

- Primary Male: [PM Name] [PM age]
- Primary Female: [PF Name] [PF age]
- [Member 1 name] [Member 1 age], [Member 1 gender]
- [Member 2 name] [Member 2 age], [Member 2 gender]
-

Below are the phone numbers available to call this household. Please try each phone number (in listed order) to reach this household. Try to speak to the target respondent ([TR name]), but, if unavailable or deceased, you may speak to anyone in the TR's CURRENT household. Once reached, select the phone number that reached this household before continuing to the next page.

- | | | |
|--------------------------|--|---------------------------|
| <input type="checkbox"/> | [Household Phone 1] | → SKIP to Intro Statement |
| <input type="checkbox"/> | [Household Phone 2] | → SKIP to Intro Statement |
| <input type="checkbox"/> | [Household Phone 3] | → SKIP to Intro Statement |
| <input type="checkbox"/> | Other: __ __ __ __ __ __ __ __ __ __ | → SKIP to Intro Statement |
| <input type="checkbox"/> | Reached someone outside the TR household | → CONTINUE to b |
| <input type="checkbox"/> | Exhausted all 10 attempts. Unable to reach household | → TERMINATE survey |
| <input type="checkbox"/> | No available working phone number | → TERMINATE survey |

If reached, continue. If unable to reach, skip to CONCLUSION.

b. (If reached someone outside the TR household) Try to ascertain whether this person knows the target respondent. If they do, ask whether they can help you reach anyone in the household of the target respondent, and give you their phone number.

- Respondent does not know the target respondent (SKIP to CLOSING STATEMENT)
- Respondent knows the target respondent, but does not have a phone number (SKIP to CLOSING STATEMENT)
- Respondent knows a phone number for the target respondent's household, |__|__|__|__|__|__|__|__|__|__| (SKIP to CLOSING STATEMENT, and NOTE DOWN THE NUMBER on your Tracking Sheet)

4alt (if RDD) You are trying to reach Household ID: [Household ID].

(If not surveyed at Round 1 OR Round 2) We have not contacted this household before. The phone number is: [Household Phone 1]. In Round [Last Round surveyed], the survey status was [RD 1/2 Survey Status].

(If surveyed at Round 1 OR Round 2) We have contacted this household during Round Round [Last Round surveyed], on [Round 1/2 date]. Your target respondent is [TR name], [TR gender], [TR age] years old. In [Round 1/2 date], the household was located in [HH Location], and had the following adult members:

- Primary Male: [PM Name] [PM age]
- Primary Female: [PF Name] [PF age]
- [Member 1 name] [Member 1 age], [Member 1 gender]
- [Member 2 name] [Member 2 age], [Member 2 gender]
-

Below are the phone numbers available to call this household. Please try each phone number (in listed order) to reach this household. Try to speak to the target respondent ([TR name]), but, if unavailable or deceased, you may speak to anyone in the TR's CURRENT household. Once reached, select the phone number that reached this household before continuing to the next page.

- | | | |
|--------------------------|---------------------|---------------------------|
| <input type="checkbox"/> | [Household Phone 1] | → SKIP to Intro Statement |
| <input type="checkbox"/> | [Household Phone 2] | → SKIP to Intro Statement |
| <input type="checkbox"/> | [Household Phone 3] | → SKIP to Intro Statement |

- Other: → SKIP to Intro Statement
- Reached someone outside the TR household → CONTINUE to b
- Exhausted all 10 attempts. Unable to reach household → TERMINATE survey
- No available working phone number → TERMINATE survey

If reached, continue. If unable to reach, skip to CONCLUSION.

Introduce yourself: Hello, my name is [FO NAME] from REMIT Research Consulting and we called you in the last few weeks regarding a survey regarding Coronavirus (COVID-19). I am calling on behalf of the Kenyan National Bureau of Statistics (KNBS), The World Bank and The United Nations High Commissioner for Refugees (UNHCR). The KNBS, The World Bank and UNHCR are trying to help assess the socio-economic impact of CORONAVIRUS (COVID-19). Your household has been randomly chosen to participate in this survey. Your cooperation and answers would be extremely important. All personal information provided will be kept strictly confidential.

5. a. (if KNBS / UNHCR / RDD surveyed at Round 1/2) Who are you speaking with?

- [Target Respondent Name] → SKIP to c
- Target respondent unavailable, other member of TR household → SKIP to c
- Target respondent deceased, other member of TR household → SKIP to c
- I am not 100% sure, but probably from the TR household → SKIP to b

b. (if KNBS / UNHCR / RDD surveyed at Round 1/2 and 5a == unsure) Why are you not sure?

c. Are you 18 years or older? Yes / No

If Yes, SKIP to INFORMED CONSENT. If No, and phone number from RDD/UNHCR NOT surveyed before, SKIP to CLOSING STATEMENT.

d. (if KNBS or RDD/UNHCR surveyed before AND 5c is No) Is there anyone else living in the household that is older than 18 years old? Yes / No

If No, SKIP to CLOSING STATEMENT. If Yes, Read: May I speak to that person now? If that person is not available, ask for another time that would be more suitable and note it in the tracking sheet. Alternatively, ask for a different phone number where that person can be reached.

5d. Alternative phone number. Please note this down on your Tracking Sheet.

5e. What date/time are you willing to schedule the interview for? Please note this down on your Tracking Sheet.

End interview here. DO NOT submit form.

5f. Date of interview: (DD/MM/YYYY) //
 5g. Time start interview: (24 hr clock) :

Informed consent and data protection:

[If surveyed in round 1 or round 2]: Thank you for participating in the phone interview last month. We really appreciate your time and your willingness to tell us about your household. This is a follow-up survey to help us understand the experiences of your household since the last time we talked, and to ask some new questions.

As I told you, the KNBS, The World Bank and UNHCR are conducting a nationwide phone survey in Kenya. The objectives of the survey are to better understand the impacts of the Coronavirus here in Kenya to help design appropriate policy responses. If you agree to participate in this survey, we will ask you some questions related to your experience and knowledge of the virus and its impact on your employment, food security, access to health and educational facilities, mental well-being, and transfers. The interview will take about 30 minutes, and we will schedule it when it is convenient for you.

There are no direct benefits to you, but as a small gift you will receive 50 KSh as airtime for the interview after the interview has ended.

Any responses that you give us will be confidential, that is, the researchers will not let anyone else know how you answered. The anonymized responses will be used for research purposes and published in reports. We can assure you that we will never include any names or other personal details in publications. The study is voluntary and if you do not want to participate, you can decide that at any time. There will be no negative impacts on you. If at any time you want to stop participating, please let me know and we will respect your decision.

6. Do you have any questions now? Yes / No

Read: If you have any questions later, you can always call [OFFICE NUMBER].

7. Do you agree to participate in the survey? [VERBAL CONSENT] Yes / No

If No, CONTINUE to question 8. If Yes, SKIP to Section 2

8. a. (If RDD and NOT surveyed in Round 2) For how long have you been using this line?

Less than a month

2- 6 months

6 - 12 months

1 - 5 years

more than 5 years

Cannot remember when I bought the line

Refuse

b. (if RDD and NOT surveyed in Round 2) Did this household exist 5 years ago (in 2015/16)? By exist, we mean this group of people (or a similar composition of people with mostly similar people) lived together and ate from the same pot. Note: This may have been in the same place as today, or somewhere else. Migration of a full household does not constitute a new household.

Yes, this household existed 5 years ago

No, this household was newly established in the last 5 years

c. (if RDD and NOT surveyed in Round 2 and existed 5 years ago) Where did this household live 5 years ago (in 2015/16)?

- i. County: Use county codes
- ii. Location: Use location codes

d. Is the place where this household resided 5 years ago (in 2015/16) located within a town or a trading centre?

- Yes
- No, lived in a village / rural area

e. (if yes) What was the name of the town or trading centre? Use town codes

9. What is the main reason for not participating in the survey?

- I am busy → SKIP to question 11
- Refusal for this round only → SKIP to question 11
- Refusal for this round and any future rounds → SKIP to question 10
- Unable to survey - parent or contact refusal → SKIP to CLOSING STATEMENT
- Unable to survey - spouse refusal → SKIP to CLOSING STATEMENT
- Unable to survey - in prison → SKIP to CLOSING STATEMENT
- Unable to survey - mental illness / disability → SKIP to CLOSING STATEMENT
- Unable to survey - other: _____

10. Record your impressions of why the FR refuses to participate during this survey round. If you feel comfortable doing so, you may ask the FR why: Why don't you want to participate in this survey round? Choose up to 3 reasons.

// Other: _____

- 1 = Survey is too long
- 2 = FR has caregiving duties
- 3 = FR has to work
- 4 = FR does not want to disclose personal information
- 5 = FR is suspicious of REMIT/KNBS/WB
- 6 = FR hasn't received assistance from REMIT/KNBS/WB and doesn't want to participate
- 7 = FR just doesn't want to / no reason given
- 10 = Other (specify)

SKIP to CLOSING STATEMENT.

11. a. Are you willing to schedule the interview for a later date or time? Yes / No

b. (If yes) Rescheduling instructions: Please ask the FR when they are next available. If you cannot personally call back at this time, make a tentative appointment with the FR. Then, let the FR know that you will contact them to confirm when you will call back. Communicate the time with your TL to confirm if another person can call back. Record this information and the current time on the tracking sheet now. End the interview. DO NOT submit this form. Only submit a form

if you either reached a household, or exhausted all attempts.

CLOSING STATEMENT. Read: Thank you very much for your time. If you change your mind and would like to participate in the interview, you may call me back any time. Here is my phone number [FO Phone Number]. End interview here.

Section 2: Household Background

Part A: FR Information

1. a. (if Surveyed in Round 1/2) Do not read: During the former round of this survey, we spoke to [Round 1/2 respondent name]. Are we speaking to this person now? Yes / No
If Yes, Skip to question 2a. If no, CONTINUE.

b. (if Surveyed in Round 1/2) Who in the household are you speaking to?

- HH Member 1
 - HH Member 2
 - HH Member 3
 - HH Member 4
 - HH Member 5
 - HH Member 6
 - Other adult HH member
- SKIP to 2b.

2. a. (If respondent = same respondent as Round 1/2): Is your official name [Round 1/2 respondent name]? Yes / No
If yes, SKIP to question 3, if no, continue

b. What is your full name, as it would appear on your national ID?

| _____ | / | _____ | / | _____ |
First name Middle name Last name

c. What is your common name? This is the name you are commonly referred to by household members / friends. _____

3. What is your age in completed years? | _____ |

4. Is the FR a man or a woman? Do not read. Confirm if unsure.
 Male / female

If Respondent = Same Respondent as Round 1/2, SKIP to question 9. Otherwise, continue.

