

QUESTIONNAIRE:
**RAPID GENDER ASSESSMENT SURVEYS ON
THE LINGERING GENDERED EFFECTS
OF THE COVID-19 PANDEMIC IN ASIA
AND THE PACIFIC**



LEGEND	
■	SKIPS
■	INSTRUCTIONS FOR ENUMERATORS
■	FILTER QUESTIONS
■	NATIONAL ADAPTATION

SCRIPT SPECIFICATION

Variable label	Questions	Response categories CODES
r00	Date of the interview	DD/MM/YY
r01	Telephone number of sampled individual	
r02	Serial number	_ _ _ _ _
enuid	Enumerator's identification number	[SELECT FROM DROPDOWN MENU]
intgender	Enumerator's sex	1 Male 2 Female

Variable label	Interview	Response categories CODES
r03	Interview completed	1
	In the process of making an appointment (the respondent has already answered the screener)/mid interview	2
	IN PROCESS - Before screener	
	Call the respondent back (no answer, busy call backs)	3
	In the process of making an appointment (screener not answered yet)	4
	UNOBTAINABLE	
	No reply after having called 3 times on different days of the week and different business hours	5
	Answering machine - Fax line- data line / Line out of order	6
	Wrong number	7
	Phone is switched off/poor network	8
UNSUCCESSFUL		
Screened out (ineligible household/respondent)	9	
Refusal	10	

ROSTER AND SCREENING

ASK ALL

[READ INTRODUCTION IN THE MAIN LOCAL LANGUAGE]

Introduction

Hello, my name is [INTERVIEWER'S NAME] and I am calling to conduct a survey on behalf of UN Women and the Asian Development Bank in partnership with [Name of government body], about the consequences of COVID-19 on women, men, girls and boys. You have been randomly selected to participate in this assessment and your feedback and cooperation will be highly appreciated. The survey will focus on how COVID-19 affected you and your family. If you agree to continue, your responses will be kept strictly confidential.

If you agree to participate, the survey will take 15 minutes.

ASK ALL

[DO NOT READ ANSWERS. SINGLE RESPONSE]

Variable label	Do you wish to proceed ?	Response categories CODES
s1	Yes	1
	Not right now (make another appointment) [GO TO S2]	2
	No	3

ASK ALL

[SINGLE RESPONSE]

Variable label	Country	Response categories CODES
Country	Indonesia	1
	Kiribati	2
	Pakistan	3
	Papua New Guinea	4
	Samoa	5
	Solomon Islands	6
	Tonga	7

location1	Can you please tell me the region where you live?	[SELECT FROM DROPDOWN MENU]
location2	Please tell me the district/province name.	[SELECT FROM DROPDOWN MENU]

ASK IF s1 IS 1			
[DO NOT READ ANSWERS. SINGLE RESPONSE]			
Variable label	Which language do you wish to proceed with?		Response categories CODES
s1a	English	[For all]	1
	Bahasa	[If country=1]	2
	Gilbertise	[If country=2]	3
	Urdu	[If country=3]	4
	Tok Pisin	[If country=4]	5
	Samoan	[If country=5]	6
	Solomon Pijin	[If country=6]	7
	Tongan	[If country=7]	8

ASK IF s1 IS 2		
[RECORD HH/MM/DD OF CALLBACK]		
s2	Since you are busy to respond now, when would be a good time to call you back?	Response categories CODES
		HH/DD/MM

ASK IF s2 IS AGREED	
[READ AND END THE SURVEY. THEN GO TO r03]	
s2a	<p>Thank you, we will call you back at [HH/DD/MM] as you requested.</p> <p>Thank you again and have a great day!</p>

FOR ENUMERATORS ONLY – IF s2a IS AGREED UPON	
[ENTER CALL NOTES BELOW, WHO YOU SPOKE TO AND WHAT THEY SAID]	
s2b	

ASK IF s1 IS 3	
[READ AND END THE SURVEY]	
s3	Thank you for your time, you will be removed from today's survey.

