

Module A

A	<u>SECTION A: HOUSEHOLD IDENTIFICATION</u>	
1	Region ID of HH (prefilled)	
2	District ID of HH (prefilled)	
3	Cluster of HH (prefilled)	
5	Household ID (prefilled)	
6	Type of locality (prefilled)	Urban....1 Rural.....2
7	Enumerator ID	
8	Supervisor	
9	Name of head of household (prefilled)	
10	'Any relevant notes when calling this household in the future?' S12.8 in Wave 1	

Section B. Interview Schedule

	1	2	3	4	5	
C A L L A T T E M P T	DATE AND TIME OF CALL ATTEMPT [DD-MM-YYYY] [HH-mm]	TELEPHONE NUMBER (PREFILLED)	INTERVIEWER: DID ANYONE ANSWER THE PHONE? Yes.....1 No, nobody answered..2. >> NEXT ATTEMPT No, number does not exist...3 >> NEXT ATTEMPT No, Phone switched off...4 >> NEXT ATTEMPT	INTERVIEWER READ TO THE RESPONDENT: GREETINGS, <i>My name is _____. I am working for the GHANA STATISTICAL SERVICE (GSS). We are currently doing a nationwide survey to examine the impact of and responses to the coronavirus in the country. On [DATE] we spoke to [NAME], I am trying to reach them again, is this you? or if not are they available?</i>	INTERVIEWER: ARE YOU SPEAKING TO THE RESPONDENT FROM WAVE 1/2? Yes..1 >>Q6a No..2 Cannot understand language..3 >> NEXT ATTEMPT	INTERVIEWER READ OUT: <i>Could you give me their number or visit them so I can call them using your phone? It is really important for me to be able to speak to them.</i> No, don't know the household...1 >> NEXT ATTEMPT No, Can't/won't connect to household >> NEXT ATTEMPT Yes, phone number...3 >> RECORD PHONE NUMBER IN ROSTER Yes, visit household..4 >>
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	6a	6b	6_NOTE	7	8	9
C A L L A T T E M P T	INTERVIEWER READ TO THE RESPONDENT: <i>My name is _____ I am working with the Ghana Statistical Service. We are currently conducting a nationwide research survey called COVID-19 Household and Jobs tracker to examine the impact of and responses to the coronavirus in the country and we would like to invite you to participate. If you choose to participate, we will ask you questions about your household to ascertain the impact of COVID-19 on jobs, wellbeing and access to food, education and healthcare.</i> <i>This interview will take around 20 minutes. Any information you share with us will be kept strictly confidential and only be used for</i>	INTERVIEWER: Does the respondent agree to be interviewed? Yes...1 No not now...2 >>Q14 No, refused...3 >>	INTERVIEWER: RECORD THE NAME / ID OF THE RESPONDENT	AUDIO CONSENT This survey will be recorded for data quality assurance purposes, Do you agree for our conversation to be recorded? Yes No	Is there any other phone number besides this to contact your household next time? <i>Can I call you back later at a time that works better for you? It is really important for us to speak to you or anyone else in your household.</i> Yes....1	INTERVIEWER TO READ OUT: : what date/time did you reschedule the interview with the respondent for? RECORD AND END INTERVIEW

<p><i>statistical purposes. If at any point there are any questions you do not feel comfortable answering, you can choose not to answer them. You can also choose to stop the interview at any point. Your participation in this survey is completely voluntary. The information you provide may help the government and others to understand the impact of COVID_19 on households during this difficult time and may also be used to inform policy.</i></p> <p><i>If you have questions, comments, or concerns about the research, please contact Ghana Statistical Service (GSS) at 024 483 8054 or 024 487 9607. If you have any questions about your rights as research participants, please contact GSS at info@statsghana.gov.gh</i></p> <p><i>This call will not cost you any airtime. To thank you for your participation, we will also transfer 5 GHC airtime to your phone.</i></p>	<p>INTERVIEW RESULT</p>				<p>No.....2 >> INTERVIEW RESULT</p>	
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Section 1. Basic Information Panel