5. What is the highest level of education you have completed? Do not read.
 No Formal Education

- Pre-primary
- Primary
- Post-primary, vocational
- Secondary
- College, middle-level
- University undergraduate
- University postgraduate
- Madrassa/Duksi
- Other, specify

a. In February 2020, were you enrolled in any form of education?

- Not enrolled
- Pre-primary
- Primary
- Post-primary, vocational
- Secondary
- College, middle-level
- University undergraduate
- University postgraduate
- Madrassa/Duksi
- Other, specify: _____

6. What is your country of birth? Do not read.

- Kenya → SKIP to question 9
- Somalia
- Ethiopia
- Sudan
- South Sudan
- Democratic Republic of the Congo
- Tanzania
- Uganda
- Burundi
- Zimbabwe
- Rwanda
- Other, please specify: _____

7. In which year did you arrive in Kenya? |_____|

8. What is your migration status in Kenya? Do not read.

- | | |
|--|---------------------------|
| <input type="checkbox"/> Refugee | → CONTINUE to question 10 |
| <input type="checkbox"/> Asylum seeker -does not yet hold refugee status | → CONTINUE to question 10 |
| <input type="checkbox"/> Resident | → SKIP to question 11 |
| <input type="checkbox"/> On business trip | → SKIP to question 11 |
| <input type="checkbox"/> Tourist | → SKIP to question 11 |
| <input type="checkbox"/> Visiting relatives or friends | → SKIP to question 11 |

Other, specify? _____ → SKIP to question 11

9. (if Surveyed at Round 1/2) Are you currently still residing in [Round 1/2 County, Location, Camp] or have you moved to a different place?

Yes / No

If Yes, SKIP to section 2B. If No, continue.

10. (if refugee or asylum seeker) Where do you currently reside in Kenya? Do not read.

Kalobeyei settlement → SKIP to question 12

Kakuma camp → SKIP to question 12

Dadaab camp → SKIP to question 12

Other → CONTINUE to question 11

11. Where do you currently reside?

a. County: Use county codes

b. Location: Use location codes

12. Is the place that you are currently residing in located within a town or a trading centre?

Yes

No, lives in a village / rural area

12a. (if yes) What is the name of the town or trading centre? Use town codes

13. a. (if NOT Surveyed at Round 1/2) Did you live in [County], [Location], [Camp] in January 2020?

Yes / No

b. (if No OR if no longer lives in the same place as at Round 1/2) When did you move to [County], [Location]? In case there were repeated migrations, give the date you LAST came back to live in [County], [Location]

In the past 7 days

In the 7 days before that (between 14 to 7 days ago)

July 2020

June 2020

May 2020

April 2020

March 2020

February 2020

January 2020

Birth Place/ Permanent Home

c. (if No OR if no longer lives in the same place as at Round 1/2) Why did you move to [County], [Location]? Do not read. Use g5 codes (below).

To avoid the lockdown

School / university closed

Parents moved

- Parents / guardian died
- Schooling/training
- Marriage
- To look for work
- To start a new job that you have already been hired for
- Drought/ famine/ flood
- Return to permanent home
- For fun/ new experience/ adventure
- Care for relative/friend
- To be near people of my tribe/ethnic group
- Just visiting
- Election Related
- Job Transfer
- Separation
- Divorce
- Job termination
- Political unrest
- Resettled by UNHCR
- Was born here
- Other: _____

14. What is your marital status? Do not read.

- Married monogamous, living with spouse
- Married monogamous, not living with spouse
- Married polygamous, living with spouse
- Married polygamous, not living with spouse
- Not married, but living together
- Separated
- Divorced
- Widow or widower
- Never married

15. In case we cannot reach you on this phone number in the future, is there another phone number where we can reach you? Yes / No

16. (if not surveyed in Round 1 / 2) How many other numbers would you like to provide, so that we can reach out to you in the future? Limit to 5 phone numbers.

Loop through phone numbers {

a. Phone #:

b. Who's phone is this?

- Mine
- My friend's/ relative
- My village chief's
- Someone in my household
- Don't know

Refused
}

Part B: Household Information

Read: Now we'd like to talk about your household, defined as a person, or group of people that "eat from the same pot" and spend 4 nights or more in an average week sleeping in your home.

17. (If different respondent as Round 1/2 OR NOT Surveyed at Round 1/2) What is your relationship to the head of household? Do not read.

- Self
- Current spouse / partner
- Former spouse / partner
- Son/ Daughter
- Grandchild
- Sister/ Brother
- Father/ Mother
- Nephew/ Niece
- In-law
- Grandparent
- Other relative, specify: _____
- Non-relative

If Surveyed at Round 1/2, CONTINUE. Otherwise, SKIP TO QUESTION 23i.

Read: The last time we surveyed this household on [ROUND 1/2 date] , we recorded [NUMBER OF ADULT MEMBERS] adult members in this household.

18. (If respondent moved since Round 1/2) Before, you mentioned that you moved from [Round 1/2 County, Location/Camp] to [COUNTY], [LOCATION]/[CAMP] since [Round 1/2 date]. Did you move together with the majority / all of your household from [Round 1/2 date]?

- Yes, we moved together → if yes, go to 18a.
- No, I moved out of the household I lived in at [Round 1/2 date] → go to question 27.

18a. Why did the household move? Don't read, just ask. |_____| Use g5 codes (see above)

Read: I would now like to verify each of these members again.

LOOP through each ADULT household member from Round 1/2 {

19. Is [NAME] still an ADULT member of this household?

- Yes, still lives here
- No, no longer member of this household
- No, the respondent moved out, this person stayed back in the Round 1/2 household.
- Never lived here / wrong information

Yes, a member but NOT an adult (< 18 years of age)

20. What is the highest level of education [NAME] have completed? Do not read.

- No Formal Education
- Pre-primary
- Primary
- Post-primary, vocational
- Secondary
- College, middle-level
- University undergraduate
- University postgraduate
- Madrassa/Duksi
- Other, specify

20a. In February 2020, was [NAME] enrolled in any form of education?

- Not enrolled
- Pre-primary
- Primary
- Post-primary, vocational
- Secondary
- College, middle-level
- University undergraduate
- University postgraduate
- Madrassa/Duksi
- Other, specify: _____

21. (if no longer member) Why is [NAME] no longer a member of this household?

- Moved away
- Deceased

a. (if deceased) I am sorry for the loss. I understand this may be painful to talk about, but what was the cause of death? Don't read, just ask. |_____| Use d1 codes.

b. (if no longer member) When did [NAME] move away / pass away?

- In the past 7 days
- In the 7 days before that (between 14 to 7 days ago)
- August 2020
- July 2020
- June 2020
- May 2020
- April 2020
- March 2020
- February 2020
- January 2020
- Before 2020

c. (if moved away) Why did this person move away? Don't read, just ask.
|_____| Use g5 codes.

d. (if moved away) Where did [NAME] move to?
i. County: Use county codes |_____|
ii. Location: Use location codes |_____|

}

22. Are there any other ADULT (>18) members in your household? If so, how many? |____| Enter 0 if no other adult members than those already mentioned.

LOOP through other ADULT members not already listed {

23.

a. Name: _____

b. Age: _____

c. Gender: _____

d. What is the highest level of education [NAME] has completed? Do not read.

|____| No Formal Education

|____| Pre-primary

|____| Primary

|____| Post-primary, vocational

|____| Secondary

|____| College, middle-level

|____| University undergraduate

|____| University postgraduate

|____| Madrassa/Duksi

|____| Other, specify

e. In February 2020, was [NAME] enrolled in any form of education?

|____| Not enrolled

|____| Pre-primary

|____| Primary

|____| Post-primary, vocational

|____| Secondary

|____| College, middle-level

|____| University undergraduate

|____| University postgraduate

|____| Madrassa/Duksi

|____| Other, specify: _____

f. When did [NAME] become a member of this household?

|____| In the past 7 days

|____| In the 7 days before that (between 14 to 7 days ago)

|____| August 2020

- July 2020
- June 2020
- May 2020
- April 2020
- March 2020
- February 2020
- January 2020
- Before 2020
- Is not new / should've been captured before

g. (if new) Why did [NAME] join the HH? Do not read choices. Simply record FR's response.
Use g5 codes

h. (if new) Where did [Name] live in [Round 1/2 date]?

- i. County: Use county codes
- ii. Location: Use location codes

}

Child roster (all households regardless of prior survey status)

i. Currently, how many children (0-17 years old) live in your household?

LOOP through each child member

1. Name: _____
2. Age: _____
3. Gender: _____
4. Was \${child_name} enrolled in school in February 2020?
 | Yes | No

j. (if number of children more than at Round 1/2) During the survey on [Round 1/2 date] you said there were [Round 1/2 number of children] children under 18 years old living in this household. Why are there more?

- School is closed
- The household needs them for chores etc.
- Hosting children of relatives/friends
- They are not safe in their place
- They were visiting relatives friends during the last survey
- Don't know
- Other (specify)

k. (if number of children less than at Round 1/2) During the survey on [Round 1/2 date] you said there were [Round 1/2 number of children] children under 18 years old living in this household. Why are there less?

- They have gone to another household in another location to support it (i.e. go to grandparents' place to support them during this difficult period)
- They are not safe in this place
- Household lost a child
- They went to another place to work
- Don't know
- Other (specify)

If not surveyed at Round 1/2, CONTINUE. Otherwise, SKIP TO Question 31.

24. Currently, how many adults (INCLUDING yourself) are in your household, “eat from the same pot” and spend 4 nights or more in an average week sleeping in your home? If the FR is live-in house help or a live-in guard and has a spouse or adult dependent(s) staying with them at the employer’s house, only include these spouse/dependent(s) on the household roster (do not count their employer or the employer’s family as part of the FR’s household).

Adults (≥ 18)

a. (if not surveyed in Round 1/2 AND Sample == UNHCR) What is the birth date of the youngest household member? If there are children in the household, this should be the birth date of the youngest child. If the exact day is not known, select the first of the month the person was born. Month Date Year

25. Has your household moved together as a unit from [COUNTY], [LOCATION]/[CAMP] since January 2020?

Yes → if yes, go to 26

No → if no, skip to 27

26. Where was your household living in January 2020?

County: _____

Location: _____

26a. Why did the household move? Don't read, just ask. Use g5 codes (see above)

27. Please list all current ADULT (≥ 18) members of the household (OTHER THAN the FR):

a. Name Age: Gender:

i. (If 17 = No): Lived in [COUNTY], [LOCATION]/[CAMP] in Jan 2020:

b. Name Age: Gender:

i. (If 17 = No): Lived in [COUNTY], [LOCATION]/[CAMP] in Jan 2020:

c. Name Age: Gender:

i. (If 17 = No): Lived in [COUNTY], [LOCATION]/[CAMP] in Jan 2020:

d. ...