A. DEMOGRAPHIC CHARACTERISTICS**ASK ALL****[DO NOT READ ANSWERS. SINGLE RESPONSE]**

Variable label	What is your sex?	Response categories CODES
a01	Male	1
	Female	2
	Other	3
	Refused [DO NOT READ]	99

ASK ALL**[WRITE YEARS, SINGLE RESPONSE]****[IF DECLARED AGE IS BELOW 18 -> END INTERVIEW]**

Variable label	How old are you?	Response categories CODES
a02	Response in years	
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK IF a02 IS 98 OR 99**[SINGLE RESPONSE]****[IF DECLARED AGE IS BELOW 18 -> FINISH INTERVIEW s3 AND THEN GO TO r03]**

Variable label	This study is targeting people 18 years and above. Can you please confirm that you are 18 years or older?	Response categories CODES
a02a	Yes [PROCEED TO NEXT QUESTION]	1
	No [END]	0

ASK ALL**[READ ANSWERS. SINGLE RESPONSE]**

Variable label	Do you live in a?	Response categories CODES
a03	City	1
	Town	2
	Village/ rural area	3
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK ALL**[DO NOT READ ANSWERS. SINGLE RESPONSE]**

Variable label	What is the highest level of education that you completed?	Response categories CODES
a04	No Formal Education	1
	Some Primary School	2
	Completed Primary School	3
	Some Secondary School	4
	Completed Secondary School	5
	Technical & Vocational Training	6
	Some University/College Completed	7
	Completed University/College	8
	Some Post Graduate Completed	9
	Completed Post Graduate	10
	Not stated/I do not know	98
	Refused	99

ENUMERATOR ONLY – DO NOT ASK**[ELIGIBLE FOR THE INTERVIEW IF QUOTA BY REGION/AGE/SEX/ EDUCATION]**

a05	Yes	1
	No	0

ASK ONLY IF a05 IS 0**[READ AND END INTERVIEW]**

a05a	I am sorry that you are not eligible for the survey, as we have already interviewed enough people with your profile. We appreciate you taking the time to speak to us.
------	--

ASK ALL		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	What is your current marital status?	Response categories CODES
a06	Married	1
	Married but separated/separated	2
	Widowed	3
	Divorced	4
	Single (never married)	5
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK ALL		
[MULTIPLE ANSWERS. ENTER NUMBER FOR EACH AGE AND SEX CATEGORY. IF THERE ARE NO MEMBERS OF SPECIFIC AGE CATEGORY, ENTER ZERO. THE RESPONDENT IS RECORDED IN THE FIRST ROW AND THE REMAINING ROWS EXCLUDE THE RESPONDENT]		
[Ask first the total number of members in the household, and then later for the CAPI validation compare this total provided by the respondent against the calculated sum across the age categories]		
Variable label	How many people live with you in your household currently (that is, people living and eating together under the same roof in the past 3 months) including you?	
a07	ASK - TOTAL [number of females + number of males, including respondent]	Number _____
Out of total number of household members, how many...		
	a07a1: Number of children 0-17 years	Number _____
	a07a2: Number of adults 18-64 years	Number _____
	a07a3: Number of elderly 65 or over years	Number _____
	a07b TOTAL [DO NOT ASK THIS QUESTION – CAPI VALIDATION]	[INCLUDING RESPONDENT] Number _____

PROMPT IF a07 IS NOT SAME AS a07b		
Prompt01	You mentioned that total number of household members [take from a07] but after summing the number mentioned for each category, it is [take from a07b] which is not matching with reported number. Can you please confirm?	1
	[interviewer to correct based on response]	

B. HEALTH

I will now ask you a few questions regarding your health and access to healthcare, since the spread of COVID-19.

ASK ALL (ONLY IN PAPUA NEW GUINEA)**[DO NOT READ ANSWERS. SINGLE ANSWER]**

Variable label	Do you think that since the onset of COVID-19 teenage pregnancy has increased in your community?	Response categories CODES
b01	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK ALL (ONLY IN PAPUA NEW GUINEA)**[READ ANSWERS. SINGLE ANSWER]**

Variable label	What is your <u>main</u> source of information regarding COVID-19 risks and prevention?	Response categories CODES
b02	Internet & social media	1
	Official Government websites	2
	Radio/Television/Newspaper	3
	Public service announcement/speaker	4
	Phone (text or call)	5
	Community, including family and friends	6
	NGO/Civil Society organization	7
	Other	8
	I did not receive any information	9
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK IF b02 IS NOT 9 OR 98 OR 99 (ONLY IN PAPUA NEW GUINEA)**[READ ANSWERS. SINGLE ANSWER]**

