

# Remote Household Survey: COVID-19 Monitoring

## Iraq

### Questionnaire for November 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)

#### DEMOGRAPHIC SECTION:

VARIABLE NAME	QUESTION	SKIP PATTERN
RESPSex	What is the gender of the respondent?  [OPERATOR: LISTEN TO THE VOICE AND CHECK THE BOX WHETHER THE RESPONDENT IS MALE OR FEMALE]  1. MALE 2. FEMALE	
RESPAge	How old are you?  [INELIGIBLE IF THE AGE IS LESS THAN 18]	

RESPEducation	<p>What is the most advanced level of education you have completed?</p> <ol style="list-style-type: none"> <li>1. Did not attend any school</li> <li>2. Did not complete any level</li> <li>3. Primary/Elementary Certificate (1-6)</li> <li>4. Intermediate Certificate (7-9)</li> <li>5. Basic Certificate (1-9)</li> <li>6. Preparatory/Secondary Certificate - Academic</li> <li>7. Preparatory/Secondary Certificate - Vocational</li> <li>8. Technical diploma</li> <li>9. Bachelor's Degree</li> <li>10. Professional Degree</li> <li>11. Higher Diploma Degree</li> <li>12. Master's Degree</li> <li>13. Doctoral Degree</li> <li>14. Other Specify_____</li> </ol>	
RESPBreadwinner	<p>Are you the main provider in your family/household?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> <li>3. Refused</li> </ol>	
ADMIN1Name (Governorate)	<p>Currently, which province [ADM1] does your household reside in?</p> <p>[DROP DOWN LIST]</p>	
ADMIN2Name (District)	<p>Currently, which district [AMD2] does your household reside in?</p> <p>[DROP DOWN LIST]</p>	
ADMIN3Name (sub-district)	<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"> <li>1. Resident</li> <li>2. Returnee</li> <li>3. IDP before 2014</li> <li>4. IDP since 2014</li> <li>5. Refugee</li> </ol>	<p>If the response is 1,3,4,5 -&gt; Skip to <b>Environment</b></p>
DispStat2	<p>How long has it been since you returned to this your place of origin after displacement?</p> <p>Months_____</p>	

Environment	Rural or Urban	
HHHousing	Which of the following living arrangements best describes your housing situation CURRENTLY?  1. Own home 2. Rent home 3. Staying as a guest hosted 4. Camp 5. Sharing accommodation with other families 6. Informal settlement	
HHSizebelow18	How many children (below 18 years of age) PERMANENTLY living in this household?	
HHSizebelow18-59	How many adults (18-59 Yr) are PERMANENTLY living in this household?	
HHSize60above	How many of the adults in your household are 60 and above the age of 60?	

## 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.

		<b>SKIP PATTERN</b>
EMPHousehold2	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 <b>during last 7 days</b> ?  <i>Number</i> _____	

	<i>Now I would like to ask about your current employment status.</i>	<b>SKIP PATTERN</b>
EMP10	What is your current (past 7 days) main employment status?	If the response is 5 or 6 -> Skip to

	<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> <ol style="list-style-type: none"> <li>1. Working for wage/salary for someone, an enterprise, company or government</li> <li>2. Working on own account or enterprise belonging to the household</li> <li>3. Unpaid work in a business or farm owned by a household (Contributing family member)</li> <li>4. Cash for work</li> <li>5. Did not have any job and seeking for job</li> <li>6. Did not have any job and not seeking for job</li> </ol>	Next section
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"> <li>1. Agriculture; forestry and fishing</li> <li>2. Mining and quarrying</li> <li>3. Manufacturing</li> <li>4. Electricity; gas, steam and air conditioning supply</li> <li>5. Water supply; sewerage, waste management and remediation activities</li> <li>6. Construction</li> <li>7. Wholesale and retail trade; repair of motor vehicles and motorcycles</li> <li>8. Transportation and storage</li> <li>9. Accommodation and food service activities</li> <li>10. Information and communication</li> <li>11. Financial and insurance activities</li> <li>12. Real estate activities</li> <li>13. Professional, scientific and technical activities</li> <li>14. Administrative and support service activities</li> <li>15. Education</li> <li>16. Human health and social work activities</li> <li>17. Arts, entertainment and recreation</li> <li>18. Tourism</li> <li>19. Other service activities</li> <li>20. Activities of households as employers; undifferentiated goods- and services producing activities of households for own use</li> <li>21. Domestic work</li> </ol>	