LOOP through members that lived elsewhere in Jan 2020 (if any) {

e. Why did [Name] join this household? Don't read, just ask. |_____| Use g5 codes (see above)

f. When did [Name] join this household?

|__| In the past 7 days

|__| In the 7 days before that (between 14 to 7 days ago)

|__| August 2020

|__| July 2020

|__| June 2020

|__| May 2020

|__| April 2020

|__| March 2020

|__| February 2020

|__| January 2020

g. Where did [Name] live in January 2020?

i. County: Use county codes |_____|

ii. Location: Use location codes |_____|

h. What is the highest level of education you have completed? Do not read.

|__| No Formal Education

|__| Pre-primary

|__| Primary

|__| Post-primary, vocational

|__| Secondary

|__| College, middle-level

|__| University undergraduate

|__| University postgraduate

|__| Madrassa/Duksi

|__| Other, specify

i. In February 2020, were you enrolled in any form of education?

|__| Not enrolled

|__| Pre-primary

|__| Primary

|__| Post-primary, vocational

|__| Secondary

|__| College, middle-level

|__| University undergraduate

|__| University postgraduate

|__| Madrassa/Duksi

|__| Other, specify: _____

}

28. [FO: Do not read]: There are currently xx household members. Is this correct?

Yes No (if no: how many members are there? _____ Please go back and correct the roster if necessary)

29. (If q15 not "SELF") Who is the household head? Select one.

- [HH Member 1]
- [HH Member 2]
- [HH Member 3]
-

a. (If q15 not "SELF") What is the household head's full name? This is the name, as it would appear on a government ID.

|_____| / |_____| / |_____|
First name Middle name Last name

b. (If q15 not "SELF"). What is the highest level of education completed by the household head?

- No Formal Education
- Pre-primary
- Primary
- Post-primary, vocational
- Secondary
- College, middle-level
- University undergraduate
- University postgraduate
- Madrassa/ Duksi
- Other, specify

c. (If q15 not "SELF") What is the marital status of the household head?

- Married monogamous, living with spouse
- Married monogamous, not living with spouse
- Married polygamous, living with spouse
- Married polygamous, not living with spouse
- Not married, but living together
- Separated
- Divorced
- Widow or widower
- Never married

30. In January 2020, were there any other ADULT (≥ 18) household members that are no longer part of the household? Yes / No

30a. (if yes) Please list all ADULT (≥ 18) members of the household in January 2020, that are no longer part of the household.

- i.** Name |_____| Age: |_____| Gender: |_____|
- ii.** Name |_____| Age: |_____| Gender: |_____|
- iii.** Name |_____| Age: |_____| Gender: |_____|

iv. ...

30b. (if yes) LOOP through members that left {

i. Why is [Name] no longer a member of this household?

- Moved away
- Deceased
- Don't know
- Refused
- Respondent moved away

ii. (if moved away) Why did this person move away? [_____] Use g5 codes (see above)

iii. (if deceased) I am sorry for the loss. I understand this may be painful to talk about, but what was the cause of death? [_____] Use d1 codes (below)

- Cancer
- Heart attack/stroke
- COVID-19 confirmed
- Flu-like symptoms (fever, cough, pneumonia, etc.)
- Other health/medical condition, please specify: _____
- Road accident
- Workplace accident
- Home accident
- Committed suicide
- Slain
- Other, please specify: _____

iv. When did [Name] move away / pass away / stop being a member of this household?

- In the past 7 days
- In the 7 days before that (between 14 to 7 days ago)
- August 2020
- July 2020
- June 2020
- May 2020
- April 2020
- March 2020
- February 2020
- January 2020

v. (if moved away) Where did [Name] move to?

- i. County: Use county codes [_____]
- ii. Location: Use location codes [_____]

}

31. (If not surveyed at round 1/2 or if the entire household relocated since Round 1/2) What is the predominant floor material of the [MAIN] dwelling unit? Do not read. Select all that apply. Use materials codes (below).

- Earth/Sand
- Dung
- Wood Planks/Shingles
- Palm/Bamboo
- Parquet Or Polished Wood
- Vinyl Or Asphalt Strips
- Ceramic Tiles
- Cement
- Carpet
- Other, please specify: _____
- Don't know
- Refused

32. (If not surveyed at round 1/2 or if the entire household relocated since Round 1/2) What is the predominant wall material of the [MAIN] dwelling unit? Do not read. Select all that apply. Use materials codes (below).

- No walls
- Cane/Palm/Trunks
- Grass/Reeds
- Mud/Cow Dung
- Bamboo with mud
- Stone with mud
- Uncovered adobe
- Plywood
- Cardboard
- Reused wood
- Corrugated iron sheets
- Cement
- Stone with lime/cement
- Bricks
- Cement blocks
- Covered adobe
- Wood planks/shingles
- Tent/Canvas
- Other, please specify: _____
- Don't know
- Refused

33. a. (If not surveyed at round 1/2round 1 or if the entire household relocated since Round 1/2) Is your home physically connected to the electricity grid? Yes / No

If NO, skip to question 34.

b. (If not surveyed at round 1/2round 1 or if entire household relocated since Round 1/2) Have you used electricity from the grid in your home in the past 7 days (for example, a lightbulb, or a cell phone charger)? Do not read, simply code the FR's response

- Yes
- No, it was disconnected because I did not pay Kenya Power
- No, there is a power outage (due to e.g. heavy rain, a fallen tree, a blown fuse, the

transformer blew up)
 No, for another reason (specify): _____

34. (If not surveyed at round 1/2round 1 or if the entire household relocated since Round 1/2) Did anyone in your household own any of the following before March 2020? Select all that apply.

- None
- Radio
- Mattress
- Charcoal Jiko
- Refrigerator
- Don't know
- Refused

35. In total, how many mobile phone numbers do ALL members of your household use? Include all members of the household, and all connected mobile phone numbers. That is, if one person owns two numbers, count both. |_____|

If school-aged children in the household, continue. Else skip to section 3.

Section 2c: Education

Read: Above, you told us that there are [boys_5-11 + boys_12-17] boys and [girls_5-11 + girls_12-17] between 5 and 17 in your household. I would now like to ask you some questions about one of your boys/girls:

Read: Above, you told us that there are [boys/girls_5-11 + boys/girls_12-17] boys/girls between 5 and 17 in your household. I would now like to ask you some questions about one of your boys/girls:

CTO: Select a random number (among the numbers of boys / girls) → [randomboy/girl]
LOOP through random child {

Read: I would now ask some question about your [random boy/girl]born boy / girl:

1. In February 2020, was [Name] enrolled in school, and at what level?

- Pre-school
- Primary school
- Secondary school
- Tertiary education
- Other (please specify)
- Not enrolled in any school

2. Was [Name] going to public school, private school or both public and private school? Do not read.

- Public
- Private

- Both
- Don't know
- Refused

3. (if not enrolled) Why was [Name] not attending school or academic institutions in February 2020?

Do not read. Select all that apply.

- No money -uniforms, transport, books, fees etc.
- Children needed to work/ Work in household
- School too far from home/ No school close by
- Illness or disability
- Poor quality of schools
- School conflicts with beliefs
- Marriage
- Pregnancy
- Other, specify: _____

4. Is [Name] planning to attend school once they reopen or is [Name] already attending school now?

- Yes, attending school now
- Yes, planning to attend when schools open
- No, not planning to attend

a. (if no) Why not? Check all that apply

- Fear of contracting COVID19
- Unaware that schools are reopening
- No money-uniforms, transport, books, fees etc
- Children need to work/ work in household
- School too far from home/No school close by
- Illness or disability
- Poor quality of schools
- School conflicts with beliefs
- Marriage
- Pregnancy
- Working for pay
- Helping in a family business
- Providing childcare or elderly care
- Domestic work
- Won't pass exams anyway
- Other (please specify)

5. Where is [Name] staying during the day if they are not in school? Select all that apply. (1=At home with a parent, 2=At home with another adult relative/friend, 3=At home by themselves, 4=Outside the home with a friend/relative, 5=Coming with family member to work, 6=Daycare / other childcare, 7=At home with maid / domestic helper, 8=Other (specify)

a. (if 1 OR 2 OR 5) Which household member has the primary responsibility for child care for

[Name]?

- HH Member 1
- HH Member 2
- HH Member 3
-
- Other child HH member

6. Has [Name] been engaged in any education or learning activities in the last week?

Yes / No / DK

7. (if yes) On average over the past week, how many hours a day did [Name] spend on education in the last week?

- More than two hours each day (10+ hours/week)
- About one hour each day (~5 hrs/ week)
- About a half hour each day (~3hrs/week)
- A few minutes each day (<1 hr/week)
- None (0)

8. (if yes) Through which means does [Name] have access to education/learning? Select all that apply.

- Attending school in person
- Attending school remotely / from home
- Online
- Radio
- TV
- Self-directed learning (textbooks and other revision materials)
- Community-based teaching (i.e TSC teacher is supporting children in the community funded by Government)
- Taught by parents, or other adult household members
- Taught by siblings
- Other, please specify: _____

9. (If not attending school currently, but attended school in February) Did you (or [Name]) have access to [Name]'s teachers in the last week now that schools have closed? Yes / No

a. (if Yes) How did you or [Name] have access to their teachers in the last week? Do not read. Select all that apply.

- In person
- SMS
- Online applications
- Email
- Mail
- Telephone (call)
- WhatsApp
- Facebook
- Radio Program

- Other, specify: _____
- Don't know
- Refused

10. What are the main reasons [NAME] has not spent more time on education? *Do not read. Code to fit, prompt for multiple responses, up to 3*

- Lack of access to television
- Lack of access to radio
- Lack of access to internet
- Lack of access to educational programs
- Lack of access to textbooks or learning materials
- Lack of motivation
- Lack of support from teachers and schools
- Children are working to earn money
- Children are taking care of their siblings
- Children are doing housework
- Lack of supervision from adults in the household
- There is not a good/quiet place to study
- Children need to spend their time doing other things
- Unable to resume school attendance
- Other (specify)

11. On average over the past 7 days, other than education/school and leisure activities which of the following activities did [Name] spending the most time on?

- a.** Household chores / domestic work/ caring for younger siblings
- b.** Helping on a family farm
- c.** Helping in another family business
- d.** Paid work with a family business
- e.** Paid work for someone outside the family or household
- f.** Other income-generating activity (specify)
- g.** None of these activities

12. Now I'd like you to think about [Name]. Right now, over the last 15 minutes, what is [Name] doing? If more than one, select the main activity.

(0=At school, 1=Sleeping, 2=Eating, 3=Playing outside, within compound/homestead, 4=Playing outside, outside compound/homestead, 5=Playing games on smartphone/tablet/computer, 6=Other playing inside, 7=Watching TV, 8=Reading/homework/schoolwork, 9=Household chores, 10 = Resting/Sitting, 11 = Not at Home / Don't Know, 12 = Doing pastoral/agricultural activity or helping a parent with work, -77=Other (specify)) Other:

a. Which household member was with [Name] for the last 15min?

