SPECIFY).....96 >>NEXT MODULE</p> | <p>CASE 1: Is this the same job you were doing when we last spoke on [LAST_INTERVIEW DATE]?</p> <p>YES..1 >>Q6 NO..2</p> | <p>Why did you change jobs?</p> <p>DO NOT READ OPTIONS</p> <p>PREVIOUS BUSINESS / JOB CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS.....1 PREVIOUS BUSINESS / JOB CLOSED FOR ANOTHER REASON.....2 LAID OFF WHILE BUSINESS CONTINUES IN PREVIOUS JOB.....3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE FROM PREVIOUS JOB (FURLOUGHED).....4 ILL / QUARANTINED.....6 NEED TO CARE FOR ILL RELATIVE.....7 SEASONAL WORKER.....8 NOT ABLE TO GO TO FARM DUE TO MOVEMENT RESTRICTIONS.....10 NOT ABLE TO FARM DUE TO LACK OF INPUTS.....11 NOT FARMING SEASON.....12 OTHER (PLEASE SPECIFY).....96</p> | <p>Please provide a description of the primary activity/tasks you performed in your main work last week.</p> <p>PLEASE WRITE A SHORT DESCRIPTION OF THE PRIMARY ACTIVITY</p> | <p>What is the main activity of the business or organization in which you worked <u>last week</u>?</p> <p>DO NOT READ OPTIONS</p> <p>AGRICULTURE.....1 MINING.....2 MANUFACTURING.....3 PROFESSIONAL/ SCIENTIFIC/TECHNICAL ACTIVITIES.....4 ELECTRICITY/WATER/GAS/WASTE.....5 CONSTRUCTION.....6 TRANSPORTATION.....7 BUYING AND SELLING.....8 FINANCIAL/INSURANCE/ REAL EST. SERVICES.....9 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION.....13 TOURISM.....14 FOOD PROCESSING.....15 OTHER, SPECIFY.....16</p> |
| | | | | | |

| WAGE WORK | | |
|---|--|--|
| 6 | 6a. | 8b |
| <p>In the work you did <u>last week</u>, did you work....</p> <p>READ RESPONSES</p> <p>In your own business1 >>NEXT MODULE</p> <p>In a business operated by a household or family member2 >>NEXT MODULE</p> <p>In a family farm growing crops, raising livestock, or fishing.....3 >>NEXT MODULE</p> <p>As an employee for someone else4</p> | <p>Thinking about all the family [farming products/animals/fish] you worked on, are they intended...</p> <p>READ OPTIONS</p> <p>Only for sale.....1</p> <p>Only for family consumption2</p> <p>Some will be sold, some will be consumed by the family3</p> | <p>How many hours did you work in your main job last week?</p> <p>IF Q1==1</p> |
| | | |

