

Iraq - High Frequency Phone Survey (IHFPS) to Monitor Impacts of COVID-19

Questionnaire for September round

Introduction: Hello sir/ma'am, my name is #OPERATOR#, and I am **calling from Stars Orbit and on behalf of the United Nations World Food Programme**. Currently, WFP is conducting a survey to understand the corona virus impacts on food, market and health access, as well as health situation in your community. Sir/ma'am, your information will help us understand the situation in your community.

We remind you that all the information will be strictly kept confidential and be used only for the purpose of the survey. **You will receive #TOPUP#! Of 1 USD communication credit as an incentive for the participation of the survey.**

Are you interested in participating in this survey, now or another time?

When would it be a good time to call back you back

Can we record this conversation for the data quality and training purposes? (Yes/No)

the respondent agrees to record his voice (start recording)
 the respondent does not agree (proceed without recording)

DEMOGRAPHICSECTION:

VARIABLE NAME	QUESTION	SKIP PATTERN
Rid	Respondents id	
hhid	Household/individual id: same as Rid	
hh_weight	Household weight- post-stratified and reweighted	
pop_weight	Population weight- post-stratified and reweighted	
adult_weight	Adult (18 years or more) weight – post-stratified and reweighted	
member0to17	How many children (below18 years of age) PERMANENTLY living in this household?	
member18to59	How many adults (18-59 Yr) are PERMANENTLY living in this household?	
member60plus	How many of the adults in your household are 60 and above the age of 60?	
hhsiz	Household size	

respsex	<p>What is the gender of the respondent?</p> <p>[OPERATOR: LISTEN TO THE VOICE AND CHECK THE BOX WHETHER THE RESPONDENT IS MALE OR FEMALE]</p> <ol style="list-style-type: none"> 1. MALE 2. FEMALE 	
age	<p>How old are you? (in years)</p> <p>[INELIGIBLE IF THE AGE IS LESS THAN 18]</p>	
RESPEducation	<p>What is the most advanced level of education you have completed?</p> <ol style="list-style-type: none"> 1. Did not attend any school 2. Did not complete any level 3. Primary/Elementary Certificate (1-6) 4. Intermediate Certificate (7-9) 5. Basic Certificate (1-9) 6. Preparatory/Secondary Certificate - Academic 7. Preparatory/Secondary Certificate - Vocational 8. Technical diploma 9. Bachelor's Degree 10. Professional Degree 11. Higher Diploma Degree 12. Master's Degree 13. Doctoral Degree 14. Other Specify_____ 	
RESPBreadwinner	<p>Are you the main provider in your family/household?</p> <ol style="list-style-type: none"> 1. Yes 2. No 3. Refused 	
govern_name	<p>Currently, which province does your household reside in?</p>	
district_name	<p>Currently, which district does your household reside in?</p>	
subdistrict_name	<p>Currently, which village\municipality [ADM3] does your household reside in?</p>	

dispstat	<p>What is your household residence status?</p> <ol style="list-style-type: none"> 1. Resident 2. Returnee 3. IDP before 2014 4. IDP since 2014 5. Refugee 	
environment_type	<ol style="list-style-type: none"> 1. Urban or Rural 	
hh_housing	<p>Which of the following living arrangements best describes your housing situation CURRENTLY?</p> <ol style="list-style-type: none"> 1. Own home 2. Rent home 3. Staying as a guest hosted 4. Camp 5. Sharing accommodation with other families 6. Informal settlement 	

EMPLOYMENT

The Iraqi and Kurdistan regional governments have taken various measures in order to contain the spread of the coronavirus disease (COVID-19) including the lock down of the country starting in Mid-March. I would like to ask you about your current employment status.