- None
- HH Member 1
- HH Member 2
- HH Member 3

-
- Other child HH member

Section 2d: Child Labor

13. At the same time last year, did [Name] work at least one hour for income, in cash or in kind, for a firm or household? Do not include casual work on your household farm or household chores.

- Yes
- No
- Refuse

a. (if yes) What kind of work / activity ? Select all that apply

- Agricultural, forestry and fishery labourers
- Street vendors/ street related service workers
- Domestic/ child care workers
- Food preparation assistants
- Mining and construction labourers
- Manufacturing labourers
- Other elementary workers, please specify: _____

b. (if yes) How many hours did [Name] work in a typical 7-day period at the same time last year?

c. (if yes) In a typical 7-day period, what was the total cash salary of [Name] ?

KSh.

d. How many hours did [Name] spend working in the household in a typical 7-day period at the same time last year?

- Household chores (fetching water, cooking, etc.)
- Working for the household farm / agriculture
- Working for a non-agricultural family business

14. In the past 7 days, has [Name] worked at least one hour for income, in cash or in kind, for a firm or household? Do not include casual work on your household farm or household chores.

- Yes CONTINUE
- No SKIP to section 3
- Refuse

a. (if yes) What kind of work / activity ? Select all that apply

- Agricultural, forestry and fishery labourers
- Street vendors/ street related service workers
- Domestic/ child care workers
- Food preparation assistants
- Mining and construction labourers
- Manufacturing labourers
- Other elementary workers, please specify: _____

b. (if yes) How many hours did [Name] work in the past 7 days?

c. (if yes) In the past 7days, what was the total cash salary of [Name] ? Include only salary paid for work performed in the last 7days. Also include the salary they EXPECT to get from the work performed in the last 7days, even if they have not yet been paid. If an employee was paid even though they did not work, include this as well. Do not include pay for work performed more than 7days ago.

|_____| KSh

d. How many hours did [Name] spend working in the household in the past 7 days?

|_____| Household chores (fetching water, cooking, etc.)

|_____| Working for the household farm / agriculture

|_____| Working for a non-agricultural family business.

15. What are the main reasons why [Name] is working for pay? Select all that apply.

Poverty / need the money

Schools are closed

They get good training

COVID-19 pandemic

Parents related causes (divorce, disabilities, illness, dead, etc.)

Other cause, please specify: _____

16. Do you think [Name] may stop working for pay after the pandemic?

Yes

No

Do not know

} END LOOP over child

Section 3: Travel Patterns & Interactions

1. In the past 14 days, which ADULT household members visited a market center/village/supermarket for purchasing goods? Tick all that apply

None

FR

HH member 2

HH member 3

...

2. (if FR selected) How many times have you personally visited a market center/village/supermarket for purchasing or selling goods or services? Count each visit separately. Include trips to a shop WITHIN the same village / neighborhood.

In the past 7 days: |_____|

In the 7 days before that (between 14 to 7 days ago): |_____|

3. a. In the past 14 days, has any member of your household attended religious services in person? Select all that apply.

- Yes, this week (in the past 7 days)
- Yes, last week (between 14 to 7 days ago)
- Yes, both this week and last week
- No

b. (if any selected) Which denomination(s)? Select all that apply. Use g11 codes

4. In the past 14 days, did anyone from your household visit someone else's houses, or did anyone from outside the household visit your house for more than 15 minutes? E.g. joint meals, working together, etc. Yes / No

5. Taken together, how many people outside this household have you interacted with in-person? By interact, we mean talk, touch, hug, etc. Do not count people you only crossed on the street and had no interaction with.

- Today
- In the past 7 days:

6. How many people have you talked with on the phone or exchanged text messages with?

- Today
- In the past 7 days:

Section 4: Employment

Section 4a: Farming

1. In the past 14 days, have any household members performed any agricultural or pastoral activities? Select all that apply.

- Yes, agricultural activities
- Yes, pastoral activities
(incl. Livestock, herding, fish ponds, fishing, poultry, etc.)
- No

If No, SKIP to question 11.

2. In the past 7 days, how many hours did each of the following household members perform those agricultural or pastoral activities? Put 0 for those that did not work.

- a. FR Hours:
- b. HH member 2 Hours:
- c. HH member 3 Hours:
- d. ...
- e. All children combined Hours:

3. In the past 14 days, how many workers from outside the household did your household employ for all agricultural and pastoral activities combined? Include casual workers and volunteers.

If ONLY PASTORALIST, SKIP to question 9.

4. (If not surveyed at Round 1/2 or if HH moved location) What is the total size of the land you used for this activity in the last 12 months? 1 Hectare \approx 2.5 Acres Acres

5. (if not surveyed in Round 1 / 2 and not moved location) What is the most important crop for your household?

Maize

Sorghum

Beans

Cassava

Millet

Sugarcane

Groundnuts

Kale

Sweet potato

Banana / Plantain

Coffee

Tea

Potatoes (Irish or White)

Other: _____

6. In which phase of the crop cycle are you?

Land preparation

Planting

Crop on the farm: Applying inputs, weeding

Harvesting

Selling

None of the above (off-season)

7. (if planting OR crop on the farm) In this planting season, did your household plant more, less or the same as last planting season?

More Same Less

Did not plant last season Did not plant this season

7a. (if less than last year / did not plant this season) Why did you plant less than last year? Do not read.

I expect I won't be able to sell as much produce

I expect prices will be lower

I, or other members of the household, migrated

- I, or other members of the household were ill
- I had difficulty hiring workers
- I had to take care of an ill relative
- Travel restrictions for me or my workers
- Market closures
- Usual suppliers are not operating
- Suppliers are operating, but do not have enough stock for me
- Supplies / materials were more expensive than usual
- Other: _____

7b. (if more than last year / did not plant last season) Why did you plant more than last year? Do not read.

- I think I will need more food for our own household consumption
- I think I will be able to sell more this year
- I think prices will be higher this year
- My farm is growing every year
- Other: _____

8. (if harvesting or selling) In this harvesting season, did your household harvest more, less or the same as last harvesting season?

- More Same Less Did not plant last season/this season

8a. (if less than last year) Why did you harvest less than last year? Do not read. Select all that apply.

- Usual fluctuations across year
- Bad harvests because of locusts
- Bad harvest because of bad rain
- Bad harvest for other reasons: _____
- I expect I won't be able to sell as much produce
- I expect prices will be lower
- I, or other members of the household, migrated
- I, or other members of the household were ill
- I had difficulty hiring workers
- I had to take care of an ill relative
- Travel restrictions for me or my workers
- Market closures
- Usual suppliers are not operating
- Suppliers are operating, but do not have enough stock for me
- Supplies / materials were more expensive than usual
- Other: _____

8b. (if more than last year) Why did you harvest more than last year? Do not read. Select all that apply.

- Usual fluctuations across years
- Good harvest because of good rains
- Good harvest for other reasons: _____
- We bought more land
- Household members worked on our farm more than last year
- We hired more workers than last year
- More demand
- I think I will need more food for our own household consumption
- I think I will be able to sell more this year
- I think prices will be higher this year
- My farm is growing every year
- Other: _____

9. What is the current market value of all your livestock combined? [_____] KSh

10. (if any ag activity) In the past 14 days, what were the total earnings for your household for those agricultural and pastoralist activities combined? [_____] KSh

10a. How much were the total earnings for your household from agricultural and pastoral activities over a typical 14-day period in February? [_____] KSh

10b. How much were the total earnings for your household from agricultural and pastoral activities over the same 14-day period last year? [_____] KSh

10c. (if lower than usual) Why are your sales lower than last year? Do not read. Select all that apply.

- Usual fluctuations across years
- Bad harvests because of locusts
- Bad harvest because of bad rain
- Bad harvest for other reasons: _____
- Sold livestock
- Animals were ill
- I sold land
- Household members worked less
- I hired less workers
- I hold on to my produce because of uncertainty
- I hold on to my produce because prices will go up
- I have less demand
- Travel restrictions for me
- Travel restrictions for my customers
- Market closures
- Usual suppliers are not operating

- Suppliers are operating, but do not have enough stock for me
- Supplies / materials were more expensive than usual
- Other: _____

10d. (if higher than last year) Why are your sales higher than last year? Do not read. Select all that apply.

- Usual fluctuations across years
- Good harvest because of good rains
- Good harvest for other reasons: _____
- We bought more land
- Household members worked on our farm more than last year
- We hired more workers than last year
- More demand
- I think I will need more food for our own household consumption
- I think I will be able to sell more this year
- I think prices will be higher this year
- My farm is growing every year
- Other: _____

Section 4b: Family business

11. (if NOT surveyed during Round 1/2 OR if surveyed during Round 1/2 with no enterprise) Since January 2020, other than farming, how many non-agricultural self-employed enterprises have members of your household run? Include enterprises operating at ANY point since January 2020, regardless if still operating or not. Enter 0 if none.

12. (If Surveyed during Round 1/2 AND had an enterprise) I will now ask about self-employed enterprises that members of your household run. Your household has previously told us about the following enterprises:

[LIST OF PRELOAD ENTERPRISES]

Before we discuss these, are there any other non-agricultural self-employed enterprises that members of your household run since [ROUND 1/2 DATE]? Yes No (If no, skip to section 4c)

12a. How many other non-agricultural self-employed enterprises that members of your household run since [ROUND 1/2 DATE]? Include enterprises operating at ANY point since [ROUND 1/2 DATE], regardless if it is still operating or not. Enter 0 if no other enterprises.

If any new / other enterprises either from Round 1/2, or the number that they just told us, LOOP through each enterprise. If no enterprises at all, SKIP to section 4c {

13. a. (if new / other enterprise) Enterprise name: _____

b. (if new / other enterprise) What category is/was this enterprise? Do not read. Select one.

- Agriculture, forestry and fishing
- Mining and quarrying
- Manufacturing
- Electricity, gas, steam and air conditioning supply
- Water supply; sewerage, waste management and remediation activities
- Construction
- Wholesale and retail trade; repair of motor vehicles and motorcycles
- Transportation and storage
- Accommodation and food service activities
- Information and communication
- Financial and insurance activities
- Real estate activities
- Professional, scientific and technical activities
- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities
- Arts, entertainment and recreation
- Other service activities: _____
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies
- Other, please specify: _____

c. (if new / other enterprise) Is the enterprise related to the tourism sector? Yes / No

d. (if new / other enterprise) When was this enterprise established: (month/year). FR may estimate if they don't know exactly.:

- i. Month (-99 for DK): _____
- ii. Year (-9999 for DK): _____

e. (if new / other enterprise) Was/is this business registered with a government authority (i.e. formal / with a tax ID/business license) or was it informal?

