



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.

THIS INFORMATION IS STRICTLY CONFIDENTIAL AND IS TO BE USED FOR STATISTICAL PURPOSES ONLY.

### HOUSEHOLD QUESTIONNAIRE

#### HOUSEHOLD IDENTIFICATION

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

	CODE	NAME
A01. DISTRICT:	<input type="text"/> <input type="text"/> <input type="text"/>	.....
A02. TA, STA, or TOWN:	<input type="text"/> <input type="text"/>	.....
A03. ENUMERATION AREA:	<input type="text"/> <input type="text"/> <input type="text"/>	.....
A04. PLACE / VILLAGE NAME:		.....
A07. NAME OF HOUSEHOLD HEAD:		.....

A08: IHPS 2019 Y4-HHID:  -

A10. LOCATION OF HOUSEHOLD: .....

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

#### SURVEY STAFF DETAILS

A16.1. PREVIOUS ROUND ENUMERATOR CODE:	<input type="text"/> <input type="text"/>	A16. ENUMERATOR CODE:	<input type="text"/> <input type="text"/> <input type="text"/>
		A17. SUPERVISOR CODE:	<input type="text"/> <input type="text"/> <input type="text"/>
A18.1. PREVIOUS ROUND DATE OF INTERVIEW:	<input type="text"/> <input type="text"/> <input type="text"/>	A18. DATE OF INTERVIEW:	<input type="text"/> <input type="text"/> <input type="text"/>
	DD MM YYYY		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.
<b>I N D I V I D U A L  I D</b>	<p>INTERVIEWER: ALL HOUSEHOLD MEMBERS RECORDED DURING THE [LAST INTERVIEW] ARE PRE-FILLED IN Q1.</p> <p>FOR ALL PRE-FILLED MEMBERS, ASK QUESTIONS Q3 AND Q4.</p> <p>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?"</p> <p>IF YES, THEN ASK, RECORD THEIR NAMES AND ASK Q5 - Q7.</p>	<p>NAME</p> <p>CAP: PRE-FILLED NAMES FROM LAST INTERVIEW</p> <p>INTERVIEWER: ADD NEW MEMBERS HERE</p>	<p>CAP/INTERVIEWER: IS [NAME] A NEW MEMBER ADDED IN THIS INTERVIEW?</p> <p>YES..1 &gt;&gt; Q5 NO..2</p>	<p>Is [NAME] still a member of the household?</p> <p>YES..1 &gt;&gt;NEXT PERSON NO..2</p>	<p>Why did [NAME] leave the household?</p> <p>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</p> <p>&gt;&gt; NEXT PERSON</p>
1					
2					
3					
4					
5					
6					
7					
8					
10					

[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

7.	8.
In the last week, how often did you wash your hands with soap after being in public?	In the last week, how often did you wear a mask when in public?
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	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

## Section 5. ACCESS

### MEDICAL SERVICES

3	3b	4	5
<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>YES .....1 NO.....2 &gt;&gt;Q6 DON'T KNOW..98&gt;&gt;Q6 REFUSED..99 &gt;&gt;Q6</p>	<p>What type of service did you or any member of your household need?</p> <p><b>DO NOT READ OUT</b> <b>SELECT ALL THAT APPLY</b></p> <p>FAMILY PLANNING.....1 VACCINATION.....2 MATERNAL HEALTH/PREGANCY CARE.3 CHILD HEALTH.....4 ADULT HEALTH.....5 EMERGENCY CARE.....6 PHARMACY.....7 OTHER (SPECIFY).....555</p>	<p>Were you or the member of your household able to access the medical treatment/services?</p> <p>YES .....1 &gt;&gt;NEXT SECTION NO .....2 REFUSED..99&gt;&gt;NEXT SECTION</p>	<p>What was the main reason you or the member of your household were not able to access the medical treatment/services?</p> <p><b>DO NOT READ OUT</b></p> <p>LACK OF MONEY .....1 NO MEDICAL PERSONNEL AVAILABLE .....2 TURNED AWAY BECAUSE FACILITY WAS FULL .....3 FACILITY WAS CLOSED.....4 LIMITED/NO TRANSPORTATION .....5 RESTRICTION TO GO OUTSIDE .....6 AFRAID OF GOING AND GETTING THE VIRUS .....7 HEALTH FACILITY IS TOO FAR .....8 HOSPITAL/CLINIC NOT HAVING ENOUGH SUPPLIES OR TESTS...9 OTHER....555</p>

## Section 5D. EARLY CHILD DEVELOPMENT

**INTERVIEWER:** This module will be administered only to households that have a child aged 2 to 10 years. If household has more than one child in this age group, one child will randomly be selected for interviews

### EDUCATION BACKGROUND

Now I would like to ask you some questions relating to [NAME]'s education

2	3	4	5	6
<p>Who is (NAME)'s primary caregiver?</p> <p><i>(The caregiver is the adult at home who most frequently looks after the child. )</i></p> <p>PERSON COMPLETING INTERVIEW.1 &gt;&gt; 5</p> <p>OTHER .....555</p>	<p>Specify primary caregiver's relationship with (NAME).</p> <p>MOTHER .....1 &gt; Q6 FATHER .....2 &gt; Q6 SIBLING (BROTHER/SISTER) ...3 GRANDPARENT.....4 OTHER RELATIVE ....5 HOUSEHOLD WORKER...6 OTHER NON-RELATIVE .7</p>	<p>What is the caregiver's gender?</p> <p>MALE ...1 FEMALE .2</p>	<p>What is your relationship to <i>(name )</i>?</p> <p>MOTHER .....1 FATHER .....2 SIBLING (BROTHER/SISTER) ...3 GRANDPARENT.....4 OTHER RELATIVE.....5 HOUSE HELPER /WORKER.....6</p>	<p>Was your child attending any of the following before childcare centers and schools were closed due to the COVID-19 pandemic?</p> <p>Nursery/Childcare .1 Community center ..2 Preschool .....3 Elementary school .4 None .....5 Do not know .....88 Other .....555</p>

### PARENTAL SUPPORT AT HOME

	7	8	9	10	11	12	13
<p>For these next set of questions, items, please answer with YES or NO. Please let me know if, during the last 15 days, did you or any household member age 15 or over engage in any of the following activities with (name):</p>	<p>Played with <i>[name ]</i>?</p> <p>YES .....1 NO .....2 DON'T KNOW ...888</p>	<p>Read books or looked at picture books with <i>[name]</i>?</p> <p>YES .....1 NO .....2 DON'T KNOW ...888</p>	<p>Told stories to <i>[name ]</i>?</p> <p>YES .....1 NO .....2 DON'T KNOW ...888</p>	<p>Sang songs to or with <i>[name ]</i>, including lullabies?</p> <p>YES .....1 NO .....2 DON'T KNOW ...888</p>	<p>Took <i>[name ]</i> outside the home?</p> <p>YES .....1 NO .....2 DON'T KNOW ...888</p>	<p>Named, counted, or drew things for or with <i>[name ]</i>?</p> <p>YES .....1 NO .....2 DON'T KNOW ...888</p>	<p>How many children's books or picture books do you have for <i>(name )</i> at home?</p>



## Section 5D. EARLY CHILD DEVELOPMENT CONTINUED...

### HOUSEHOLD CHARACTERISTICS

	14	15	16	17	18	19	20
Does your household have: [do not ask if already known/visible]	Electricity [regardless of source]  YES ....1 NO .....2 DON'T KNOW ...888	Radio  YES ....1 NO .....2 DON'T KNOW ...888	Television  YES ....1 NO .....2 DON'T KNOW ...888	Mobile telephone  YES ....1 NO .....2 DON'T KNOW ...888	Non-mobile (landline) telephone  YES ....1 NO .....2 DON'T KNOW ...888	Computer / laptop / tablet  YES ....1 NO .....2 DON'T KNOW ...888	Internet  YES ....1 NO .....2 DON'T KNOW ...888