Variable label	How would you rate the information you received?	Response categories CODES
b03	Clear and helped me prepare	1
	Clear but it came too late for me to prepare	2
	Confusing/contradictory	3
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK ALL		
[DO NOT READ ANSWERS. SINGLE ANSWER]		
Variable label	Have you received a complete course of COVID-19 vaccination (e.g. two doses if using a double-dose vaccine)?	Response categories CODES
b04	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF b04=0		
[DO NOT READ ANSWERS. SINGLE ANSWER]		
Variable label	What is the main reason why you haven't received it?	Response categories CODES
b05	I received the first jab but I have not been called for a second one yet	1
	I missed my appointment	2
	People in my age group are not entitled to receive vaccinations yet	3
	People in my location are not entitled to receive vaccinations yet	4
	Too many people want vaccines so I have been put on a waiting list	5
	I am afraid of vaccine side effects	6
	I believe I am not at risk of contracting COVID-19 or it won't affect me severely	7
	Vaccination schedules are confusing	8
	Vaccination times are inconvenient	9
	I do not have time or cannot leave my home to go get a vaccine	10
	The vaccine is too expensive	11
	Vaccination centers are too far	12
	I am waiting for my partner to come with me	13
	I have been afraid to go to a hospital or health center	14
	My religion objects to vaccinations	15
	I have heard the vaccine is not effective	16
	I do not have a government ID or other necessary documents	17
	I did not know I could/should receive COVID-19 vaccinations	18
	I have been told breastfeeding or pregnant mothers should not get vaccinated	19
	Other	20
I do not know	98	
Refused	99	

C. ECONOMIC ACTIVITIES AND LIVELIHOODS

Now I am going to ask you about your main economic activity

ASK ALL		
[READ ANSWERS. SINGLE ANSWER]		
Variable label	Last week, what was your main job or main economic activity? (Which of the following best describes what you are mainly doing at present?)	Response categories CODES
c01	Working for pay for someone else (e.g. business, another household)	1
	Working for pay in a own or family business activity (outside agriculture)	2
	Working in own farming, raising animals or fishing mainly to sell (financially remunerated)	3
	Working in own farming, raising animals or fishing mainly for family consumption (not for pay)	4
	Taking care of the home/family (e.g. cooking, cleaning, childcare)	5
	Studying	6
	Doing an unpaid apprenticeship, internship	7
	Doing unpaid voluntary, community, charity work	8
	Looking for work	9
	Retired or pensioner	10
	No work due to long-term illness, injury or disability	11
	Other (specify:_____)	12
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK IF c01 IS 12		
[Please record the wording of the respondent. SINGLE ANSWER]		
Variable label	If yes please specify	Response categories CODES
c01other	TEXT	TEXT

ASK IF c01 IS 4-11 OR c01other		
[DO NOT READ ANSWERS. SINGLE ANSWER]		
Variable label	<p>[This question to appear if c01=4 to 11] In addition to this, last week were you working or doing any activity to generate an income, even if only for a few hours? (for example, babysitting, xxx)</p> <p>[This question to appear if c01other=text] Last week were you working or doing any activity to generate an income, even if only for a few hours? (for example, babysitting, xxx)</p>	Response categories CODES
c01a	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c01a=1		
[READ ANSWERS. SINGLE ANSWER]		
Variable label	Which of the following best describes what you were doing last week?	Response categories CODES
c01b	Working for pay for someone else (e.g. business, another household)	1
	Working for pay in my own or a family business activity (outside agriculture)	2
	Working on own farming, raising animals or fishing mainly to sell (financially remunerated)	3
	Working on own farming, raising animals or fishing mainly for family consumption (not for pay)	4
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK IF c01 IS 1-4 OR c01b IS 1,2,3,4,98,99		
[READ ANSWERS. SINGLE ANSWER]		
Variable label	Do you work as....?	Response categories CODES
c02a	Employee	1
	Paid apprentice, intern	2
	Employer (with hired employees)	3
	Own-account worker (without hired employees)	4
	Helper (without pay) in a family business	5
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK ONLY IF c02a IS 1-5 OR 98, 99