- The business was registered
- The business was informal

14. a. (if new / other enterprise) Is this enterprise currently operating?

- Yes → Go to question 18
- No, temporarily closed -- mandated by government → Go to question 15
- No, temporarily closed -- own choice → Go to question 15
- No, permanently closed → Go to question 15

b. (If pre-loaded enterprise that was operating at Round 1/2) At [ROUND 1/2 date], you were running the

following business: [Name, Category]. Is your household still running this business?

- Yes → Go to question 18
- No, temporarily closed -- mandated by government → Go to question 15
- No, temporarily closed -- own choice → Go to question 15
- No, permanently closed → Go to question 15
- Never ran this enterprise / wrong information → Go to next enterprise in the LOOP

c. (If pre-loaded enterprise that was closed at Round 1/2) At [ROUND 1/2 date], you told us the following business had closed: [Name, Category]. Is this business still closed?

- Yes, still closed → Go to question 17
- No, has re-opened → Go to question 18
- Never ran this enterprise / wrong information → Go to next enterprise in the LOOP

15. When did this enterprise stop operating? Note: If the enterprise shut down BEFORE January 2020, we do not want to include it. Go back and change the number of enterprises.

- In the past 7 days
- In the past 7 days before that (between 14 to 7 days ago)
- August 2020
- July 2020
- June 2020
- May 2020
- April 2020
- March 2020
- February 2020
- January 2020

16. Why did this enterprise stop operating? Do not read. Simply record the answer. Select all that apply.

- Closed because of lockdown/curfew
- Closed because of worries about COVID-19/coronavirus
- Seasonal closure / usually closed in this season
- Cannot get inputs
- Cannot travel or transport goods
- Need to take care of an ill relative
- Lack of demand
- Lack of enough capital
- Business running at a loss
- Enterprise owner deceased
- Theft / vandalism
- Government requirements (by-laws, trading licenses)
- Mechanical breakdown
- Dissolution of the business by the partners
- Other: _____
- Don't know

17. (if temporarily closed) When are you planning to reopen this enterprise?

- October
- November
- December
- First half of 2021
- Second half of 2021
- Never

If this enterprise is pre-loaded from Round 1/2 and closed, SKIP to the next enterprise in the LOOP. Otherwise continue.

Note: If temporarily or permanently closed, we want the following information at the time the enterprise shut down.

18. How many employees work in this enterprise? Note: Count ALL the employees/workers; If FR is the enterprise owner and works in this enterprise, then the FR should be included in the count. Include temporary and part-time workers, and those that work for no pay.

a. (If pre-loaded enterprise from Round 1! (not Round 2) and surveyed in Round 2) How many employees worked at this enterprise in this enterprise at [Round 2 date]? Note: Count ALL the employees/workers; If FR is the enterprise owner and works in this enterprise, then the FR should be included in the count. Include temporary and part-time workers, and those that work for no pay.

19. (if pre-loaded enterprise) How many employees were laid off in the...? Include zero none option. Show on one screen.

- In the past 7 days
- In the 7 days before that (between 14 to 7 days ago)
- August 2020
- July 2020
- June 2020
- May 2020

19a. (if new / other enterprise) How many employees were laid off in...? Include zero non option. Show on one screen.

- April 2020
- March 2020
- February 2020
- January 2020

19b. (if any) Why were those employees laid off? Select all that apply.

- Retirement
- Seasonal layoff / usually lay off people in this season
- Worker was not good
- Worker got another job
- Business is worse because of lockdown/curfew
- Business is worse because of worries about COVID-19/coronavirus
- Worker had to take care of ill relative
- Worker migrated elsewhere
- Lack of demand
- Lack of enough capital
- Business running at a loss
- Other: _____
- Don't know

20. What were the total earnings / revenue (money in only - do not subtract any expenses) of this enterprise in the last 14 days? |_____| KSh

a. (If pre-loaded enterprise from Round 1! (not Round 2) and surveyed in Round 2) What were the total earnings / revenue (money in only - do not subtract any expenses) of this enterprise in a typical 14-day period in [Round 2 month]? |_____| KSh

21. (Only if not interviewed in round 1/2) In a typical 2-week period in February 2020, what were the total earnings / revenue of this enterprise (money in only - do not subtract any expenses)? |_____| KSh

21a. (if higher & not interviewed in round 1/2) Why were your earnings / revenue higher than usual? Tick all that apply.

- Usual business fluctuations
- Seasonal changes in activity
- My business is growing because I have invested
- I have more demand
- I lowered my prices
- My customers want to stock up for an uncertain future
- My customers want to stock up because of travel restrictions
- Other: _____

21b. (if lower than usual & not interviewed in round 1/2) Why were your earnings / revenue lower than usual? Tick all that apply.

- Usual business fluctuations
- Seasonal changes in activity
- I have less demand
- Travel restrictions for me
- Travel restrictions for my customers
- Market closures

- Usual suppliers are not operating
- Suppliers are operating, but do not have enough stock for me
- Supplies / materials were more expensive than usual
- Other: _____

21c. At the current scale of operations, how many weeks could you survive without selling additional assets or getting additional assistance / loans to continue your business operations?
|_____|

21d. In your view, what types of government or external assistance policies will benefit your family business the most during the COVID-19 crisis? Read options. Choose up to 3 options.

- Rental or utilities deferral
- Access to micro loans and credit guarantees
- Salary subsidies
- Cash transfers and unemployment benefits
- Inventory management and preservation
- Training for digital marketing and selling
- Subsidized provision of products and services by suppliers
- Other, please specify: _____

22. What was the total profit of this enterprise over the past 14 days? Note: In Ksh. Here we mean the amount you received after paying for expenses for this business, including hired workers, money for household members who helped, purchase of goods for sale or for inputs, such as raw materials, fuel, and electricity, but before purchasing personal items for yourself or your household. If unsure, FR can estimate. Ask in terms of ""commission"" if the FR runs an M-Pesa shop.) |_____| KSh

22a. (If pre-loaded enterprise from Round 1! (not Round 2) and surveyed in Round 2) What was the total profit of this enterprise in a typical 14-day period in [Round 2 month]? |_____| KSh

22b. (if new / other enterprise) In a typical 2-week period in February 2020, what was the total profit of this enterprise?
|_____| KSh

23. (if new / other enterprise) Have you adjusted your business model to reduce direct customer interaction (online, delivery, take-away) due to the COVID-19 crisis? Yes / No
If Yes, skip to 23b, if No, CONTINUE

23a. (if No) Are you planning to adjust your business model to reduce direct customer interaction? Yes / No
If Yes, CONTINUE, if No, SKIP to question 24

23b. What adjustments have you made or are you planning to make? Do not read. Select all that apply.

- Use of the phone for marketing, placing orders, customer service, etc.
- Use of internet, online social media, specialized apps, or digital platforms
- Switched to delivery service only
- Changed product/service offering
- reduce production
- Negotiating loan repayment terms with Financial Service Providers or suppliers
- Other, please specify: _____

23c. Do you require support to adjust your business model? Yes / No

23d. (if yes) What business development services do you require?

- Advise on how to prevent infections while maintaining business operations
- Advise with business continuity planning
- Advise on diversification of products and sales channels
- Online business management training
- Advise on application of health ministry guidelines
- Support with PPEs for business continuity
- Business development training

24. (If ANY enterprises currently operating or if any closed in the past 7 days) In the past 7 days, how many hours did each of those HH members perform those non-agricultural self-employed activities? If a household member worked in multiple businesses, add the hours of all businesses combined. Put 0 for those that did not work.

- a.** FR Hours:
- b.** HH member 2 Hours:
- c.** HH member 3 Hours:
- i.** ...
- d.** All children combined Hours:
(include and sum up the work done by all HH members 18 years or younger)

Section 4c: Wage Employment

(if Surveyed in Round 1/2) Read: At [Round 1/2 date], you told us that the following household members were employed / working for pay:

- [Name 1], [Occupation 1]
- [Name 2], [Occupation 2]
-

25. Which ADULT household members are currently employed, working for pay? Include work that is not paid, but is done for training purposes, such as volunteering, internships, traineeships, etc. Select all that apply.

- None
- FR

- HH member 2
- HH member 3
- ...

26. Which ADULT household members are currently working in a training program in the form of an Internship, attachment, volunteering, traineeship, apprenticeship?

- None
- FR
- HH member 2
- HH member 3
-

If any currently employed, LOOP through each. O/w skip to question 33 {

27. (if pre-loaded HH member that was employed at Round 1/2) At [Round 1/2 date], you said [NAME] was working for pay in [INDUSTRY]. Is [NAME] still working in the same job?

Yes / No / This information is wrong / DK

If yes, SKIP to question 30. Otherwise, CONTINUE.

28. What is the industry in which [NAME] is working? Do not read. Simply record the answer.

- Agriculture, forestry and fishing
- Mining and quarrying
- Manufacturing
- Electricity, gas, steam and air conditioning supply
- Water supply; sewerage, waste management and remediation activities
- Construction
- Wholesale and retail trade; repair of motor vehicles and motorcycles
- Transportation and storage
- Accommodation and food service activities
- Information and communication
- Financial and insurance activities
- Real estate activities
- Professional, scientific and technical activities
- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities
- Arts, entertainment and recreation
- Other service activities: _____
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies
- Other, please specify: _____

29. Is [NAME]'s employment related to the tourism sector? Yes / No

30. What kind of contract does [NAME] have for this job?

- None
- Permanent
- Fixed-term
- Hourly

31. In the last 7 days, how many hours has [NAME] worked for wages? Enter 0 if none.

31a. (only if worked 0 hours) Why was [NAME] absent from work during the last 7 days?

- Vacation/ holidays
- Annual leave
- Illness, injury, temporary disability
- Maternity/ paternity leave
- Temporary slack work for technical or economic reasons
- Strike or labour dispute
- Off-season
- Lack of transport
- Education or training
- Community responsibilities
- Temporary closure
- Awaiting to attend interview
- Other, specify

31b.(only if worked 0 hours) Does [NAME] have an agreement or contract to return to the same job after this absence?

Yes / No

31c. (if NOT pre-loaded HH member) Did [NAME] work in this job before March 2020? Yes / No

If Yes, continue. If No, Skip to question 32.

31d. (if NOT pre-loaded HH member) Before March 2020, how many hours was [NAME] working over a typical 7 day period? Enter 0 if none.

32. In the past 14 days, what was the total cash salary of [NAME]? Include only salary paid for work performed in the last 14 days. Also include the salary they EXPECT to get from the work performed in the last 14 days, even if they have not yet been paid. If an employee was paid even though they did not work, include this as well. Do not include pay for work performed more than 14 days ago.

KSh.