		SKIP PATTERN
EMPHousehold2	<p>How many members including yourself in your household did any work for pay, did any kind of business, farming or other activity to generate income during last 7 days?</p> <p><i>Number</i> _____</p>	

EMP10	<p>What is your current (past 7 days) main employment status?</p> <p><i>[Employment refers to any income generating/productive activity that you are involved in including working for other, own business/enterprise, household farm etc., carried out for at least one hour.]</i></p> <p>READ ALL OPTIONS</p>	<p>If the response is 5 or 6 -> Skip to Next section</p>
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	<ol style="list-style-type: none"> 1. Working for wage/salary for someone, an enterprise, company or government 2. Working on own account or enterprise belonging to the household 3. Unpaid work in a business or farm owned by a household (Contributing family member) 4. Cash for work 5. Did not have any job and seeking for job 6. Did not have any job and not seeking for job 	
EMP11	<p>What is the main activity of the business or organization of your main employment?</p> <p>DO NOT READ OPTIONS, ASK TO EXPLAIN MAIN JOB AND PICK THE BEST OPTION THAT FITS THE DESCRIPTION</p> <ol style="list-style-type: none"> 1. Agriculture; forestry and fishing 2. Mining and quarrying 3. Manufacturing 4. Electricity; gas, steam and air conditioning supply 5. Water supply; sewerage, waste management and remediation activities 6. Construction 7. Wholesale and retail trade; repair of motor vehicles and motorcycles 8. Transportation and storage 9. Accommodation and food service activities 10. Information and communication 11. Financial and insurance activities 12. Real estate activities 13. Professional, scientific and technical activities 14. Administrative and support service activities 15. Education 16. Human health and social work activities 17. Arts, entertainment and recreation 18. Tourism 19. Other service activities 20. Activities of households as employers; undifferentiated goods- and services producing activities of households for own use 21. Domestic work 22. Not elsewhere classified 	
EMP12	<p>What type of employer did you work for?</p> <ol style="list-style-type: none"> 1. Government permanent 2. Government temporary (contract) 3. Private company/ business 	If the response is 6, 7, 8, 9 -> Skip to EMP7

	<ul style="list-style-type: none"> 4. Foreign company/ business 5. Non-governmental organization (NGO/INGO/UN) 6. Family business 7. Working on a farm or with livestock owned or rented by the household 8. A private household 9. Self-employed (own-account worker) 10. Refusal 	
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Entrepreneurial/Business activities:

	<i>Now I would like to ask about you and your family members involvement in any entrepreneurial/business activities either jointly with family members, non-family members, or alone in the last 30 days.</i>	SKIP PATTERN
Business5	<p>During the past 30 days, did you or any member of your household operate a business?</p> <ul style="list-style-type: none"> 1. Yes 2. No 	If the response is 2-> Skip to Next section
	1.	
Business6	<p>Compared to the usual monthly revenue , was the revenue from the business for the month of [LAST COMPLETED MONTH]....?</p> <p>READ OPTIONS</p> <ul style="list-style-type: none"> 1. Increased 2. Remained the same 3. Decreased 4. No revenue 5. Business started withing last 30 days 	If the response is 1 or 2, 5-> Skip to Next section
Business7	<p>Why were there no revenue or less revenue from the business in [LAST COMPLETED MONTH]?</p> <p>DO NOT READ OPTIONS - MARK ALL THAT APPLY</p> <ul style="list-style-type: none"> 1. Usual place of business closed due to coronavirus legal restrictions 2. Usual place of business closed for another reason 3. No costumers / fewer customers 4. Can't get inputs 5. Can't travel / transport goods for trade 6. Ill / quarantined due to coronavirus 7. Ill with another disease 8. Need to take care of a family member 9. Seasonal closure 10. On leave/vacation 	

	11. other, specify	
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FOOD CONSUMPTION SECTION:

VARIABLE NAME	QUESTION	SKIP PATTERN
FCS_Intro	<p>Now I will ask you about the foods and drinks you and your household ate or drank in the last 7 days.</p> <p>[OPERATOR: DO NOT INCLUDE FOOD ITEMS CONSUMED IN VERY SMALL QUANTITIES. FOR EXAMPLE, LESS THAN ONE TABLESPOON OF MILK ADDED TO TEA] [IF THE SAME FOOD ITEM IS CONSUMED SEVERAL TIMES IN A DAY, FOR EXAMPLE DURING LUNCH AND DINNER, IT SHOULD ONLY BE COUNTED AS ONE DAY]</p>	
fcs_stap	<p>How many days over the last 7 days, did members of your household eat starches, roots and tubers such as rice, bread, pasta, maize, sorghum, millet, yam, potato, white sweet potato? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]</p>	
fcs_pulse	<p>How many days over the last 7 days, did members of your household eat pulses and nuts such as dhal, kidney beans, chick peas, other lentils, peanuts or other nuts? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]</p>	
fcs_dairy	<p>How many days over the last 7 days, did members of your household consume fresh milk, sour milk, yogurt, cheese or other dairy products? [Excluding margarine/butter or small amounts of milk for tea/coffee] [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]</p>	
fcs_pr	<p>How many days over the last 7 days, did members of your household eat meat [kebab, beef, lamb, mutton, goat, chicken, duck, liver, heart and / or other organ meats by itself or in mantu, kofta, korma], eggs or fish [Including fresh fish, canned fish, and / or other seafood] as a main dish, so not as a condiment? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]</p>	
fcs_veg	<p>How many days over the last 7 days, did members of your household eat vegetables or leaves such as eggplant, carrot, red</p>	

	pepper, onions, pumpkin, orange sweet potatoes, spinach, cucumber, okra, and/or other leaves/vegetables? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]	
fcs_fruit	How many days over the last 7 days, did members of your household eat fruits such as banana, apple, mango, dates, papaya, apricot, peach and/or other fruits? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]	
fcs_fat	How many days over the last 7 days, did members of your household eat oil/fat/butter such as vegetable oil, palm oil, groundnut oil, margarine, other fats / oil? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]	
fcs_sugar	How many days over the last 7 days, did members of your household consume sugar, or sweets such as honey, jam, cakes, candy, cookies, pastries, cakes and other sweets and sugary drinks? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]	
FC_groups	Food consumption score categories 1. Poor 2. Borderline 3. Acceptable	

REDUCED COPING STRATEGY INDEX SECTION:

VARIBLE NAME	QUESTION	SKIP PATTERN
noterCSI	Now I will ask you about the number of days, in the last 7 days, that your household may have done some of the following actions to cope with lack of food or money to buy food.	
rcsi_lessqty	During the last 7 days, how many days did your household, rely on less preferred and/or less expensive food due to lack of food or money to buy food?	
rcsi_borrow	During the last 7 days, how many days did your household, borrow food, or rely on help from a friend or relative due to lack of food or money to buy food?	
rcsi_mealsize	During the last 7 days, how many days did your household, limit portion sizes at mealtime due to lack of food or money to buy food?	
rcsi_mealnb	During the last 7 days, how many days did your household, reduce the number of meals eaten in a day due to lack of food or money to buy food?	

rcsi_mealadult	During the last 7 days, how many days did your household, restrict consumption by adults so children could eat, due to lack of food or money to buy food?	
HH_Food_rCSI	Reduced coping strategy.	

ACCESS TO FOOD AND MARKET

VARIBLE NAME	QUESTION	SKIP PATTERN
INTRO	Now we would like to ask some questions related to your household's access to food and market	
hh_foodcerealeal	What is the main source of cereals for your household? [OPERATOR: DO NOT READ OUT THE RESPONSE OPTION, SELECT THE RESPONSE OPTION THAT BEST FITS THE INFORMATION PROVIDED BY THE RESPONDENT, OTHERWISE SELECT OTHER] Own production(1. Market \ Grocery store 2. Exchange labor for food 3. Gift from family, relatives or friends 4. Food assistance by humanitarian agencies 5. Food assistance by Government 6. Other 7. PDS	If the response is 1-6-> Skip to HHFoodConstr_7D_YN
hh_foodcerealeal_other	Please specify what is the main source of cereals for your household?	
mktaccess_14d	In the past 14 days, has there been a time when you or your household could not access the market\grocery store? 1. Yes 2- No	If the response is No-> skip to Next section
mktnoaccesswhy_14d	What was the main reason why you or your household could not access the market\grocery stores in the past 7 days? [OPERATOR: DO NOT READ OUT THE RESPONSE OPTION, SELECT THE RESPONSE OPTION THAT BEST FITS THE INFORMATION PROVIDED BY THE RESPONDENT, OTHERWISE SELECT OTHER AND SUMMARIZE THE RESPONSE IN FEW WORDS] 1. Market\grocery stores were closed 2. Market\grocery store is too far	