[DO NOT READ ANSWERS. PUT ANSWER IN APPROPRIATE CATEGORY. FOR MULTIPLE ACTIVITY ENTERPRISES: THE MAIN ACTIVITY REFERS TO THE ACTIVITY THAT CONTRIBUTES MOST TO THE VALUE ADDED OF THE ENTITY]

Variable label	In what economic sector is your business primarily engaged?	Response categories CODES
c02b	Agriculture, forestry and fishing	1
	Mining and quarrying	2
	Manufacturing	3
	Electricity, gas, steam and air conditioning supply	4
	Water supply; sewerage, waste management and remediation activities	5
	Construction	6
	Wholesale and retail trade; repair of motor vehicles and motorcycles	7
	Transportation and storage	8
	Accommodation and tourism	9
	Food service activities	10
	Information and communication	11
	Financial and insurance services	12
	Real estate activities	13
	Professional, scientific and technical activities	14
	Administrative and support service activities	15
	Public administration and defense; compulsory social security	16
	Education	17
	Human health and social work activities	18
	Arts, entertainment and recreation	19
	Other service activities	20
	Activities of households as employers; own-use production of goods and services	21
	Activities of extraterritorial organizations and bodies	22
I do not know	98	
Refused	99	

ASK IF c02a IS 1 OR 2

[DO NOT READ ANSWERS. SINGLE RESPONSE]

Variable label	Does your current employer pay contributions toward pension and/or health insurance [NAME OF NATIONAL PENSION FUND, HEALTH INSURANCE] on your behalf?	Response categories CODES
c02c	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c02a IS 3 OR 4		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	Is your current business registered in the [NAME OF NATIONAL BUSINESS REGISTER]?	Response categories CODES
c02d	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK ALL		
[READ ANSWERS. SINGLE RESPONSE]		
Variable label	Since THE ONSET OF COVID-19 in March 2020, did your main economic activity or main job change?	Response categories CODES
c03	No, it is the same as prior to COVID-19	1
	It changed temporarily, but is now back to normal (as prior to COVID-19)	2
	Yes, it changed since COVID-19	3
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK ONLY IF c03=3		
[READ ANSWERS. SINGLE ANSWER]		
Variable label	Which of the following best describes what you were MAINLY doing in a typical week before THE ONSET OF COVID-19 in March 2020?	Response categories CODES
c03a	Working for pay for someone else (e.g. business, another household)	1
	Working for pay in a own or family business activity (outside agriculture)	2
	Working in own farming, raising animals or fishing mainly to sell (financially remunerated)	3
	Working in own farming, raising animals or fishing mainly for family consumption (not for pay)	4
	Taking care of the home/family (e.g. cooking, cleaning, childcare)	5
	Studying	6
	Doing an unpaid apprenticeship, internship	7
	Doing unpaid voluntary, community, charity work	8
	Looking for work	9
	Retired or pensioner	10
	No work due to long-term illness, injury or disability	11
	Other	12
	I do not know [DO NOT READ]	98
Refused [DO NOT READ]	99	

ASK IF c03a IS 12		
[Please record the wording of the respondent. SINGLE ANSWER]		
Variable label	If yes, please specify	Response categories CODES
c03aother	TEXT	TEXT

PROMPT IF c01 IS EQUAL TO c03a		
Promptc03a	<p>You mentioned that, there has been change in your main economic activity since the onset of COVID-19. However, you reported that you are doing [Take response from c03a] now as well as before the onset of COVID-19. Can you please clarify?</p> <p>Yes, I confirm that I have checked with respondent [Interviewer to select]</p>	1