Section 6B. Non-Farm Enterprise

| CASES | 11. | 11a. | 11b. | 11c. | 12. | 13. | 14. |
|---|---|--|---|---|--|---|---|
| FIVE CASES BASED ON LAST INTERVIEW AND EMPLOYMENT RESPONSES: | Since last phone call on [LAST INTERVIEW DATE], did you or any member of your household operate a non-farm family business? | CASE 1: What is the current status of your family business, the one you said was temporarily closed when we spoke on [LAST INTERVIEW DATE]? CASE 2 OR 4: What is the current status of your family business, the one you were operating when we spoke last time on [LAST INTERVIEW DATE]? CASE 3 OR 5: What is the current status of your family business? | Why is your family business closed? USUAL PLACE OF BUSINESS CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS1 USUAL PLACE OF BUSINESS CLOSED FOR ANOTHER REASON2 NO CUSTOMERS / FEWER CUSTOMERS3 CAN'T GET INPUTS4 CAN'T TRAVEL / TRANSPORT GOODS FOR TRADE5 ILL / QUARANTINED DUE TO CORONAVIRUS6 ILL WITH ANOTHER DISEASE7 NEED TO TAKE CARE OF A FAMILY MEMBER8 SEASONAL CLOSURE9 VACATION10 OTHER, SPECIFY96 | Please describe the main activity of this family business. PLEASE WRITE A SHORT DESCRIPTION OF THE PRIMARY ACTIVITY IF Q11==1 OR Q11b (CASE 1)==1 | Which of the following best describes the sector of the family business? DO NOT READ OPTIONS AGRICULTURE1 MINING2 MANUFACTURING3 PROFESSIONAL/ SCIENTIFIC/TECHNICAL ACTIVITIES4 ELECTRICITY/WATER/GAS/WASTE5 CONSTRUCTION6 TRANSPORTATION7 BUYING AND SELLING8 FINANCIAL/INSURANCE/ REAL EST. SERVICES9 PERSONAL SERVICES10 EDUCATION11 HEALTH12 PUBLIC ADMINISTRATION13 TOURISM14 FOOD PROCESSING15 OTHER, SPECIFY16 | Compared to when we last spoke, are the revenue from sales from the non-farm family business... READ OPTIONS Higher1 >> Q15 The same2 >> Q15 Less3 No revenue4 | Q13=4: Why was there no revenue from sales? Q13=3: Why was the revenue from the business sales less than in [LAST MONTH]? DO NOT READ OPTIONS USUAL PLACE OF BUSINESS CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS1 USUAL PLACE OF BUSINESS CLOSED FOR ANOTHER REASON2 NO CUSTOMERS / FEWER CUSTOMERS3 CAN'T GET INPUTS4 CAN'T TRAVEL / TRANSPORT GOODS FOR TRADE5 ILL / QUARANTINED DUE TO CORONAVIRUS6 ILL WITH ANOTHER DISEASE7 NEED TO TAKE CARE OF A FAMILY MEMBER8 SEASONAL CLOSURE9 VACATION10 OTHER, SPECIFY96 |
| CASE 1: HOUSEHOLDS THAT HAD AN NFE TEMPORARILY CLOSED AT LAST INTERVIEW >> Q11a | | | | | | | |
| CASE 2: HOUSEHOLDS THAT WERE OPERATING AT [LAST INTERVIEW] >> Q11a | | | | | | | |
| 3. HOUSEHOLDS THAT WERE NOT OPERATING AT [LAST INTERVIEW] AND THOSE THAT REPORTED BEING PERMANENTLY CLOSED LAST INTERVIEW >> Q11 | YES.1 NO..2 >> Q16 | READ OPTIONS Open1 >> Q15 IF CASE=1, Q13 IF CASE=2, Q12 IF CASE=3, Q13 IF CASE=4, Q12 IF CASE=5 Temporarily closed ..2 Permanently closed ..3 | IF CASE=3, 5 >> Q12 IF CASE=1,2,4 & Q11a=2 >> Q15 IF CASE=1,2,4 & Q11a=3 >> Q16 | | | | |
| CASE 4: RESPONDENTS THAT WORKED ON A FAMILY BUSINESS LAST WEEK (IF Q6=1 or Q6=2) AND WERE OPERATING AT [LAST INTERVIEW] >> Q11a | | | | | | | |
| CASE 5: RESPONDENTS THAT WORKED ON A FAMILY BUSINESS LAST WEEK (IF Q6=1 or Q6=2) AND WERE NOT OPERATING AT [LAST INTERVIEW] | | | | | | | |
| | | | | | | | |