	22. Not elsewhere classified	
EMP12	<p>What type of employer did you work for?</p> <ol style="list-style-type: none"> <li>1. Government permanent</li> <li>2. Government temporary (contract)</li> <li>3. Private company/ business</li> <li>4. Foreign company/ business</li> <li>5. Non-governmental organization (NGO/INGO/UN)</li> <li>6. Family business</li> <li>7. Working on a farm or with livestock owned or rented by the household</li> <li>8. A private household</li> <li>9. Self-employed (own-account worker)</li> <li>10. Refusal</li> </ol>	If the response is 6, 7, 8, 9 -> Skip to EMP7

**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>	<b>SKIP PATTERN</b>
Business5	<p>During the past 30 days, did you or any member of your household operate a business?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If the response is 2-> Skip to Next section
	1.	
Business6	<p>Compared to the <b>usual monthly revenue</b>, was the revenue from the business for the month of [<b>LAST COMPLETED MONTH</b>]....?</p> <p>READ OPTIONS</p> <ol style="list-style-type: none"> <li>1. Increased</li> <li>2. Remained the same</li> <li>3. Decreased</li> <li>4. No revenue</li> <li>5. Business started withing last 30 days</li> </ol>	If the response is 1 or 2, 5-> Skip to Next section
Business47	<p>Why were there no revenue or less revenue from the business in [<b>LAST COMPLETED MONTH</b>]?</p> <p>DO NOT READ OPTIONS - MARK ALL THAT APPLY</p> <ol style="list-style-type: none"> <li>1. Usual place of business closed due to coronavirus legal restrictions</li> <li>2. Usual place of business closed for another reason</li> <li>3. No costumers / fewer customers</li> <li>4. Can't get inputs</li> </ol>	

	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:**

<b>VARIABLE NAME</b>	<b>QUESTION</b>	<b>SKIP PATTERN</b>
FCS_Intro	Now I will ask you about the foods and drinks you and your household ate or drank in the last 7 days. [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]	
FCSStap	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]	
FCSPulse	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]	
FCS Dairy	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] <b>7</b>	
FCSPr	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]	

FCSVeg	How many days over the last 7 days, did members of your household eat vegetables or leaves such as eggplant, carrot, red pepper, onions, pumpkin, orange sweet potatoes, spinach, cucumber, okra, and/or other leaves/vegetables? [OPERATOR: RECORD NUMBER OF DAYS 0 - 7]	
FCSFruit	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]	
FCSFat	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]	
FCSSugar	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]	

**REDUCED COPING STRATEGY INDEX SECTION: مؤشر تقليل استراتيجيات التأقلم**

VARIABLE 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.	
rCSILessQty	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?	
rCSIBorrow	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?	
rCSIMealSize	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?	
rCSIMealAdult	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?	
rCSIMealNb	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?	

## ACCESS TO FOOD AND MARKET

VARIABLE NAME	QUESTION	SKIP PATTERN
INTRO	Now we would like to ask some questions related to your household's access to food and market	
HHFoodCereal	<p>What is the <b>main source</b> 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]</p> <ol style="list-style-type: none"> <li>1. Own production</li> <li>2. Market \ Grocery store</li> <li>3. Exchange labor for food</li> <li>4. Gift from family, relatives or friends</li> <li>5. Food assistance by humanitarian agencies</li> <li>6. Food assistance by Government</li> <li>7. Other</li> <li>8. PDS</li> </ol>	If the response is 1-6-> Skip to HHFoodConstr_7D_YN
HHFoodCereal_oth	Please specify what is the main source of cereals for your household?	
HHFoodConstr_14D_YN	<p>In the past 14 days, has there been any time when your household <b>did not have sufficient</b> quantities of food needed for the household?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If the response is No-> Skip to HHStock



<p>HHFoodCo nstr</p>	<p>What was the <b>main reason</b> why your household <b>did not have sufficient</b> quantities of food needed in the past 14 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]</p> <ol style="list-style-type: none"> <li>1. Shortage of food in the market \ grocery store</li> <li>2. Increase in the prices of food</li> <li>3. No money to buy food</li> <li>4. No food in the house</li> <li>5. Unable access the market \ grocery store</li> <li>6. Markets \ grocery stores are closed</li> <li>7. Other</li> </ol>	
<p>HHStockCe real</p>	<p>Does your household <b>currently</b> have cereal stock?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>If the response is No -&gt; skip to MktAccess_7D</p>
<p>HHStockCe realDur</p>	<p>How long do you think the cereal would last?</p> <ol style="list-style-type: none"> <li>1. Less than one week</li> <li>2. 1 week</li> <li>3. 2 - 3 weeks</li> <li>4. 1 month</li> <li>5. More than 1 month</li> </ol>	
<p>MktAccess_14D</p>	<p>In the past 14 days, has there been a time when you or your household <b>could not access</b> the market\ grocery store?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2- No</li> </ol>	<p>If the response is No-&gt; skip to Next section</p>
<p>MktNoAcce ssWhy_14D</p>	<p>What was the <b>main reason</b> why you or your household <b>could not access</b> 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]</p> <ol style="list-style-type: none"> <li>1. Market\grocery stores were closed</li> </ol>	

	<ol style="list-style-type: none"> <li>2. Market\grocery store is too far</li> <li>3. Travel restrictions</li> <li>4. Security concerns</li> <li>5. Concerned about going out of the house due to disease outbreak</li> <li>6. All adult members of the household too sick to go out</li> <li>7. All adult members quarantined in the house</li> <li>8. Other</li> </ol>	
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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>	<b>SKIP PATTERN</b>
	1.	
TransferPDS2	<p>During the month of [<b>LAST COMPLETED MONTH</b>], did you or any member of your household receive any ration food from PDS?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If the response is 2-> skip to TransferPDS14
TransferPDS133	<p>Compared to the <b>usual monthly PDS quantity</b>, amount of ration food received during the month of [<b>LAST COMPLETED MONTH</b>] was ...?</p> <p>READ OPTIONS</p> <ol style="list-style-type: none"> <li>1. Higher</li> <li>2. The same</li> <li>3. Lower</li> </ol>	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> <ol style="list-style-type: none"> <li>1. No PDS card</li> <li>2. Ration shop closed</li> <li>3. Ration shop reported not having enough food</li> <li>4. Not able to go to the shop due to movement restrictions</li> <li>5. Don't want to be exposed to the virus</li> <li>6. Other (specify)</li> </ol>	
Transfer15	<p>During the month of [<b>LAST COMPLETED MONTH</b>], 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"> <li>1. Government</li> <li>2. Relatives/Friends from abroad</li> </ol>	

	<ul style="list-style-type: none"> <li>3. Relatives/Friends within Iraq</li> <li>4. NGOS/INGO/UN (UNHCR, WFP etc.)</li> <li>5. Religious organizations</li> <li>6. Other</li> </ul>	
Transfer16	<p>During the month of [<b>LAST COMPLETED MONTH</b>], 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> <ul style="list-style-type: none"> <li>1. Government</li> <li>2. Relatives/Friends from abroad</li> <li>3. Relatives/Friends within Iraq</li> <li>4. NGOS/INGO/UN (UNHCR, WFP etc.)</li> <li>5. Religious organizations</li> <li>6. Other</li> </ul>	

**HEALTH STATUS AND ACCESS TO HEALTH SERVICES:**

<b>VARIABLE NAME</b>	<b>QUESTION</b>	<b>SKIP PATTERN</b>
INTRO	NOW WE WOULD LIKE TO ASK SOME QUESTIONS RELATED TO THE HEALTH STATUS OF YOUR HOUSHOLD AND ACCESS TO HEALTH SERVICES	
HHSICK_YN_14D_FEVER	In the past 14 days, how many (if any) of your household members have had a fever?	
HHSICK_YN_14D_COUGH	In the past 14 days, how many (if any) of your household members have had a cough?	If the response is "0" for this skip to MEDCARE_YN_14D
HHSICK_YN_14D_COUGHBREATHING	In the past 14 days, how many (if any) of your household member have had a cough with difficulty in breathing?	If the response is 0 for all three symptoms-> skip to HHHealthProvider

<p>MEDCARE_YN_14D</p>	<p>In the past 14 days, did <b>those</b> members of the household <b>seek medical care</b> either at home or in the hospital\health center?</p> <p>[OPERATOR: THIS QUESTION APPLIES TO <b>THOSE</b> MEMBERS OF THE HOUSEHOLD WHO SHOWED ONE OF THE SYMPTOMS ABOVE]</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	<p>If the response is No-&gt; skip to HHDeath_YN</p>
<p>MEDCARE_14D</p>	<p>In the past 14 days, were <b>those</b> members of the household able to <b>receive the medical care</b> either at home or in the hospital\health center?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	
<p>HHHospital_YN</p>	<p>Are any of <b>those</b> sick members currently hospitalized?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	
<p>HHDeath_YN</p>	<p>Have any of <b>those</b> sick members died?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	
<p>HHHealthProvider</p>	<p>Where do you <b>usually</b> go when you or your household members get sick?</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]</p> <ol style="list-style-type: none"> <li>1. Hospital \ Clinic</li> <li>2. Health Center</li> <li>3. Traditional healer/Medical assistant (Nurse)</li> <li>4. Religious healer</li> <li>5. Self-medication</li> <li>6. Pharmacy to buy medicine</li> <li>7. Stay at home</li> </ol>	