ASK IF c03a IS 4-11 OR c03aother		
[DO NOT READ ANSWERS. SINGLE ANSWER]		
Variable label	<p>[This question to appear if c03a=4 to 11]</p> <p>In addition to this activity, before THE ONSET OF COVID-19 in March 2020 in a typical week were you working or doing any other activity to generate an income, even if only for a few hours? (for example, babysitting, xxx)</p> <p>[This question to appear if c03aother]</p> <p>Before THE ONSET OF COVID-19 in March 2020 were you working or doing any activity to generate an income, even if only for a few hours a week? (for example...)</p>	Response categories CODES
c03b	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c03a IS 1-4 OR c03b IS 1		
[READ ANSWERS. SINGLE ANSWER]		
Variable label	Did you work as....?	Response categories CODES
c03c	Employee	1
	Paid apprentice, intern	2
	Employer (with hired employees)	3
	Own-account worker (without hired employees)	4
	Helper (without pay) in a family business	5
	I do not know [DO NOT READ]	98
	Refused [DO NOT READ]	99

ASK IF c03c IS ANSWERED		
[DO NOT READ ANSWERS. PUT ANSWER IN APPROPRIATE CATEGORY. FOR MULTIPLE ACTIVITY ENTERPRISES: THE MAIN ACTIVITY REFERS TO THE ACTIVITY THAT CONTRIBUTES MOST TO THE VALUE ADDED OF THE ENTITY]		
Variable label	In what economic sector was your business primarily engaged before the onset of COVID-19? Or what was the main activity of the place where you worked?	Response categories CODES
c03d	Agriculture, forestry and fishing	1
	Mining and quarrying	2
	Manufacturing	3
	Electricity, gas, steam and air conditioning supply	4
	Water supply; sewerage, waste management and remediation activities	5
	Construction	6
	Wholesale and retail trade; repair of motor vehicles and motorcycles	7
	Transportation and storage	8
	Accommodation and tourism	9
	Food service activities	10
	Information and communication	11
	Financial and insurance services	12
	Real estate activities	13
	Professional, scientific and technical activities	14
	Administrative and support service activities	15
	Public administration and defense; compulsory social security	16
	Education	17
	Human health and social work activities	18
	Arts, entertainment and recreation	19
	Other service activities	20
Activities of households as employers; own-use production of goods and services	21	
Activities of extraterritorial organizations and bodies	22	
I do not know	98	
Refused	99	

ASK ONLY IF c03c=1 OR 2		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	Before the onset of COVID-19 in March 2020, did your employer pay contributions toward pension and/or health insurance [NAME OF NATIONAL PENSION FUND, HEALTH INSURANCE] on your behalf?	Response categories CODES
c03e	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK ONLY IF c01c=3 OR 4

[DO NOT READ ANSWERS. SINGLE RESPONSE]

Variable label	Before the onset of COVID-19 in March 2020, was your business registered in the [NAME OF NATIONAL BUSINESS REGISTER]?	Response categories CODES
c03f	Yes	1
	No	0
	I do not know	98
	Refused	99

I will now ask some questions about your personal income, which refers to the amount of money you have at your disposal (any earnings, savings, assets) and excludes other family members' income.

ASK ALL

[DO NOT READ ANSWERS. SINGLE RESPONSE]

Variable label	Do you have any personal income, including income from wage, earnings, rent, royalties?	Response categories CODES
c04	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c04 IS 1

[DO NOT READ ANSWERS. SINGLE RESPONSE]

Variable label	Has your <u>personal</u> income changed SINCE THE ONSET OF COVID-19 in March 2020?	Response categories CODES
c04a	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c04a IS 1

[DO NOT READ ANSWERS. SINGLE RESPONSE]

Variable label	How has your <u>personal</u> income changed SINCE THE ONSET OF COVID-19 in March 2020?	Response categories CODES
c04b	Lost all individual income	1
	Individual income decreased but not lost completely	2
	Individual income increased	3
	I do not know	98
	Refused	99

ASK ALL		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	Do you currently receive, as a regular and frequent source of income, any money from relatives/friends living in another country? (e.g. remittances)	Response categories CODES
c05	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK ALL		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	Before the ONSET OF COVID-19 in March 2020, did you receive, as a regular and frequent source of income, any money from relatives/friends living in another country?	Response categories CODES
c06	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c05= 1 AND c06=1		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	Has the amount of money you receive from relatives/friends living abroad changed since the onset of COVID-19 in March 2020?	Response categories CODES
c06a	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c06a IS 1		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	Has the amount of money you receive from relatives/friends living abroad increased or decreased?	Response categories CODES
c06b	Increased since the onset of COVID-19	1
	Decreased since the onset of COVID-19	2
	I do not know	98
	Refused	99