Section 6D. CREDIT

INTERVIEWER: Now I will ask you some questions regarding credit/loan

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|--|--|--|---|--|
| <p>1</p> <p>Since <u>our last call</u>, have you or anyone in your household successfully obtained a loan from sources such as banks, cooperative societies, savings associations, micro-finance institutions, money lenders, family, friends, etc?</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>YES.....1 NO, FAILED TO OBTAIN A LOAN.....2 >>3 NO, DID NOT SEEK ANY LOAN.3 >> Q10</p> </div> | <p>2</p> <p>From whom did you or others in your household borrow money?</p> <p>SELECT ALL THAT APPLY. DO NOT READ OPTIONS</p> <p>CAPI: ANSWER IF SUCCESSFULLY OBTAINED A LOAN</p> <p>COOPERATIVE SOCIETY....1 SAVINGS ASSOCIATION....2 MICRO FINANCE.....3 BANK.....4 FRIENDS & RELATIVES....5 MONEY LENDERS.....6 HIRE PURCHASE.....7 WOMEN GROUP/ ASSOCIATION.....8 OTHER (SPECIFY).....95</p> <p>>>Q4</p> | <p>3</p> <p>From whom did you or others in your household attempted to borrow money?</p> <p>SELECT ALL THAT APPLY. DO NOT READ OPTIONS</p> <p>CAPI: ANSWER IF FAILED TO OBTAINED A LOAN</p> <p>COOPERATIVE SOCIETY....1 SAVINGS ASSOCIATION....2 MICRO FINANCE.....3 BANK.....4 FRIENDS & RELATIVES....5 MONEY LENDERS.....6 HIRE PURCHASE.....7 WOMEN GROUP/ ASSOCIATION.....8 OTHER (SPECIFY).....95</p> <p>>>Q5</p> | <p>4</p> <p>What was the main purpose for borrowing money? DO NOT READ OUT OPTIONS CAPI: ONLY IF LOAN WAS SUCCESSFULLY OBTAINED</p> <p>BUY LAND.....1 BUY LIVESTOCK.....2 BUY FARM TOOLS/IMPLEMENTS.....3 BUY FARM INPUTS (SEEDS, FERTILIZER).....4 PURCHASE OF INPUTS/ WORKING CAPITAL FOR NON FARM ENTERPRISES.....5 HOUSE CONSTRUCTION OR PURCHASE.....6 BUY FOOD STUFF.....7 PAY FOR EDUCATION EXPENSES.....8 PAY FOR HEALTH EXPENSES.....9 PAY FOR CEREMONIES EXPENSES.....10 BUY OTHER NON-FOOD CONSUMPTION GOODS/SERVICES..11 REPAY OTHER DEBTS.....12 OTHERS (specify).....95</p> <p>>>Q6</p> | <p>5</p> <p>What was the main purpose for attempting to borrow money? DO NOT READ OUT OPTIONS CAPI: ONLY IF LOAN WAS SUCCESSFULLY OBTAINED</p> <p>BUY LAND.....1 BUY LIVESTOCK.....2 BUY FARM TOOLS/IMPLEMENTS.....3 BUY FARM INPUTS (SEEDS, FERTILIZER).....4 PURCHASE OF INPUTS/ WORKING CAPITAL FOR NON FARM ENTERPRISES.....5 HOUSE CONSTRUCTION OR PURCHASE.....6 BUY FOOD STUFF.....7 PAY FOR EDUCATION EXPENSES.....8 PAY FOR HEALTH EXPENSES.....9 PAY FOR CEREMONIES EXPENSES.....10 BUY OTHER NON-FOOD CONSUMPTION GOODS/SERVICES..11 REPAY OTHER DEBTS.....12 OTHERS (specify).....95</p> <p>>>Q7</p> |
| <p>6</p> <p>Which household member(s) borrowed money?</p> <p>ID OF MEMBERS</p> <p>SELECT ALL THAT APPLY</p> <p>>>Q8</p> | <p>7</p> <p>Which household member(s) attempted to borrow money?</p> <p>ID OF MEMBERS</p> <p>SELECT ALL THAT APPLY</p> <p>>> Q10</p> | <p>8</p> <p>Approximately when is the final payment of the loan due?</p> | <p>9</p> <p>How worried are you that you will not be able to repay all the money you borrowed within the repayment period?</p> <p>Very worried1 Somewhat worried2 Not too worried3 Not worried at all ..4</p> | <p>10</p> <p>Do you or others in your household have any other loans taken before BEFORE our last call that you have to repay?</p> <p>EXCLUDING LOANS THAT ARE ALREADY FULLY REPAYED</p> <p>YES..1 NO...2 >> NEXT SECTION</p> |

Section 6D. CREDIT Continued...

| | | | | |
|---|---|--|---|--|
| 11 | 12 | 13 | 14 | 15 |
| <p>What was the main purpose for borrowing money before before our last call?</p> <p>BUY LAND.....1 BUY LIVESTOCK.....2 BUY FARM TOOLS/IMPLEMENTS.....3 BUY FARM INPUTS (SEEDS, FERTILIZER).....4 PURCHASE OF INPUTS/ WORKING CAPITAL FOR NON FARM ENTERPRISES.....5 HOUSE CONSTRUCTION OR PURCHASE.....6 BUY FOOD STUFF.....7 PAY FOR EDUCATION EXPENSES.....8 PAY FOR HEALTH EXPENSES.....9 PAY FOR CEREMONIES EXPENSES.....10 BUY OTHER NON-FOOD CONSUMPTION GOODS/SERVICES..11 REPAY OTHER DEBTS.....12 OTHERS (specify).....95</p> | <p>Which household member(s) borrowed money before our last call?</p> <p>ID OF MEMBERS</p> <p>SELECT ALL THAT APPLY</p> | <p>How worried are you that you will not be able to repay the outstanding loan(s) taken before our last call?</p> <p>Very worried1 Somewhat worried2 Not too worried3 Not worried at all ..4</p> | <p>Since our last call, have you missed a loan payment or stopped paying any loans?</p> <p>ASK IF Q1=1 OR Q10=1</p> <p>YES..1 NO...2 >> NEXT SECTION</p> | <p>Did the lender agree to delay the payments or change the payment arrangement?</p> <p>YES.....1 NO.....2 DON'T KNOW...99</p> |
| | | | | |

Section 8. FOOD INSECURITY EXPERIENCE SCALE

Now I would like to ask you some questions about food . During the **last 30 days**, was there a time when:

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 |
|--|--|--|---|---|--|---|--|
| You or others in your household <u>were worried about not having enough food to eat because of lack of money or other resources?</u> | You, or others in your household, were <u>unable to eat healthy and nutritious/ preferred foods</u> because of a lack of money or other resources? | You, or any other adult in your household, <u>ate only a few kinds of foods</u> because of a lack of money or other resources? | You, or any other adult in your household, had to <u>skip a meal</u> because there was not enough money or other resources to get food? | You, or any other adult in your household, <u>ate less than you thought you should</u> because of a lack of money or other resources? | Your household <u>ran out of food</u> because of a lack of money or other resources? | You, or any other adult in your household, were <u>hungry but did not eat</u> because there was not enough money or other resources for food? | You, or any other adult in your household, <u>went without eating for a whole day</u> because of a lack of money or other resources? |
| YES..1 NO..2 | YES..1 NO..2 | YES..1 NO..2 | YES..1 NO..2 | YES..1 NO..2 | YES..1 NO..2 | YES..1 NO..2 | YES..1 NO..2 |
| | | | | | | | |