### CHILD ENGAGEMENT WITH EDUCATIONAL CONTENTS

	21	22	23	24	25	26	27	28
<i>For these next items set of questions, please answer with YES or NO.</i> In the last 15 days, has your child accessed free learning content on:	Radio  YES ....1 NO. ....2 DON'T KNOW ..88	Television  YES ....1 NO. ....2 DON'T KNOW ..88	Computer with Internet  YES ....1 NO. ....2 DON'T KNOW ..88	Computer with no Internet  YES ....1 NO. ....2 DON'T KNOW ..88	Smart phone or tablet  YES ....1 NO. ....2 DON'T KNOW ..88	Feature phone using SMS (text messaging)  YES ....1 NO. ....2 DON'T KNOW ..88	Printed materials from school (e.g., textbooks, assignments, or copies)  YES ....1 NO. ....2 DON'T KNOW ..88	Printed reading materials (e.g., reading books for children)  YES ....1 NO. ....2 DON'T KNOW ..88



# Section 6B. Employment

	STATUS IN EMPLOYMENT			WHY NOT CURRENTLY WORKING	
FILTER	1	1a	1b	1c	3
TWO CASES BASED ON RESPONSE IN LAST INTERVIEW:	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?	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 expect to return?	When do you expect to return to this job?	Why did you not work last week?	Why did you stop working?
CASE 1: RESPONDENT WAS WORKING IN [LAST_INTERVIEW]				DO NOT READ OPTIONS BUSINESS / OFFICE CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS.....1 BUSINESS / OFFICE CLOSED FOR ANOTHER REASON.....2 LAI D OFF WHILE BUSINESS CONTINUES.....3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE (FURLOUGHED) .....4 VACATION .....5 ILL / QUARANTINED .....6 NEED TO CARE FOR ILL RELATIVE .....7 SEASONAL WORKER .....8 RETIRED .....9 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 ROTATION OF PERSONEL DUE TO CORONAVIRUS (MY TURN IS NEXT WEEK) ...13 OTHER (SPECIFY) .....96	DO NOT READ OPTIONS BUSINESS / GOV'T CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS .....1 BUSINESS / GOV'T CLOSED FOR ANOTHER REASON .....2 LAI D OFF WHILE BUSINESS CONTINUES .....3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE (FURLOUGHED) .....4 VACATION .....5 ILL / QUARANTINED .....6 NEED TO CARE FOR ILL RELATIVE .....7 SEASONAL WORKER .....8 RETIRED .....9 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 ROTATION OF PERSONEL DUE TO CORONAVIRUS (MY TURN IS NEXT WEEK) .....13 OTHER (SPECIFY) .....96
CASE 2: RESPONDENT WAS NOT WORKING [LAST_INTERVIEW]	YES...1 IF CASE 1 >>Q4A IF CASE 2 >>Q5 NO....2	YES...1 NO....2 >> Q3 IF CASE 1, Q3a IF CASE 2	WITHIN ONE WEEK.....1 WITHIN ONE MONTH.....2 WITHIN THREE MONTHS.....3 IN MORE THAN THREE MONTHS...4 DON'T KNOW.....98	DO NOT READ OPTIONS BUSINESS / OFFICE CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS.....1 BUSINESS / OFFICE CLOSED FOR ANOTHER REASON.....2 LAI D OFF WHILE BUSINESS CONTINUES.....3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE (FURLOUGHED) .....4 VACATION .....5 ILL / QUARANTINED .....6 NEED TO CARE FOR ILL RELATIVE .....7 SEASONAL WORKER .....8 RETIRED .....9 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 ROTATION OF PERSONEL DUE TO CORONAVIRUS (MY TURN IS NEXT WEEK) ...13 OTHER (SPECIFY) .....96  >> Q4a IF CASE=1, >> Q4a IF CASE=2, OR >> Q5 IF CASE=3	DO NOT READ OPTIONS BUSINESS / GOV'T CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS .....1 BUSINESS / GOV'T CLOSED FOR ANOTHER REASON .....2 LAI D OFF WHILE BUSINESS CONTINUES .....3 TEMPORARILY LAID OFF/LEAVE OF ABSENCE (FURLOUGHED) .....4 VACATION .....5 ILL / QUARANTINED .....6 NEED TO CARE FOR ILL RELATIVE .....7 SEASONAL WORKER .....8 RETIRED .....9 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 ROTATION OF PERSONEL DUE TO CORONAVIRUS (MY TURN IS NEXT WEEK) .....13 OTHER (SPECIFY) .....96