	<ul style="list-style-type: none"> 3. Travel restrictions 4. Security concerns 5. Concerned about going out of the house due to disease outbreak 6. All adult members of the household too sick to go out 7. All adult members quarantined in the house 8. Other 	
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TRANSFERS:

	<i>In this section, I would like to ask about any cash or in-kind transfer/s you or any member in your household may have received during the month prior to lockdown and last month.</i>	SKIP PATTERN
	1.	
TransferPDS2	<p>During the month of [LAST COMPLETED MONTH], did you or any member of your household receive any ration food from PDS?</p> <ul style="list-style-type: none"> 1. Yes 2. No 	If the response is 2-> skip to TransferPDS14
TransferPDS133	<p>Compared to the usual monthly PDS quantity, amount of ration food received during the month of [LAST COMPLETED MONTH] was ...?</p> <p>READ OPTIONS</p> <ul style="list-style-type: none"> 1. Higher 2. The same 3. Lower 	If the response is 1 or 2-> skip to Transfer15
TransferPDS14	<p>Why were you not able to receive PDS? or Why was the amount of ration food less?</p> <p>DO NOT READ OPTIONS</p> <ul style="list-style-type: none"> 1. No PDS card 2. Ration shop closed 3. Ration shop reported not having enough food 4. Not able to go to the shop due to movement restrictions 5. Don't want to be exposed to the virus 6. PDS quantity reduced by government 7. Other (specify) 8. HH didnt collect for other reason 	
Transfer15	<p>During the month of [LAST COMPLETED MONTH], have you or any member of your household received any cash assistance from any of the following sources?</p> <p>MARK ALL THAT APPLY</p>	

	<ol style="list-style-type: none"> 1. Government 2. Relatives/Friends from abroad 3. Relatives/Friends within Iraq 4. NGOS/INGO/UN (UNHCR, WFP etc.) 5. Religious organizations 6. Other 	
Transfer16	<p>During the month of [LAST COMPLETED MONTH], have you or any member of your household received in-kind assistance other than the PDS from any of the following sources?</p> <p>MARK ALL THAT APPLY</p> <ol style="list-style-type: none"> 1. Government 2. Relatives/Friends from abroad 3. Relatives/Friends within Iraq 4. NGOS/INGO/UN (UNHCR, WFP etc.) 5. Religious organizations 6. Other 	

HEALTH STATUS AND ACCESS TO HEALTH SERVICES:

VARIBLE NAME	QUESTION	SKIP PATTERN
INTRO	NOW WE WOULD LIKE TO ASK SOME QUESTIONS RELATED TO THE HEALTH STATUS OF YOUR HOUSHOLD AND ACCESSTO HEALTH SERVICES	
hhhealth_provider	<p>Where do you usually go when you or your household members get sick? [OPERATOR: DO NOT READ OUT THE RESPONSE OPTION, SELECT THE RESPONSE OPTION THAT BEST FITS THE INFORMATION PROVIDED BY THE RESPONDENT, OTHERWISE SELECT OTHER]</p> <p>Hospital \ Clinic</p> <ol style="list-style-type: none"> 1. Health Center 2. Traditional healer/Medical assistant (Nurse) 3. Religious healer 4. Self-medication 5. Pharmacy to buy medicine 6. Stay at home 	

	7. Other	
hhhealth_access	<p>Do you or your household typically have difficulty accessing health center\hospital\clinic and other health services such as pharmacies?</p> <ol style="list-style-type: none"> 1. Yes 2. No 	
hhhealthaccess_14d	<p>In the past 14 days, did you or your household members face any challenges accessing the health center\hospitals\clinic and other health services?</p> <ol style="list-style-type: none"> 1. Yes 2. No challenge faced 3. No need to access 	<p>If the response is No challenge faced or No need to access -> Skip to Next Section</p>
hhhealthconst_14d	<p>What is the main reason why you or your household could not access the Hospitals\Clinics\Health Centers and other health services in the past 14 days?</p> <p>[OPERATOR: DO NOT READ OUT THE RESPONSE OPTION, SELECT THE RESPONSE OPTION THAT BEST FITS THE INFORMATION PROVIDED BY THE RESPONDENT, OTHERWISE SELECT OTHER AND SUMMARIZE THE RESPONSE IN FEW WORDS]</p> <ol style="list-style-type: none"> 1. Hospital\health center is far 2. Hospitals\Health centers are closed 	