Section 9. CONCERNS

| 1 | 2 |
|--|--|
| <p>How do you feel about the possibility that you or someone in your immediate family might become seriously ill from COVID-19 (corona virus disease)?</p> <p>READ OUT ANSWER OPTIONS</p> <p>Very worried1 Somewhat worried2 Not too worried3 Not worried at all ..4</p> | <p>How much of a threat would you say the corona virus outbreak is to your household's finances?</p> <p>READ OUT ANSWER OPTIONS</p> <p>A substantial threat1 A moderate threat2 Not much of a threat3 Not a threat at all4</p> |
| | |
| | |

Section 11. SAFETY NETS

| A S S I C S O T D A E N C E | | 1. | 2. | 3. | 4. | |
|--|---|--|---|--|---|--|
| | | <p>Since our call on <u>November 2020</u>, has any member of your household received any assistance from any institution such as the government, international organisations, religious bodies in form of ...?</p> <p>EXCLUDE ASSISTANCE FROM FAMILY AND FRIENDS</p> <p>ANSWER ALL OPTIONS BEFORE PROCEEDING</p> <p>YES...1 NO....2 >> NEXT ITEM</p> | <p>What was the total value of [ASSISTANCE]?</p> <p>MWK</p> | <p>What was the main source of this [ASSISTANCE]?</p> <p>SELECT ALL SOURCES THAT APPLY</p> <p>GOVERNMENT1 COMMUNITY ORGANIZATION2 NGO.....3 INTERNATIONAL ORGANISATION...4 RELIGIOUS BODIES.....5 COOPERATE COMPANIES.....6 OTHER (SPECIFY).....95</p> | <p>When did you receive it?</p> <p>JANUARY.....1 FEBRUARY.....2 MARCH.....3 APRIL.....4 MAY.....5 JUNE.....6 JULY.....7 AUGUST.....8 SEPTEMBER....9 OCTOBER.....10 NOVEMBER....11 DECEMBER.....12</p> <p>DATE MONTH</p> | |
| 1 | Free Food | | | | | |
| 2 | Social Cash Transfer, SCT (Mtukula Pakhoma) | | | | | |
| 3 | COVID-19 Urban Cash Intervention, CUCI (Mzati Pa Covid) | | | | | |
| 4 | Other cash transfers | | | | | |
| 5 | Other in-kind transfers (excluding food) | | | | | |

Section 12. Interview Result

| | 1 | 2 | 3 | 4 |
|---|--|------------------------------------|---|---|
| <p>INTERVIEWER READ OUT: Thank you very much for your participation in this survey! I will be transferring 1000 Malawi Kwacha Airtime to your phone shortly as a thank you for your time today.</p> <p>I may try to contact you in future for another short interview. Before you go, I have a couple of questions to help in case I need to contact you in future.</p> | <p>Is this number the best one to reach you or your household in the future or would it be better to use another number?</p> <p>THIS NUMBER.....1 >> q3 ANOTHER NUMBER...2</p> | <p>Which number would be best?</p> | <p>What day of the week will be best to reach you?</p> <p>SELECT ALL THAT APPLY</p> <p>MONDAY.....1 TUESDAY.....2 WEDNESDAY...3 THURSDAY....4 FRIDAY.....5 SATURDAY....6 SUNDAY.....7</p> | <p>What time of the day would be best to call you?</p> <p>SELECT ALL THAT APPLY</p> <p>ANYTIME OF THE DAY.....0 MORNING.....1 AFTERNOON.....2 EVENING.....3</p> |
| | | PHONE NUMBER | | |

| meta1 | meta2 | meta3 | meta4 | meta5 |
|---|--|--|--|---|
| <p>May I know where are you taking this call from?</p> <p>HOME.....1 ELSEWHERE IN THE COMMUNITY...2 WORKPLACE.....3 OTHER LOCATION, SPECIFY.....555</p> | <p>Are you indoors or outdoors?</p> <p>INDOORS....1 OUTDOORS...2</p> | <p>How many mobile signal bars do you currently see on your phone?</p> | <p>Which mobile network are you using for this call?</p> <p>Access.....1 Airtel.....2 MTL.....3 TNM.....4 OTHER, SPECIFY...555</p> | <p>Do you usually get cell phone reception in your community?</p> <p>YES.....1 NO.....2</p> |
| | | | | |

[illegible]