	FILTER	1	2	3
I N D I V I D U A L I D	<p>HAS THIS HOUSEHOLD PARTICIPATE IN EITHER WAVE 1 OR WAVE 2?</p> <p>Yes >>Q1 No>> Q4</p>	<p>INTERVIEWER: ALL HOUSEHOLD MEMBERS RECORDED DURING WAVE 1 ARE PRE-FILLED</p> <p>Is the following information correct about [NAME]?</p> <p>INFO PREFILLED FROM WAVE 1 Name Is still member of HH Relationship to HHH Age Sex Education Marital Status (if 12+) Pregnancy Status (if 12+ & Female)</p> <p>INTERVIEWER: IF NO CHANGES, PROCEED TO Q3, IF CHANGES AMEND HERE</p> <p>Yes, all information is correct 2 Yes, but age is wrong/incorrect 3 Yes, but sex is wrong/incorrect 4 Yes, but wrong/incorrect relationship with head 5 Yes, but education status is wrong/incorrect 6 Yes, but marital status is wrong/incorrect 7 Yes, but pregnancy status is wrong/incorrect 8 No, not a member of household</p>	<p>Why did [name] leave the household/?</p> <ol style="list-style-type: none"> 1. Divorce/separation 2 Left for studies/educational opportunity 3 Left for work 4 Left to find better land 5 Health reasons 6 Security reasons 7 For marriage/ cohabitation 8 To join their family already living in another location 9 Moved with family 10 Left to set up own home 11 Unable to stay due to conflict (militancy/insurgency) 12 Dispute with other household members/community 13 Abducted/kidnapped 14 Dead -888 Refused 	<p>Are there any new members in the household?</p> <p>IF YES PLEASE LIST NAMES OF ALL NEW HOUSEHOLD MEMBERS</p>
1				

Section 1. Basic Information cont - Washington Group Questions on Disability

		12	13	14	15	16	17
INDIVIDUAL	PREFILLED WITH CURRENT HOUSEHOLD LIST	<p>FOR EACH HH MEMBER</p> <p>Does [NAME] have difficulty seeing, even if wearing glasses?</p> <p>No - no difficulty...1 Yes – some difficulty..2 Yes – a lot of difficulty ...3 Cannot see at all.....4</p>	<p>Does [NAME] have difficulty hearing, even if using a hearing aid?</p> <p>No - no difficulty...1 Yes – some difficulty..2 Yes – a lot of difficulty ...3 Cannot hear at all.....4</p>	<p>Does [NAME] have difficulty walking or climbing steps?</p> <p>No - no difficulty...1 Yes – some difficulty..2 Yes – a lot of difficulty ...3 Cannot walk at all.....4</p>	<p>Does [NAME] have difficulty remembering or concentrating?</p> <p>No - no difficulty...1 Yes – some difficulty..2 Yes – a lot of difficulty ...3 Cannot do at all.....4</p>	<p>Does [NAME] have difficulty (with self-care such as) washing all over or dressing?</p> <p>No - no difficulty...1 Yes – some difficulty..2 Yes – a lot of difficulty ...3 Cannot do at all.....4</p>	<p>Using your usual (local) language, does [NAME] have difficulty communicating, for example understanding or being understood?</p> <p>No - no difficulty...1 Yes – some difficulty..2 Yes – a lot of difficulty ...3 Cannot do at all.....4</p>
	1						

Section 3. Behavior and Social Distancing

	1	2	3	4	5
I N D I V I D U A L I D	Compared to before COVID-19 [March 2020], how often do you wash/ sanitize your hands?	Compared to before COVID-19 [March 2020], how often do you use handshakes/physical greetings?	Compared to before COVID-19 [March 2020], how often do you go to weddings, parties and family gatherings?	Compared to before COVID-19 [March 2020], how often do you go to funerals?	Compared to before COVID-19 [March 2020], how often do you go to church / mosque?
	Much less than before..1 Somewhat less than before..2 Same as before..3 Somewhat more than before..4 Much more than before..5	Much less than before..1 Somewhat less than before..2 Same as before..3 Somewhat more than before..4 much more than before..5	Much less than before..1 Somewhat less than before..2 Same as before..3 Somewhat more than before..4 much more than before..5	Much less than before.....1 Somewhat less than before.....2 Same as before.....3 Somewhat more than before.....4 much more than before.....5	Much less than before..1 Somewhat less than before..2 Same as before..3 Somewhat more than before..4 much more than before..5
1					