	<ol style="list-style-type: none"> 3. Medical personnel didn't come at home 4. Lack of money 5. Travel restrictions 6. All members of the family too sick to travel 7. Denied access because it's out of capacity 8. Other 	
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EDUCATION/DISTANCE LEARNING

September Round Only

	<i>Now, I would like to ask about education and learning activities of the children in your household. If applicable, the objective is to gain insight on school retention, and high stakes exams that the children might have taken.</i>	SKIP PATTERN
EDU1	<p>Are there any children aged between 4 to 19 PERMANENTLY living in this household?</p> <ol style="list-style-type: none"> 1. Yes 2. No 	If the response is 2. No -> Skip to Next Section
EDU2	<p>Were any of them attending school before schools were closed due to Coronavirus?</p> <ol style="list-style-type: none"> 1. Yes 2. No 	If the response is 2. No -> Skip to Next Section
EDU3	<p>Did any of your children take part in the final exam (for grade, 6 or 9 or 12) over the summer?</p> <ol style="list-style-type: none"> 1. Yes 2. No 	If the response is 2. No -> Skip to EDU7
EDU4	<p>Did any of your children that were taking exam received any support from the school/teachers during the school closure to prepare for the final exam?</p> <ol style="list-style-type: none"> 1. Yes from public sector 2. Yes from private. 3. Yes from both 4. No 	If the response is 4. No -> Skip to EDU6
EDU5	<p>How satisfied are you with the support your children received from school/teachers during the school closure to prepare for the final exam?</p> <p>READ OPTIONS</p> <ol style="list-style-type: none"> 1. Very satisfied 2. Moderately satisfied 3. Moderately unsatisfied 	

	4. Not at all satisfied	
EDU6	<p>How would you rate the level of your child's/children's preparedness to take the final exam?</p> <p>READ OPTIONS</p> <ol style="list-style-type: none"> 1. Same as if schools were open 2. Worse as if schools were open 3. Better as if schools were open 	
EDU7	<p>What type of schools most of the children attended last school year?</p> <ol style="list-style-type: none"> 1. Government/ Public 2. Private 3. Religious/ Faith based 4. Other specify_____ 	
EDU8	<p>Will you shift any of the children to another school this school year?</p> <ol style="list-style-type: none"> 1. Yes 2. No 3. Don't know 	If the response is 2 or 3 -> Skip to EDU10
EDU9	<p>Why would you shift them to another school?</p> <ol style="list-style-type: none"> 1. Children completed schools and additional grades not available 2. Not satisfied with the school 3. Children were told not to come back 4. Other, specify 	
EDU10	<p>The children that attended school before the coronavirus, did they progress to the next grade?</p> <ol style="list-style-type: none"> 1. Yes, all 2. Yes, some 3. No, none of them 	
EDU11	<p>Have any of your children been involved in any catch up or learning activities during the school closure including holidays?</p> <ol style="list-style-type: none"> 1. Yes 2. No 3. Don't know 	If the response is 2 or 3 -> Skip to Next Section
EDU12	<p>Who offer these catch up /learning activities?</p> <ol style="list-style-type: none"> 1. Government school 2. NGO/INGO 3. Private/self-paid 4. Other, specify 	

ADDITIONAL:

VARIABLE NAME	QUESTION	SKIP PATTERN
RESPWorryRsnFirst	<p>What are is your most important concern under the current circumstances? [OPERATOR: DO NOT READ OUT THE RESPONSE OPTION, SELECT THE RESPONSE OPTION THAT BEST FITS THE INFORMATION PROVIDED BY THE RESPONDENT, OTHERWISE SELECT OTHER AND SUMMARIZE THE RESPONSE IN FEW WORDS]</p> <ol style="list-style-type: none">1. Shortage of food2. Increase in food prices3. Shortage of medicine4. Disruption of medical service5. Disruption of educational institute6. Getting corona virus (Please specify)7. Getting other illness (not corona)8. Losing Job\No job9. Disruption of livelihood source10. Travel restrictions11. No concerns12. Other [Please specify]	