32a. (if 31c == Yes AND not pre-loaded HH member) In a typical 2-week period in February 2020, what was the cash salary of [NAME]? |_____| KSh

33. How many employees work in the business that [NAME] works in as their main job? If DK, can estimate. |_____|

34. Does [NAME] currently receive any of the following benefits from their employer? Read options.

Medical Insurance

Social security coverage

Sick leave

Subsidized meals

Subsidized lodging

Other, specify: _____

None

35. Is [NAME] currently...

Working from home

Working partly from home, partly as usual

Going to work as the usual workplace outside the home

36. (if going to work as usual) Could [NAME] work from home in principle? Yes / No
}

37. (if NOT Surveyed in Round 1 / 2) Since January 2020, which ADULT members of this household were laid off / lost their job involuntarily (even if only temporarily)?

37a. (If surveyed in Round 1 / 2) Since [Round 1 / 2 date], which ADULT members of this household were laid off / lost their job involuntarily (even if only temporarily)?

None

FR

HH member 2

HH member 3

...

(if any) LOOP through laid off workers. Otherwise SKIP to question 37 {

Note: For the following questions, if a HH member lost multiple jobs since January 2020, please only report the most recent.

37b. (if pre-loaded HH member from Round 1/2 that was employed) At [Round 1/2 date], you said [NAME] was working for pay in [INDUSTRY]. Was [NAME] laid off from this job?

Yes / No / This information is wrong / DK

If yes, SKIP to question 38. Otherwise, CONTINUE.

37c. What industry was [NAME] employed in? Do not read. Simply record the answer.

- Agriculture, forestry and fishing
- Mining and quarrying
- Manufacturing
- Electricity, gas, steam and air conditioning supply
- Water supply; sewerage, waste management and remediation activities
- Construction
- Wholesale and retail trade; repair of motor vehicles and motorcycles
- Transportation and storage
- Accommodation and food service activities
- Information and communication
- Financial and insurance activities
- Real estate activities
- Professional, scientific and technical activities
- Administrative and support service activities
- Public administration and defence; compulsory social security
- Education
- Human health and social work activities
- Arts, entertainment and recreation
- Other service activities: _____
- Activities of households as employers; undifferentiated goods- and services-producing activities of households for own use
- Activities of extraterritorial organizations and bodies
- Other, please specify: _____

37d. Was [NAME]'s employment related to the tourism sector?

- Yes / No/Don't Know

37e. When did [NAME] get laid off / lose their job?

- In the past 7 days
- In the 7 days before that (between 14 to 7 days ago)
- August 2020
- July 2020
- June 2020
- May 2020
- April 2020
- March 2020
- February 2020
- January 2020
- Before January 2020

37f. Why did [NAME] get laid off / lose their job?

- Retirement
- Seasonal layoff / usually lay off people in this season

- Got another job
- Employer business shut down / was closed
- Business is worse because of lockdown/curfew
- Business is worse because of worries about COVID-19/coronavirus
- [NAME] had to take care of ill relative
- [NAME] had to migrate elsewhere
- Employer had lack of demand
- Employer lacked enough capital
- Employer running at a loss
- Employer deceased
- Other: _____
- Don't know

37g. Does [NAME] expect to return to their previous employment? Yes / No

37h. (if Yes) When does [NAME] expect to return to their previous employment?

- In a few days
- In a few weeks
- In the next 3 months
- More than 3 months from now
- Next year
- Don't know
- Refused to answer

}

38. In February 2020, which household members were doing any work, including agriculture, running a business or wage work?

- None
- FR
- HH member 2
- HH member 3
- ...

a. (for HH members not working) Was [NAME] actively looking for paid work or tried to start any kind of business/income generating activity?

b.(if FR was working and not surveyed at Round 1/2 or different respondent from Round 1/2)
How many hours did you usually work per week?

39. In the past 4 weeks, which household members were actively looking for paid work or tried to start any kind of business/income generating activity?

- None
- FR
- HH member 2

- HH member 3
- ...

40. If they were offered a job, which of your household members would be available to start working within the coming 4 weeks?

- None
- FR
- HH member 2
- HH member 3
- ...

41. In the last 7 days, how many hours have you spent doing childcare for your household, even if it overlapped with other tasks? hours (DK=-99, N/A=88)

a. How many hours have other adult household members spent on childcare?

- HH Member 1
- HH Member 2
-

Section 5: Food Security

Section 5.1: Consumption module

1. Read: Think of all the food your household consumed in the last 7 days. How much, in total, did you consume from your own agricultural or pastoral production? E.g. crops you grew, livestock you owned and slaughtered, animal products like eggs, etc.

Prompt for Ksh. If not in KSh, ask how much that amount would have cost if they had bought it at the market over the last 7 days.

2. In the last 7 days, did your household receive any gifts of food from other households for your consumption? Include food you exchanged, shared meals, etc.

Yes / No

2a. If yes, what was the total value of those gifts?

Prompt for Ksh. If not in KSh, ask how much that amount would have cost if they had bought it at the market over the last 7 days.

3. Read: Now think of all the purchases your household made in the last 7 days.

CATEGORY	<p>In the past 7 days, how much did members of your household spend on [CATEGORY]?</p> <p>Prompt for shillings. If not in KSh, ask how much that</p>
----------	--

	amount would have cost if they had bought it at the market over the last 7 days.
Groceries / Food Include all meat, fish, eggs, dairy, oils, fats, vegetables, fruit, sugar products and drinks	_____ KSh
	In the past 2 weeks, how much did members of your household spend on [CATEGORY]? Prompt for shillings. If not in KSh, ask how much that amount would have cost if they had bought it at the market over the last 2 weeks.
Household and personal items soap, cleaning agents, toilet paper/tissues, air freshener, shoe polish, insecticide, matches, candles, toiletries, cosmetics	_____ KSh
Assets / Durables. FO: Read categories, and sum up 1 Vehicles (car, boat, bike, motorbike, handcarts, etc.) 2 Furniture (bed, chair, vases, mirror, etc.) 3 Kitchen and other equipment (cutlery, pots, pans, plates, etc.) 4 Electronic equipment, (lamps, mobile phone, television, etc.) 5 Tools 6 Livestock	_____ KSh
Local Services Maize grinding, haircuts, prepared meals eaten outside the home, bicycle repair, recreation, etc.	_____ KSh
Communication Airtime, internet, other phone expenses	_____ KSh
Housing Rent, mortgage, home maintenance and repairs	_____ KSh
Energy and Utilities Electricity, water, firewood, charcoal, kerosene	_____ KSh
Transport Petrol, tolls, transport such as taxi/bus/matatu/boda/piki/train/flight fare, hotel stays (NOT including medical reasons)	_____ KSh
Medical expenses consultation fees, medicines, hospital costs, lab test costs, ambulance costs, and related transport	_____ KSh

4. Do you rent your accommodation? |_____| Yes/ No/ DK

4a. (if yes in 4) Were you able to pay your rent in the past month? |_____|Yes/ No/ DK

4b (if no in 4a) Why were you not able to pay your rent in the past month?

- Loss of income
- Rent increased
- Household had to use all money to cover other expenses
- Other: _____

Section 5.2 Prices

Note: Each HH will only be asked about a random subset of 4 of those items.

PRODUCT	UNIT	1. In the past 14 days, did your household purchase [PRODUCT]? Yes / No. Does not need to be the exact same unit listed.	2. What is the current price of [UNIT] of [PRODUCT] in the nearest market? That is, what did you (or would you) pay if you bought this item today. Prompt if the product is currently available at your local village / market. If not available, enter -98.
Maize	2kg	<input type="checkbox"/>	<input type="text"/> KSh
Beans	2kg	<input type="checkbox"/>	<input type="text"/> KSh
Rice	1kg	<input type="checkbox"/>	<input type="text"/> KSh
Tomatoes	Four	<input type="checkbox"/>	<input type="text"/> KSh
Onions	Four	<input type="checkbox"/>	<input type="text"/> KSh
Banana-sweet	Bunch	<input type="checkbox"/>	<input type="text"/> KSh
Egg	One	<input type="checkbox"/>	<input type="text"/> KSh
Beef meat	1kg	<input type="checkbox"/>	<input type="text"/> KSh
Fish (Tilapia)	Whole	<input type="checkbox"/>	<input type="text"/> KSh
Sugar	1kg	<input type="checkbox"/>	<input type="text"/> KSh
Bar Soap	One	<input type="checkbox"/>	<input type="text"/> KSh
Charcoal	2kg	<input type="checkbox"/>	<input type="text"/> KSh
Calf (local)	One	<input type="checkbox"/>	<input type="text"/> KSh
Goat	One	<input type="checkbox"/>	<input type="text"/> KSh
Chicken (hen)	One	<input type="checkbox"/>	<input type="text"/> KSh
Panadol	Pair	<input type="checkbox"/>	<input type="text"/> KSh
Adult head shaving	One	<input type="checkbox"/>	<input type="text"/> KSh
Fixing a small hole at a tailor	One	<input type="checkbox"/>	<input type="text"/> KSh

Section 5.3: Food Security

5. In the last month, has there been any time when your household did not have sufficient quantities of drinking water when needed?
 Yes, at least once / No, always sufficient
6. Now I would like to ask you some questions about food. During the last 30 days, was there a time when you, or any other adult in your household, were hungry but did not eat because there was not enough money or other resources for food? Yes / No / DK
7. In the last month, has there been any time when your household wasn't able to access staple food (e.g. maize or beans)? Yes / No / DK
8. (If No) Why weren't you, or any other adult in your household, able to access staple food?
 Prices have gone up
 Income has decreased
 The supply has decreased
 Markets were closed
 Other, specify: _____
9. In the last 30 days, did you worry that your household would not have enough food? (1=Yes, 2=No)
- 9a. Compared to before March 2020, before the lockdown / pandemic, are you more / less / or equally worried about your household not having enough food?
 More worried
 Equally worried
 Less worried

	In the past 7 DAYS, how many days have ADULTS in your household...	In the past 7 DAYS, how many days have CHILDREN (<18) in your household...
10. ...gone to bed hungry?	a. <input type="checkbox"/>	b. <input type="checkbox"/>
11. ... skipped meals or cut the amount of meals?	a. <input type="checkbox"/>	b. <input type="checkbox"/>
12. ...gone entire days without food?	a. <input type="checkbox"/>	b. <input type="checkbox"/>

13. Did any of the meals your household ate yesterday include... (1=Yes, 2=No)
- a. Meat or fish? Omena (small fish) should be included. Do not include eggs
- b. Eggs?

Section 6: Income Loss

1. In the past 14 days, did your household sell any livestock, or other household assets to generate income? [Vehicles, Furniture, kitchen or electronic equipment, tools]

- No
- Yes, livestock
- Yes, other assets

1a. (if assets) Which assets? Select all that apply.