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 &gt;&gt;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     &gt;&gt;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 &gt;&gt;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>

6	6a.	7.	8.	8a	8b
<p>In the work you did <u>last week</u>, did you work....</p> <p>READ RESPONSES</p> <p>In your own business .....1 &gt;&gt;NEXT MODULE</p> <p>In a business operated by a household or family member .....2 &gt;&gt;NEXT MODULE</p> <p>In a family farm growing crops, raising livestock, or fishing.....3</p> <p>As an employee for someone else ....4 &gt;&gt;Q7</p> <p>As an apprentice, trainee, intern .....5 &gt;&gt;Q7</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 consumption .....2</p> <p>Some will be sold, some will be consumed by the family .....3</p>	<p>In the last week, were you able to work as usual in your wage job either at your place of work or remotely?</p> <p>Yes.....1 &gt;&gt;NEXT MODULE</p> <p>No.....2</p>	<p>Even though you were not able to work as usual, will you be paid/were you paid</p> <p>Full normal payment.....1</p> <p>Partial payment.....2</p> <p>No payment.....3</p>	<p>Why were you not able to work as usual?</p> <p>BUSINESS / GOV'T CLOSED DUE TO CORONAVIRUS LEGAL RESTRICTIONS.....1</p> <p>BUSINESS / GOV'T CLOSED FOR ANOTHER REASON.....2</p> <p>FURLOUGH.....3</p> <p>ILL / QUARANTINED.....4</p> <p>NEED TO CARE FOR ILL RELATIVE.....5</p> <p>SEASONAL WORKER.....6</p> <p>NOT ABLE TO GO TO PLACE OF WORK DUE TO MOVEMENT RESTRICTIONS.....7</p> <p>OTHER (PLEASE SPECIFY).....96</p>	<p>How many hours did you work in your main job last week?</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 RESTRICTIONS .....1 USUAL PLACE OF BUSINESS CLOSED FOR ANOTHER REASON .....2 NO CUSTOMERS / FEWER CUSTOMERS .....3 CAN'T GET INPUTS .....4 CAN'T TRAVEL / TRANSPORT GOODS FOR TRADE .....5 ILL / QUARANTINED DUE TO CORONAVIRUS .....6 ILL WITH ANOTHER DISEASE .....7 NEED TO TAKE CARE OF A FAMILY MEMBER .....8 SEASONAL CLOSURE .....9 VACATION .....10 OTHER, SPECIFY .....96	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  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	Compared to when we last spoke, are the revenue from sales from the non-farm family business...  READ OPTIONS  Higher .....1 >> Q15 The same .....2 >> Q15 Less .....3 No revenue ..4	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 RESTRICTIONS .....1 USUAL PLACE OF BUSINESS CLOSED FOR ANOTHER REASON .....2 NO CUSTOMERS / FEWER CUSTOMERS .....3 CAN'T GET INPUTS .....4 CAN'T TRAVEL / TRANSPORT GOODS FOR TRADE .....5 ILL / QUARANTINED DUE TO CORONAVIRUS .....6 ILL WITH ANOTHER DISEASE .....7 NEED TO TAKE CARE OF A FAMILY MEMBER .....8 SEASONAL CLOSURE .....9 VACATION .....10 OTHER, SPECIFY .....96
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  Open .....1 >> 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 6. Agriculture

Preload		Preload		Preload	
1.	2.	3.	3a	4.	5.
<p>PREFILLED FROM ROUND 7 OR ROUND 11:</p> <p>Since the beginning of the agricultural rainy season 2020/21, have you or any member of your household worked on land preparation or planting on your household farm?</p> <p>YES .....1 &gt;&gt;</p> <p><b>Q3</b></p> <p>NO, MY HOUSEHOLD HAS A FARM BUT DID NOT WORK.....2 &gt;&gt;</p> <p><b>NEXT SECTION</b></p> <p>NO, MY HOUSEHOLD DOESN'T HAVE A FARM..3 &gt;&gt;</p> <p><b>NEXT SECTION</b></p> <p>NOT AVAILABLE IN PREVIOUS ROUNDS.....4</p>	<p>Since the beginning of the agricultural season 2020/21, have you or any member of your household worked on land preparation or planting or other crop cultivation activities on any household farm?</p> <p>YES .....1</p> <p>NO, MY HOUSEHOLD HAS A FARM BUT DID NOT WORK.....2 &gt;&gt;</p> <p><b>NEXT SECTION</b></p> <p>NO, MY HOUSEHOLD DOESN'T HAVE A FARM..3 &gt;&gt;</p> <p><b>NEXT SECTION</b></p>	<p>Which member(s) of your household are the primary decisionmaker(s) for the household's crop farming activities?</p> <p>SELECT UPTO 2 IN ORDER OF IMPORTANCE</p>	<p>IS THE RESPONDENT ONE OF THE PRIMARY DECISIONMAKERS?</p> <p>YES....1</p> <p>NO.....2</p>	<p>Is any of the [PDM] available to answer some questions about the household's crop farming activities?</p> <p>YES....1</p> <p>NO.....2</p>	<p>What is the main crop you or others in your household have planted this agricultural season 2020/21?</p> <p>MAIZE.....1</p> <p>BEANS.....2</p> <p>GROUNDNUTS.....3</p> <p>PEAS.....4</p> <p>SOYA BEANS.....5</p> <p>CASSAVA.....6</p> <p>SWEET POTATOES.....7</p> <p>IRISH POTATOES.....8</p> <p>BANANA.....9</p> <p>TOBACCO.....10</p> <p>SUGARCANE.....11</p> <p>VEGETABLES.....12</p> <p>RICE.....13</p> <p>SESEMA.....14</p> <p>MAPILA / SORGHUM.....15</p> <p>MILLET - MCHEWELE...16</p> <p>OTHER, SPECIFY 1.555</p> <p>OTHER, SPECIFY 2.556</p>
		ID CODES			

**Preload**

6.	7.	8.	8b	9.	10.	11.
<p>Has your household finished harvesting the [MAIN CROP] planted during the 2020/21 agricultural season?</p> <p>YES....1 NO.....2</p>	<p>Did your household sell any of the [MAIN CROP] harvested during the 2020/21 agricultural season?</p> <p>YES....1 NO.....2 &gt;&gt; Q9</p>	<p>At what price did the household sell at the harvest of the [Main Crop]</p> <p>RECORD PRICE FOR 1KG IF Q5: 1,2,3,4,5,13,14,15,16)</p> <p>RECORD PRICE FOR COMMONLY REPORTED UNIT IF Q5: 6,7,8,9,10,11,12,555,556)</p>	<p>RECORD UNIT REPORTED IN S6AQ8A FOR CROPS COMMONLY REPORTED IN NON STANDARD UNITS</p> <p>IF Q5: 6,7,8,9,10,11,12,555,556)</p>	<p>Since the last call, were there any products from your farm that needed to be sold?</p> <p>YES....1 NO.....2 &gt;&gt; Next Section</p>	<p>Was your household able to sell any products from your farm?</p> <p>YES....1 NO.....2&gt;&gt;Next section</p>	<p>Were did your household sell the products?</p> <p>SELECT ALL THAT APPLY</p> <p>FARM.....1 DAILY MARKET.....2 WEEKLY MARKET .....3 OTHER, SPECIFY.....4</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
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)? READ OUT ANSWER OPTIONS  Very worried .....1 Somewhat worried ....2 Not too worried .....3 Not worried at all ..4	How much of a threat would you say the corona virus outbreak is to your household's finances?  READ OUT ANSWER OPTIONS  A substantial threat ....1 A moderate threat .....2 Not much of a threat ....3 Not a threat at all .....4

## 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 &gt;&gt; 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		

[illegible]