Section 4. Access

HEALTH	
1	2
If you or any member of your household need medical treatment from a health facility, would you be willing to go? Yes1 >> next section No.....2	Why would you or the member of your household not be willing to go to the health facility? DO NOT READ OPTIONS - JUST RECORD Afraid to get infected by coronavirus at the health facility.....1 Lack of money2 No transport available / facility far.....3 Prefer to self-medicate.....4 Afraid facility are full.....5 None of the above.....6
1	

Section 5: Employment

1	2	3	4	5	5	6
<p>In the last 7 days, did you do any work for pay, do any kind of business, farming or other activity to generate income, even if only for one hour?</p> <p>Yes >> Q5 No</p>	<p>(if Q1 = NO) Were you available for work in the last 7 days?</p> <p>Yes No</p>	<p>(if Q1 = No AND Q2 = Yes), Why did you not work in the last 7days?</p> <p>Seasonal Worker..1 Business Closed..2 Reduction in staff due to less business..3 Temporarily Absent..4 Retired..5 Ill health..6 Need to Care for ill Relative..7 Directly Covid-19 Related reduction of work at business (shift/furloughed/ Temporary lay-off) or work suspension..8 Covid-19 Safety Concerns..9 Discouraged job seekers..10 -888 Refused to answer</p>	<p>Even though you did not work in the past 7 days, do you have a job to return to?</p> <p>Yes No>>Q5</p>	<p>What is the main activity of your usual work?</p> <ol style="list-style-type: none"> 1. Agricultural 2. Industry 3. Services <p>Not applicable</p>	<p>Since 16 March 2020 (When the government imposed the first COVID-19 restrictions), did your job change?</p> <p>Yes, because of COVID..1 Yes, but not because of COVID..2 No..3 Not applicable..4 Refused to answer..99</p>	<p>Have you or any member of your household made changes in their work to adapt to COVID -19?</p> <p>Yes, changed stock sold..1 Yes, started delivery service..2 Yes, began offering online services..3 Yes, other (please specify)..4 No..5 Not applicable / Refused to answer..99</p>

Section 6. Income Loss

	1	2	3
Source Number	<p>In the last three months, which of the following were your household's sources of livelihood?</p> <p>READ ALL OPTIONS</p> <p>SELECT ALL THAT APPLY</p> <p>Yes.....1 No.....2</p>	<p>FOR ALL YES IN Q1: How has income from [SOURCE] changed compared to before COVID-19 [March 2020]?</p> <p>Reduced more than half..1 reduced , but less than half..2 Stayed about the same..3 Increased by less than half..4 Increased by more than half..5</p>	<p>Generally, how has your total income changed compared to before COVID-19 [March 2020]?</p> <p>Reduced more than half..1 reduced , but less than half..2 Stayed about the same..3 Increased by less than half..4 Increased by more than half..5</p>
1	Family farming, livestock or fishing		
2	Non-farm family business		
3	Wage employment of household members		
4	Remittances from abroad		
5	Remittances within the country		
6	Income from properties, investments or savings		
7	Pension		
8	Assistance from the Government		
9	Financial assistance from friends/family		
10	Assistance from NGOs / charitable organization		
	Refused		

Section 8. Subjective Well-being

I would like to ask a question about yourself and how you feel your life has gone in the past few weeks:

1	2	3	4
<p>On a scale of 1 to 5, where 1 is much better and 5 is much worse.</p> <p>Do you think that in the next 12 months you and your household will be better than today or worse?</p> <p>You will live much better 1 You will live somewhat better 2 Nothing will change 3 You will live somewhat worse 4 You will live much worse 5</p>	<p>On a scale of 1 to 5, where 1 is fully satisfied and 5 is not at all satisfied.</p> <p>To what extent are you satisfied with your life in general at the present time?</p> <p>Fully satisfied 1 Rather satisfied 2 Indifferent 3 Less than satisfied 4 Not at all satisfied 5</p>	<p>On a scale of 1 to 5, where 1 is much more at risk and 5 is much less at risk.</p> <p>Do you think that in 12 months time you and your household will be less at risk from contracting COVID-19 than today?</p> <p>Much more at risk 1 More at risk 2 At the same risk level 3 Less at risk 4 Much less at risk 5</p>	<p>On a scale of 1 to 5, where 1 is Very Concerned and 5 Not concerned at all.</p> <p>How concerned are you today about the potential effects of the coronavirus on you and your household?</p> <p>Very concerned 1 Somewhat concerned 2 Indifferent 3 Slightly not concern 4 Not concerned at all 5</p>

Section 9: Coping Strategies

I would like to ask you about events that may have affected your household since March 2020 (beginning of the COVID-19 in Ghana).

1.	2	3	4	5
<p>On a scale of 1 to 5 where 5=very severely; 4=severely; 3=neither; 2=not severely; 1=not severely at all.</p> <p>Generally, how severely has your household been affected by COVID-19 since March 2020?</p>	<p>Did your household experience any of these shocks due to COVID-19 since March 2020?</p> <p>Yes...1 No....2</p>	<p>[FOR ANY Q2 = YES]When did this shock occur?</p> <p>Last 3 months (Jul - Oct 2021)..1 Earlier in 2021 (between January 2021 - July 2021)..2 Last year (Between March 2020-Dec 2020) ..3</p>	<p>Did your household use any of these coping mechanisms for the COVID-19 since March 2020?</p> <p>Yes...1 No....2</p>	<p>[FOR ANY Q4 = YES] When did you use this coping mechanism?</p> <p>Last 3 months (Jul - Oct 2021)..1 Earlier in 2021 (between January 2021 - July 2021)..2 Last year (Between March 2020-Dec 2020) ..3</p>
<p>Very severely..5 Severely...4 Neither..3 Not severely..2 Not severely at all...1</p>	Death or disability of a working member of the household		Sale of ASSETS (AG AND NO-AG)	
	Death of someone who sends remittances to the household		Engaged in additional income generating activities	
	Illness of income earning member of the household		Received assistance from Friends & family	
	Loss of an important contact		Borrowed from friends & family	
	Job loss		Took a loan from a financial institution	
	Nonfarm business failure		Credited purchases	
	Theft of crops, cash, livestock or other property		Delayed payment obligations	
	Destruction of harvest by insufficient labor		Sold harvest in advance	
	Pest invasion that caused harvest failure or storage loss		Reduced food consumption	
	Increase in price of inputs		Reduced non-food Consumption	
	Fall in the price of output		Relied on savings	
	Increase in price of major food items consumed		Received assistance from NGO	

	Interruption of Schools		Took advanced payment from employer	
			Received assistance from government	
			Was covered by insurance policy	

Section 10: Result of interview

	1.	2.	3.	4.	5.
<p>INTERVIEWER CONFIRM THAT ALL QUESTIONS HAVE BEEN ANSWERED AND READ OUT:</p> <p><i>That's it for now. Thank you very much for answering all questions and helping us to understand the current situation with COVID19 in Ghana and worldwide. This is really important.</i></p> <p><i>I will transfer you the __GHC after this call. If you have any questions about the survey you can call XXX XXX XXXX.</i></p>	<p>INTERVIEWER: What is the result of the interview?</p> <p>COMPLETE.....1 PARTIALLY COMPLETE (REFUSED) ...2 >> END REFUSED.....3 >> END COULD NOT REACH HOUSEHOLD4 >>Go to Q5 RESCHEDULED.....5</p>	<p>INTERVIEWER: which phone number did you reach the respondent on?</p>	<p>INTERVIEWER: what is the respondent's preferred number for future interview?</p>	<p>INTERVIEWER: in which language did you mainly conduct the interview?</p>	<p>INTERVIEWER: do you have any notes that are relevant when calling this household in the future?</p>

END OF INTERVIEW

DATE

TIME.....