



**Rapid Gender Assessment Survey Questionnaire:  
Consequences of COVID-19 on women's and men's economic empowerment**

[SELECT LANGUAGE]

“Thank you for agreeing to fill out this survey. The rapid spread of COVID-19 (Coronavirus) has taken the world by surprise and UN Women aims to understand how the pandemic is affecting women and men. This survey should take no more than 10 minutes to complete. All responses will be kept strictly confidential. We appreciate your time.”

**Q1. Sex**

1. Male
2. Female

**Q2. Age**

\_\_ [YEARS]

**Q3. Marital status**

1. Single (never married)
2. Married
3. Living with partner/Cohabiting
4. Married but separated
5. Widowed and not remarried
6. Divorced and not remarried

**Q4. Highest educational level completed**

1. No education
2. Primary
3. Secondary
4. Tertiary

**Q5. Current nationality**

**Q5.1 Current location**

**Q6. How many people live with you?**

0. I live alone
1. Number of children 0-17 \_\_\_\_\_
2. Number of adults 18-64 \_\_\_\_\_
3. Number of elderly 65+ \_\_\_\_\_

**Q7. What is your main source of information regarding COVID-19 risks and prevention?**

1. Internet & social media
2. Official Government websites
3. Radio/Television/Newspaper
4. Public service announcement/speaker
5. Phone (text or call)
6. Community, including family and friends
7. NGO/Civil Society organization
8. Other
9. Do not know about COVID19

**Q8. How would you rate the information you received?**

1. I did not receive any information
2. Clear and helped me prepare
3. Clear but it came too late for me to prepare
4. Confusing/contradictory

**Q9. How would you best describe your employment status during a typical week prior to the spread of COVID-19?**

1. I worked for a person/company/household
2. I had my own business and I employed other people
3. I had my own business/FREELANCER but I did not employ other people
4. I helped (without pay) in a family business
5. I did not work (I was not looking for a job and I was not available to work)
6. I am retired
7. I did not work because I am studying full time
8. I did not work, I have a long-term health condition
9. I did not work (but I am looking for a job and I am available to start working)
10. Other

**Q 9.1 Would you say that the money that you used to earn before COVID-19 was:**

1. More than what my partner earns
2. Less than what my partner earns
3. About the same
4. I have no earnings
5. Partner has no earnings
999. I don't know

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Q 9.2 Since the spread of COVID-19, has the number of hours devoted to paid work changed?

1. Increased
2. No change/It is the same
3. Decreased, but I didn't lose my job
4. I lost my job
999. I do not know

Q 9.3 Does your employer pay contributions toward pension and health insurance on your behalf?

1. Yes
2. No
999. I do not know

Q 9.4 Is your business formally registered?

1. Yes
2. No
999. I don't know

Q 9.5 Do you receive any unemployment benefits/financial support from the Government?

1. Yes
2. No
999. I don't know

Q10. Are you currently covered by any form of health insurance or health plan?

1. Covered by health insurance
2. Not covered by health insurance
999. I don't know

**Q11. As a result of COVID-19, how have the following household resources been affected?**

	Increase	Unchanged	Decrease	Not a source of income/support
Income from own farming or fishing				
Income from other family business				
Income from a paid job				
Food for consumption from own farming/animals/ fishing				
Money from people living abroad				
Support from family/friends in the country (money, food, etc)				
Income from properties, investments or savings				
Government support (in cash or kind)				
Charity from NGOs or other organizations				

**Q12. As a result of COVID-19, has the number of hours devoted to the following activities changed?**

	I do not usually do it	Increased	Unchanged	Decreased
1. Cooking and serving meals				
2. Cleaning (e.g. clothes, household)				
3. Decoration, repair and household management (e.g. paying bills)				
4. Shopping for my household/ family members				
5. Collecting water/fuel				
6. Minding children while doing other tasks (e.g. paid work)				
7. Playing with, talking to and reading to children				
8. Instructing, teaching, training children				
9. Caring for children, including feeding, cleaning, physical care				
10. Assisting older/sick/disabled adults with medical care, feeding, cleaning, physical care				
11. Assisting older/sick/disabled adults with administration and accounts				
12. Affective/emotional support for adult family members				
13. Pet care				

**Q13. Since the spread of COVID-19, in which activity do you spend the most time?**

1. Cooking and serving meals
2. Cleaning (e.g. clothes, household)
3. Decoration, repair and household management (e.g. paying bills)
4. Shopping for the family
5. Collecting water/fuel
6. Minding children while doing other tasks (e.g. paid work)
7. Playing with, talking to and reading to children
8. Instructing, teaching, training children
9. Caring for children, including feeding, cleaning, physical care
10. Assisting older/sick/disabled adults with medical care, feeding, cleaning, physical care
11. Assisting older/sick/disabled adults with administration and accounts
12. Affective/emotional support for adult family members
13. Pet care

**Q14. Since the spread of COVID-19...**

	Yes	No	Not applicable
1. My partner helps me more with household chores and caring for family			
2. My daughter(s) helps me more with household chores and caring for family			
3. My son(s) helps me more with household chores and caring for family			
4. Other family members help me more with household chores and caring for family			
5. Hired a domestic worker/babysitter/nurse			
6. Domestic worker/babysitter/nurse works longer hours with us			
7. Domestic worker/babysitter/nurse no longer works with us			
8. My relatives can no longer help with household chores and caring for family			

Q15. As a result of COVID-19, did you (personally) experience any of the following:

	YES	NO	Not applicable
1. Physical illness			
2. Death of a household/family member			
3. Illness of a household/family member			
4. Children's school was cancelled or reduced			
5. Migrated to different geographical area within the same country			
6. Migrated to a different country			
7. Water source was compromised			
8. Mental/Emotional health was affected (e.g. stress, anxiety)			
9. Difficulty accessing medical supplies/hygiene products/food			
10. Longer wait times to visit doctors/seek medical care			
11. Unable to seek medical care			
12. Lost access to/could not use public transport			
13. Unable to perform usual personal care/ health routines			

Q16. Are you...

1. The registered owner of this mobile phone
2. One of the users of the phone which is registered in someone else's name

END: THANK YOU! If you would like to know the results of the survey, in a few weeks please check:  
<https://data.unwomen.org/>

STAY SAFE!