ASK ALL		
[READ ANSWERS. MULTIPLE ITEMS. SINGLE ANSWER PER ITEM]		
Variable label	SINCE THE ONSET OF COVID-19 in March 2020, have <u>you personally</u> received from the Government and/or other non-state actors any of the following?	Response categories CODES
c07	c071. Food and/or agricultural inputs	1=Yes 0=No 98=I do not know 99=Refused
	c072. Supplies for preventing infection (gloves, masks, sanitizer, handwashing containers, soap, etc.)	1=Yes 0=No 98=I do not know 99=Refused
	c073. Personal hygiene supplies (menstrual supplies, baby diapers, adult diapers etc.)	1=Yes 0=No 98=I do not know 99=Refused
	c074. Social protection grants, such as allowances for income loss, child allowance, old-age allowance, etc". [NATIONAL EXAMPLES]	1=Yes 0=No 98=I do not know 99=Refused
	c075. Other cash transfer for personal consumption/expenditures	1=Yes 0=No 98=I do not know 99=Refused

I am now going to ask a question about your household income, which refers to the amount of money that all your family members combined have (including earnings, savings, assets).

ASK ALL		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	SINCE THE ONSET OF COVID-19 in March 2020, has the <u>combined income from all household members</u> changed?	Response categories CODES
c08	Yes	1
	No	0
	I do not know	98
	Refused	99

ASK IF c08 IS 1		
[DO NOT READ ANSWERS. SINGLE RESPONSE]		
Variable label	How did it change?	Response categories CODES
c08a	Household income increased	1
	Household income decreased	2
	I do not know	98
	Refused	99

I am now going to ask some questions about challenges you may have faced since the onset of COVID-19 in March 2020. Please indicate whether you have experienced any of them by responding yes, no, or “I initially experienced it but it has now resolved”.

ASK ALL		
[READ MULTIPLE ITEMS. SINGLE ANSWER PER ITEM]		
Variable label	SINCE THE ONSET OF COVID-19 in March 2020, have you experienced any of the following?	Response categories CODES
c09	c091. Your children/children living in your household missed schooling due to lack of access to remote learning technologies / inability to pay for school (e.g. fees/supplies) [Do not show if a07a1 0-17 years male and female reported 0]	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c092. Migrated to different geographical area within the same country	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c093. Migrated to a different country	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c094. Difficulty accessing medical supplies	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c095. Difficulty accessing hygiene products	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c096. Lost access to/could not use public transport	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c097. Lost access to power supply	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused
	c098. Water source was compromised [Go to c9a]	1=Yes 0=No 2=Initially yes but has now resolved 98=I do not know 99=Refused

ASK ONLY IF c098=YES OR INITIALLY YES BUT HAS NOW RESOLVED		
[DO NOT READ ANSWERS. SINGLE ANSWER]		
Variable label	What was the reason your main water source was compromised SINCE THE ONSET OF COVID-19 in March 2020?	Response categories CODES
c09a	Piped water supply is now only available on certain days of the week	1
	Denied by cartels	2
	Fear of COVID-19 infection	3
	Harassment en-route to source	4
	I relocated and now source is too far away	5
	Source closed due to COVID-19	6
	Cannot afford the cost	7
	Not enough water containers	8
	Due to floods / drought / cyclones / other weather events	9
	Other	10
	I do not know	98
	Refused	99

D. FOOD HARDSHIP

I am now going to ask specifically about your experience in relation to ACCESS TO food since the onset of COVID-19 in March 2020.