- Vehicles (car, boat, bike, motorbike, handcarts, etc.)
- Furniture (bed, chair, vases, mirror, etc.)
- Kitchen and other equipment (cutlery, pots, pans, plates, etc.)
- Electronic equipment, (lamps, mobile phone, television, etc.)
- Tools
- Other: _____

1b. (if yes) What was the value of all the assets / livestock you sold in the past 14 days?

|_____| KSh

2. Are you a member of a Community Savings and Loans Association? Yes / No

2a. Are you still continuing with your saving practises? Yes / No

2b. What are the current saving practices in the CSLA group?

- Reduced savings
- re-structured meetings
- re-structured repayment terms
- premature share-outs
- ceased meeting and savings

3. In the past 14 days, did anyone in this household take out a new loan for use on household consumption? Yes / No

3a. (if yes) What kind of loan? Select all that apply.

- loan from a friend / relative
- commercial bank / commercial lender
- mobile lending (MShwari, Tala, KCB M-PESA etc.)
- money lender / shylock
- SACCO
- Merry-go-round / ROSCA/ Community Savings & Loans Association
- Relief Food (Bamba Chakula)
- Other: _____

3b. (if yes) What was the total value of these loans? |_____| KSh

4. Would you be willing to take a loan in lieu of liquidating assets? Yes / No

4a. If yes, How much would you take as a loan to prevent you from liquidating your assets?

Not more than Kshs 20,000

Not more than Kshs 50,000

Not more than Kshs 100,000

More than Kshs 100,000

Section 7: Transfers

1. Does your HH usually receive remittance from family members who work in another place or other country? Yes / No / DK

2. In the past 14 days, did anyone in this household receive a gift / assistance of money or goods from someone outside the household? Do not include transfers from the government or employers; also do not include loans or interest payments, or goods that the household purchased. If FR is in boarding school count gifts from parents as transfers.

No

Yes, from outside Kenya

Yes, from within Kenya

2a. (if any yes) What was the total value? KSh

2b. (if not surveyed in Round 2) In a typical 2-week period in February 2020, did anyone in this household receive a gift / assistance of money or goods from someone outside the household? Do not include transfers from the government or employers; also do not include loans or interest payments, or goods that the household purchased. If FR is in boarding school count gifts from parents as transfers.

No

Yes, from outside Kenya

Yes, from within Kenya

2c. (If ANY yes) In a typical 2-week period in February 2020, how much did your household receive in gift / assistance of money or goods from someone outside the household? (enter zero if none was received)

KSh

3. In the past 14 days, did anyone in this household give or send money or goods to someone outside the household? (1=Yes, 2=No)

3a. (if yes) What was the total value? KSh

3b. (if not surveyed in Round 2) In a typical 2-week period in February 2020, how much did this household send in money or goods to someone outside the household? (enter zero if none was

received)
|_____| KSh

4. In the past 14 days, has anyone in this household received a gift / assistance of money or goods, or a job from a government program? For example, the Kenyan National Safety Net Programme, but all other government programs are also included. Prompt and give a few examples.

No
 Yes

4a. (if no) Are you aware of any such program? Yes/No

4b. (if 4a=Yes) Would you know how to apply for receiving a gift/assistance of money or goods from a government program? Yes/No

4c. [if ANY yes] What was the total value? |_____| KSh

4d. (if not surveyed in Round 2) In a typical 2-week period in February 2020, how much did this household receive in gift / assistance of money or goods, or job from a government program? (enter zero if none was received)

|_____| KSh

5. In the past 14 days, did anyone in this household receive a gift / assistance of money or goods from a non-governmental organization or community group? No/Yes

5a. (if no) Are you aware of any such programs? Yes/No

5b. (if 5a=Yes) Would you know how to apply for receiving a gift/assistance of money or goods from a non-governmental organization program? Yes/No

5c. [if yes] What was the total value? |_____| KSh

5d. (if not surveyed in Round 2) In a typical 2-week period in February 2020, how much did this household receive in gift / assistance of money or goods from a non-governmental organization or community group? (enter zero if none was received)

|_____| KSh

6. In the past 14 days, did anyone in this household receive a gift / assistance of money or goods from an individual politician or government official?

6a. [if yes] What was the total value? |_____| KSh

6b. (if not surveyed in Round 2) In a typical 2-week period in February 2020, how much did this household receive in gift / assistance of money or goods, from an individual politician or government official? (enter zero if none was received)

|_____| KSh

Section 8: Subjective Welfare

The 50% of households that are assigned this section, the other 50% are assigned section 11.

Read: I will read out a list of some of the ways you may feel or behave. Please indicate how many days you have felt this way during the past 7 days.

FO: Use the following scale while coding:

- 0 = Not at all or less than 1 day
- 1 = 1-2 days
- 2 = 3-4 days
- 3 = 5-7 days

Don't read: -88 = Refuse to answer

In the past 7 days, how many days.....

- 1. ...have you felt nervous, anxious, or on edge?
- 2. ...have you felt depressed?
- 3. ...have you felt lonely?
- 4. ...have you felt hopeful about the future?
- 5. ...have you had physical reactions, such as sweating, trouble breathing, nausea, or a pounding heart, when thinking about your experience (e.g., social distancing, loss of income/work, concerns about infection) with the coronavirus/COVID-19 pandemic?

Section 9: Health

1. Now I'm going to ask you some questions on your health that in some way may touch your private life. You may have experienced some of these illnesses or not. Please let me know if you have experienced any of these illnesses or symptoms in the past 14 days.

(A) Fever	<input type="text"/>	(G) Difficulty breathing / Chest tightness	<input type="text"/>
(B) Persistent cough	<input type="text"/>	(H) Runny nose	<input type="text"/>
(C) Always feeling tired	<input type="text"/>	(I) Sore throat	<input type="text"/>
(D) Muscle pain (myalgia)	<input type="text"/>	(J) Pneumonia	<input type="text"/>
(E) Headache	<input type="text"/>	(K) Loss of sense of smell / not being able to taste food	<input type="text"/>
(F) Diarrhea / Nausea / vomiting	<input type="text"/>	(L) None of the above	<input type="text"/>

If YES to any, continue. If NO, skip to question 2.

1a. How many days ago did these symptoms first appear? Days

1b. Have these symptoms resolved? Yes / No

2. In the past 14 days, which OTHER household members had any of the above symptoms? Exclude chronic conditions.

- None
- HH member 2
- HH member 3
- ...
- Any child household member

2a (if any) Have these symptoms resolved? Yes / No

3. In the past 30 days, have you or any member of your household needed medical treatment or needed to make routine visits to a health facility? Include check-ups, chronic illnesses, emergency visits, etc.? Yes / No
If No, SKIP to question 10. If YES, continue.

4. What was the reason for needing this treatment? Select all that apply. Use major health problem codes (below)

- | | |
|---|--------------------------|
| <input type="checkbox"/> Pregnancy - Prenatal checkups | → CONTINUE to question 5 |
| <input type="checkbox"/> Giving birth | → SKIP to question 7 |
| <input type="checkbox"/> Routine Check-Up: General Health | → CONTINUE to question 5 |
| <input type="checkbox"/> Routine Check-Up: Cancer | → CONTINUE to question 5 |
| <input type="checkbox"/> Routine Check-Up: Chronic heart disease | → CONTINUE to question 5 |
| <input type="checkbox"/> Routine Check-Up: Chronic lung disease | → CONTINUE to question 5 |
| <input type="checkbox"/> Malaria | → SKIP to question 7 |
| <input type="checkbox"/> Testing for Covid-19 / coronavirus | → SKIP to question 9 |
| <input type="checkbox"/> Flu-Like Symptoms (fever, cough, pneumonia, etc.) | → SKIP to question 7 |
| <input type="checkbox"/> Gastrointestinal Illness
(Stomach Pain, Vomiting, Diarrhea, etc.) | → SKIP to question 7 |
| <input type="checkbox"/> HIV/AIDS related | → SKIP to question 7 |
| <input type="checkbox"/> Serious wound or injury | → SKIP to question 7 |
| <input type="checkbox"/> A major accident | → SKIP to question 7 |
| <input type="checkbox"/> Minor Pains (Back, Muscle, Knee, etc.) | → SKIP to question 7 |
| <input type="checkbox"/> For child's check-up (routine, vaccination, etc.) | → SKIP to question 7 |
| <input type="checkbox"/> Other, please specify: _____ | → SKIP to question 7 |

5. (if prenatal, or routine checkup) Compared to before March 2020, are you and/or this household member able to go for health check-ups as frequently? Do not read.

- As frequently as before March
- Not as frequently but still able to go
- Not able to go at all

6. (if not as frequently/not at all) What is the reason for not being able to go as frequently as before or not able to go at all? Do not read. Select all that apply.

- Fear of getting infected due to Coronavirus
- Long waiting lines
- Consulting doctor not available or busy due to high demand
- Access to hospital denied

Other reasons, please specify: _____

Refused

7. (if other health problem) Were you or the member of your household able to access the medical treatment? Yes / No

If No, CONTINUE. If Yes, SKIP to question 9.

8. (if no) What was the reason you or the member of your household were not able to access the medical treatment? Do not read. Select all that apply.

Lack of money

No medical personnel available

Health facility had limited supplies

Turned away because facility was full

Refused

9. (if COVID / flu-like symptoms) Which members of your household got tested for COVID-19? Select all that apply.

None

FR

HH member 2

HH member 3

...

Any child household member

(if none) 9a. Did anyone try to get tested but was unable to? Yes / No

(if any) Loop through selected members {

9b. What was the outcome of the test for this person? Positive / Negative / Don't know yet

}

10. In the last week, has your household been unable to buy medicine?

Yes / No / Not tried / Refused/No, get it for free

11. (If NOT Surveyed at Round 1/2, or different respondent) Are you covered by health insurance?

Yes / No

12. (If NOT Surveyed at Round 1/2, or different respondent) What is the source of health insurance?

NHIF

Private Insurance

Universal Health Care

Other, specify: _____

13. (If NOT Surveyed at Round 1/2, or different respondent) Has this insurance coverage provided you any of the following benefits: Do not read. Select all that apply.

Easier access to facilities which I or my family members could not otherwise access

- Reduced out of pocket payments
- No concrete benefits
- Never provided benefits / Haven't used benefits
- Others, please specify: _____
- Refused

Section 10: COVID-19 Knowledge

1. Do you know anyone that has, or has had, COVID-19/coronavirus? By knowing someone, we mean someone you could identify by name, and that you have interacted with. (1=Yes, 0=No)

If YES, continue. If NO skip to question 3.

a. Who are these persons? Select all that apply.