	8. Other	
HHHealthAccess	<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"> <li>1. Yes</li> <li>2. No</li> </ol>	
HHHealthAccess_14D	<p>In the past 14 days, did you or your household members <b>face any challenges</b> accessing the health center\hospitals\clinic and other health services?</p> <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No challenge faced</li> <li>3. No need to access</li> </ol>	<p>If the response is No challenge faced or No need to access -&gt; Skip to Next Section</p>
HHHealthConstr_14D	<p>What is the <b>main reason</b> why you or your household <b>could not access</b> 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"> <li>1. Hospital\health center is far</li> </ol>	

	<ol style="list-style-type: none"> <li>2. Hospitals\Health centers are closed</li> <li>3. Medical personnel didn't come at home</li> <li>4. Lack of money</li> <li>5. Travel restrictions</li> <li>6. All members of the family too sick to travel</li> <li>7. Denied access because it's out of capacity</li> <li>8. Other</li> </ol>	
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## EDUCATION/DISTANCE LEARNING

### November Round Only

	<i>Now, I would like to ask about education and learning activities of the children in your household</i>	<b>SKIP PATTERN</b>
EDU1	Are there any children aged between 4 to 19 PERMANENTLY living in this household? <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If the response is 2. No -> Skip to Next Section
EDU13	Are any of your children attending school now [OR THIS SCHOOL YEAR]? <ol style="list-style-type: none"> <li>1. Yes</li> <li>2. No</li> </ol>	If the response is 2. No -> EDU2
EDU14	What type of schools most of the children are attending now [OR this school year]? <ol style="list-style-type: none"> <li>1. Government/ Public</li> <li>2. Private</li> <li>3. Religious/ Faith based</li> <li>4. Other specify_____</li> </ol>	
EDU15	How are most of your children attending classes? <ol style="list-style-type: none"> <li>1. Taking online classes</li> <li>2. Attending face to face classes</li> <li>3. Mixture of online and face to face classes</li> <li>4. Other specify</li> </ol>	
EDU16	Is the school offering any catch-up classes /learning activities in addition to the normal classes? <ol style="list-style-type: none"> <li>1. yes</li> <li>2. No</li> <li>3. Don't know</li> </ol>	If the response is 2 or 3 -> Skip to EDU2
EDU17	What catch up classes /learning activities the school is offering? <ol style="list-style-type: none"> <li>1. Additional subject classes</li> <li>2. Additional materials</li> <li>3. Coaching/Counseling</li> </ol>	

	4. Others, specify	
EDU2	Were any of your children attending school before schools were closed due to Coronavirus?  1. Yes 2. No	If the response is 2. No -> Skip to Next Section
EDU7	What type of schools most of the children were attending before the Coronavirus pandemic? 1. Government/ Public 2. Private 3. Religious/ Faith based 4. Other specify_____	
EDU18	Have you Switched any of your children to another school this school year? 1. Yes 2. No 3. Don't know	If the response is 2 or 3 -> Skip to Next Section
EDU19	Why did you switch them to another school? 1. Children completed schools and additional grades not available 2. Not satisfied with the school 3. School is still closed and online classes not available 4. Other, specify	

**ADDITIONAL:**

VARIBLE NAME	QUESTION	SKIP PATTERN
RESPWorryRsnFirst	What are is <b>your most important concern</b> 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]  1. Shortage of food 2. Increase in food prices 3. Shortage of medicine 4. Disruption of medical service 5. Disruption of educational institutes 6. Getting corona virus (Please specify)!	

	<ol style="list-style-type: none"><li>7. Getting other illness (not corona)</li><li>8. Losing Job\No job</li><li>9. Disruption of livelihood source</li><li>10. Travel restrictions</li><li>11. No concerns</li><li>12. Other [Please specify]</li></ol>	
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Your answers will help us to understand and respond to your community needs. May we call you back again in the near future?

1. Yes
2. No