ASK ALL		
[READ ITEMS AND REPLY TO ALL ITEMS]		
Variable label	During the last 12 months, was there a time when, because of lack of money or other resources:	Response categories CODES [DO NOT READ]
d01	d011. You were worried you would not have enough food to eat?	1 Yes 0 No 98 I do not know 99 Refused
	d012. You were unable to eat healthy and nutritious food?	1 Yes 0 No 98 I do not know 99 Refused
	d013. You ate only a few kinds of foods?	1 Yes 0 No 98 I do not know 99 Refused
	d014. You had to skip a meal?	1 Yes 0 No 98 I do not know 99 Refused
	d015. You ate less than you thought you should?	1 Yes 0 No 98 I do not know 99 Refused
	d016. Your household ran out of food?	1 Yes 0 No 98 I do not know 99 Refused
	d017. You were hungry but did not eat?	1 Yes 0 No 98 I do not know 99 Refused
	d018. You went without eating for a whole day?	1 Yes 0 No 98 I do not know 99 Refused

E. UNPAID DOMESTIC AND CARE WORK

Thinking about the domestic and care work provided to your household and family members who may not be living in the same household, please answer the following questions

ASK ALL				
[READ RESPONSE ITEMS. SINGLE ANSWER PER ROW. FOR EACH ACTIVITY BY ROW]				
Variable label	e01. Who usually spends the most time doing...	Response categories CODES [DO NOT READ ANSWERS]	e01a.SINCE THE ONSET OF COVID-19 in March 2020, did the time you, personally, spend on the following activities change? [If e01 (1-13) is 6, then skip a1-a13]	Response categories [DO NOT READ ANSWERS]
e01	e011. Cooking and serving meals	1= Me/Self 2= Mother, Sister, Wife, daughter, daughter-in-law, sister-in-law, mother-in law, other women (Another household member-female) 3= Father, husband, brother, son, brother-in-law, father-in-law (any other male) (Another household member-male) 4= Both male and female members in the household 5= Someone else (domestic help/ someone who is not a household member) 6= Nobody in the house does this activity 98= I do not know 99= Refused	e01a1. Cooking and serving meals	1= Do not usually do it 2= Increased 3= Unchanged 4= Decreased 5= Initially changed but has now returned to normal 98= I do not know 99= Refused
	e012. Cleaning and doing laundry		e01a2. Cleaning and doing laundry	
	e013. Decorating, repairing and managing bills		e01a3. Decorating, repairing and managing bills	
	e014. Shopping for the household and family		e01a4. Shopping for the household and family	
	e015. Collecting water for the household		e01a5. Collecting water for the household	
	e016. Collecting firewood/fuel for the household		e01a6. Collecting firewood/fuel for the household	
	e017. Supervising/minding children		e01a7. Supervising/minding children	
	e018. Playing with children		e01a8. Playing with children	
	e019. Teaching children and taking care of arrangements with schools		e01a9. Teaching children and taking care of arrangements with schools	
	e110. Feeding, cleaning, physical care, and medical care for children		e01a10. Feeding, cleaning, physical care, and medical care for children	
	e111. Feeding, cleaning, physical care and medical care for dependent and non dependent adults		e01a11. Feeding, cleaning, physical care and medical care for dependent and non dependent adults	
	e112. Taking care of or helping adults/elderly (own household or family) (Ex: washing, dressing, taking care of sick adults, helping with administrative documents, etc.)		e01a12. Taking care of or helping adults/elderly (own household or family) (Ex: washing, dressing, taking care of sick adults, helping with administrative documents, etc.)	
	e113. Pet care		e01a13. Pet care	

F. DISABILITY STATUS

ASK ALL

[Communicating difficulties refer to communicating in native language]

[DO NOT READ ANSWERS. SINGLE ANSWER]

Variable label	Do you have difficulty doing any of the following – walking, seeing even with glasses, hearing even with hearing aids, remembering or concentrating, self-caring (e.g. eating, personal hygiene), or communicating?	Response categories CODES
f01	Yes, I have difficulties with at least one of those activities	1
	No, I do not have difficulties	0
	I do not know	98
	Refused	99

PROMPT IF c01=11 AND f01=0

Promptf01	You have mentioned that you are suffering from long term illness/disability when asked about you main activity. Can you confirm your response?	1
	Yes, I confirm that I have checked with respondent [Interviewer to select]	

READ TO ALL AND GO TO r03

[READ AND END THE SURVEY]

g01	This marks the end of the questionnaire. Thank you for your participation in this survey. We appreciate you taking the time to speak to us.
-----	---

FOR ALL COMPLETED INTERVIEWS

Enumerator's observation on the interview [To be filled by interviewer]

obs	Respondent understood the questions properly	1
	Respondent was asking for clarifications often	2
	Respondent was reluctant to answer most questions	3