- Self
- Other household members: Who? _____ Select all that apply.
- Family members living in [VILLAGE / TOWN] (parents, siblings, relatives)
- Family members living in [COUNTY], but outside [VILLAGE / TOWN]
- Family members living outside [COUNTY]
- Someone from workplace
- Friends living in this [VILLAGE / TOWN]
- Friends living in [COUNTY], but outside [VILLAGE / TOWN]
- Friends living outside [COUNTY]
- Neighbors,
- Other: _____

b. Have these persons been asked to self-quarantine? Yes / No

c. Do you think people who have tested positive for Coronavirus will be perceived negatively by the community? Yes / No / Don't know

2. (if NOT surveyed in Round 1/2 or HH moved away) In case of exposure/ infection from COVID-19 would you have a place in your household to isolate a household member? Yes / No

2a. Last week, did you wash your hands with soap more often than you used to?

Yes / No / DK

2a1. Last week, out of 10 other people in your community, how many washed their hands with soap more often than they used to? 1 - 10

2b. Last week, did you avoid handshakes or physical greetings? Yes / No / DK

2b1. Last week, out of 10 other people in your community, how many avoided handshakes or physical greetings? 1 - 10

2c. Last week, did you avoid groups of more than 10 people such as family gatherings, parties,

church / mosque, funerals, etc?

Yes / No / DK

2c1. Last week, out of 10 other people in your community, how many avoided groups of more than 10 people such as family gatherings, parties, church / mosque, funerals, etc?

1 - 10

Read: I would like to remind you that this information is only used for research purposes, and that we will not share this information with anyone. Any responses that you give us will be confidential, that is, the researchers will not let anyone else know how you answered.

3. In the past 7 days, did you wear a face mask or face covering when going to a public place?

1=Yes / 2=No-didn't wear a mask in public places / 3=No-didn't go to public place

If No, CONTINUE. Else SKIP to question 9.

4. Do you own a mask? (1=Yes, 2=No)

4a. (if yes) What kind of face mask do you own? If more than one, describe the one used most recently

Mask - Reusable

Mask - One-way

Simple face covering - Shirt / Cloth / etc.

4b. (if yes) What material is this mask made from?

Cotton

Silk

Paper

Surgical mask -- non-woven fabric

N95 - approved medical material

Other: _____

4c. (if yes) Where did you obtain the mask that you have used most in the last 7 days?

Self-made

Purchased

Gifted by an NGO

Gifted by individual politician

Gifted by the government

Gifted by a friend/ someone in my community

Other: _____

SKIP to question 11.

5. In the past 7 days, did you wear a mask ...

(1=Yes, every time; 2=Yes, some of the time; 3=No; 4=Did not visit in last 7 days)

i. ... when you went to a market center?

ii.... when you attended a religious gathering?

iii.... when you used public transport?

- iv.... when you visited a store in the village?
- v. ... when you visited another household? We mean, when you reached that household, indoors or while talking to members of this household.
- vi. ... at work?

Read: Think about the mask you wore most in the past 7 days.

- 6. a. What kind of face mask have you worn most in the past 7 days?
 - Mask - Reusable
 - Mask - One-way
 - Simple face covering - Shirt / Cloth / etc.

- b. What material was this mask made from?
 - Cotton
 - Silk
 - Paper
 - Surgical mask -- non-woven fabric
 - N95 - approved medical material
 - Other: _____

- c. Last time you wore your mask, did this mask completely cover...
 - i. ... your mouth? Yes / No
 - ii. ... your nose? Yes / No

- d. Where did you obtain the mask that you have used most in the last 7 days?
 - Self-made
 - Purchased
 - Gifted by an NGO
 - Gifted by individual politician
 - Gifted by the government
 - Gifted by a friend/ someone in my community
 - Other: _____

- 7. Thinking about all of the members of your household, how much did your household spend on masks since February 2020? Put 0 if don't own any mask. Ksh

- 8. (if not surveyed in Round 2) When did you start wearing a mask regularly?
 - In the last 7 days
 - In the last 14 days
 - August 2020
 - July 2020
 - June 2020
 - May 2020
 - April 2020
 - March 2020
 - I don't wear a mask regularly

9. Out of 10 other households in your village, how many do you think wear a mask or face covering... Prompt for 1 out of 10
- i. ... when they go to a market center 1 - 10
 - ii. ... when they attend a religious gathering? 1 - 10
 - iii. ... when they use public transport? 1 - 10
 - iv. ... when they visit a store in your village? 1 - 10
 - v. ... when they visit another household in your village? 1 - 10
 - vi. ... at work? 1 - 10

10. Out of 10 other people wearing a face mask in your village, how many do you think wear it correctly, that is, completely covering their mouth and nose...? For example, wearing a mask around the neck or chin would be considered incorrect.
- a. Within the village: 1-10
 - b. Outside the village: 1-10

11. In what other ways has your behavior changed in the past 7days? (DO NOT READ, simply code the FR's response)
- wash hands with soap more often
 - avoid handshakes or physical greetings
 - avoid groups of more than 10 people such as family gatherings, parties, church / mosque, funerals, etc
 - Stay at home more
 - Use hand sanitizer more frequently Travel outside of home area less
 - Cover mouth more when cough or sneeze Go to work less
 - Wear face mask
 - Stock up on food and other essentials
 - Drink warm/hot water Drink tea with lemon
 - Eat fruits with vitamin C to boost immune system
 - Eat Lemon / Garlic / Avocado / Mango / any other type of food
 - Eat Alkaline foods Drink bicarbonate/baking soda
 - Visited a doctor Cancelled visit to a doctor
 - Prayed Returning home earlier at night
 - Socially distancing from others
 - Other: _____

11a. (if any selected) Take a moment to think about other households in your community. Out of 10 such households, how many do you think practice the measures you just stated?

12. Are you feeling nervous or anxious due to the coronavirus outbreak? Yes / No

12a. (if yes) What is your major reason for worrying or being anxious? (DO NOT READ, simply code the FR's response)

- Loss of employment / business
- Fear of myself or family getting infected by coronavirus
- Fear of myself or family dying due to coronavirus
- Fear of me infecting others in the community
- Fear of being unable to feed or provide for family
- Fear of losing access to health facilities
- Effect on education system and school closures
- Economic Crisis/Paralyzed Movement
- Uncertainty of when lockdown will end / things will return to normal
- Other (specify): _____

13. Has the household had to do any of the following actions in response to the COVID crisis?

Select all that apply.

- Sale of assets (ag and no-ag)
- Engaged in additional income generating activities
- Received assistance from friends & family
- Borrowed from friends & family
- Took a loan from a financial institution
- Credited purchases
- Delayed payment obligations
- Sold harvest in advance
- Reduced food consumption
- Reduced non-food consumption
- Relied on savings
- Received assistance from NGO
- Took advanced payment from employer
- Received assistance from government
- Was covered by insurance policy
- No action taken
- Other, specify: _____

If UNHCR, CONTINUE. Otherwise, SKIP to conclusion.

Section 11a: Intentions/Solutions

1. Do you plan to return to your home country in the foreseeable future (post-Covid19)? Yes / No

a. (If yes) When do you plan to return?

- In the next 3 months
- 3 months to 1 year

more than one year

b. (if no) What are the three top reasons you do not plan to return in the foreseeable future?

Lack of safety and security

Lack of livelihood

Inadequate basic services (health, water, electricity, infrastructure)

Lack of education for children

Lack of housing

Married to a national

Other, specify: _____

c. (if no) Since you do not return to the home country, what do you plan in the foreseeable future?

Stay in urban area

Stay in refugee camp

Move from refugee camp to urban area

Move from urban area to refugee camp

Seek solution in third country

d. What are the three top reasons for this choice?

Lack of safety and security

Lack of livelihood

Inadequate basic services (health, water, electricity, infrastructure)

Lack of education for children

Lack of housing

Better economic opportunities

Access to education for my children

Access to basic services (health, water, electricity, infrastructure)

Access to shelter

Married to a national

Other, specify: _____

2. (if UNHCR -- urban) What will you do if you face economic difficulties in the urban area and UNHCR is not able to provide you with assistance?

Relocation to refugee camp

Return to home country

Will try to find work in the urban

Will make arrangements with my communities

Other, specify: _____

Section 11b: Household and Social Relations

50% are assigned this section, the other 50% are assigned section 8.

Read: Now, I would like to ask you about your social activities and your views on society.

1. Generally speaking, would you say that most people can be trusted or that you need to be very careful in dealing with people?
 - Most people can be trusted
 - Need to be careful
 - DK

2. (if not refugee) How much do you trust your country's government to take care of its citizens?
 - Strongly distrust
 - Somewhat distrust
 - Neither trust nor distrust
 - Somewhat trust
 - Strongly trust

3. (if refugee) How much do you trust the Kenyan government to take care of immigrants / refugees within Kenya?
 - Strongly distrust
 - Somewhat distrust
 - Neither trust nor distrust
 - Somewhat trust
 - Strongly trust

4. Are you satisfied with the government's response to the coronavirus crisis? [Y/N/DK]

5. (if no) Why are you not satisfied with the federal/state government's response? Do not read
 - Limited Testing
 - No financial assistance from the government
 - Late response by government
 - Shortage of medical materials
 - Other (specify)

6. Using the following scale, please indicate how much you agree or disagree with the following statements: Disagree=1 / Neutral= 2 / Agree = 3
 - a. The Government is trustworthy in the way it manages the Coronavirus crisis:
 - b. The Government is willing to provide health care to address the Coronavirus crisis:
 - c. The Government is able to provide health care to address the Coronavirus crisis:
 - d. The Government is able to provide enough assistance (cash and in-kind) in response to the crisis:
 - e. You intend to follow the Government's guidelines to mitigate the spread of the coronavirus.
 - f. Other people are following the Government's guidelines to mitigate the spread of the coronavirus.

7. During the past 14 days, have you been the victim of any crime? Crime includes any criminal behavior punishable by law. Prompt, and give examples from question Yes / No
 - 7a. (if yes) What crime? Do not read. Select all that apply.
 - Theft, or attempted theft

3. Was this call dropped or interrupted at any time, and continued later? Yes / No
 3a. (if yes) In which section(s) did this happen?
 List section numbers. Select all that apply.
4. Time end interview / HH:MM
5. What was this household's ID?
6. In what language was the survey administered? Select all that apply.
 Kiswahili
 Luo
 English
 Other: _____
7. How was the respondent's skill in speaking and understanding the survey language?
 Displayed no problems speaking or understanding language
 Displayed a little difficulty speaking or understanding language
 Displayed moderate difficulty speaking or understanding language
 Displayed serious problems speaking or understanding language
8. Are you very confident, somewhat confident or not very confident in the overall quality and truthfulness of this respondent's responses?
 Very confident
 Somewhat confident
 Not confident
9. If SOMEWHAT or NOT CONFIDENT: Why?

10. Please note any other comments on the survey at this time:
