Planning and Implementing Household Surveys Under COVID-19
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Date: 15 December 2020
Keywords: Household surveys, Face-to-face interview, Safety protocol, COVID-19
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Acknowledgements

This Technical Guidance Note was prepared by Haoyi Chen from the Inter-Secretariat Working Group on Household Surveys and, Gbemisola Oseni, Amparo Palacios-Lopez, and Akiko Sagesaka from the Living Standards Measurement Study team of the World Bank. It was produced under the direction of co-Leads of the COVID-19 Task Force: Francesca Perucci, Deputy Director of the United Nations Statistics Division; Gero Carletto, Manager of the Living Standards Measurement Study of the World Bank and Silvia Montoya, Director of the UNESCO Institute for Statistics.

This Technical Guidance Note is the result of collective efforts, involving a wide range of contributors with extensive experience in household survey operations. Sincere appreciation goes to the following experts who reviewed and/or provided technical advice: Sunita Kishor, DHS Programme – ICF International; Pietro Gennari, Food and Agriculture Organization of the United Nations (FAO); Kieran Walsh, International Labour Organization (ILO); Vicki Aken, International Rescue Committee (IRC); Haleema Saeed, Palestinian Central Bureau of Statistics; Papa Seck, Jessamyn Encarnacion, Rea Jean Tabaco, Isabella Schmidt, Michele Seroussi and Sara Duerto Valero, UN Women; Gemma Van Halderen, UN Economic and Social Commission for Asia and the Pacific (UNESCAP), Xavier Mancero and Andres Gutierrez Rojas (UN Economic Commission for Latin America and the Caribbean); Yifan Li, UNESCO Institute for Statistics; Yongyi Min, United Nations Statistics Division (the ISWGHS Secretariat); and James Arthur Shaw, Jonathan G. Kastelic, and Felicien Donat Edgar Towenan Accrombessy, the World Bank.
Introduction

The COVID-19 pandemic presented a major challenge for household survey programmes. Traditional face-to-face survey operations have become difficult to implement in many countries due to social distancing requirements and other restriction measures as a result of the pandemic. According to a survey conducted by the United Nations Statistics Division (UNSD) and the World Bank in May 2020, 96 percent of national statistical offices partially or fully stopped face-to-face data collection.¹

In response to the government requirement on social distancing, many national statistical offices (NSOs) quickly turned to telephone or web interviews as an alternative data collection mode to maintain continuity in the production of key indicators and monitor the health and socio-economic impact of the pandemic.²

Six months after the virtual global lockdown in response to the COVID-19 pandemic starting in or around March 2020, many countries have gradually opened up their economies.³ For example, while more than 190 countries implemented country-wide school closures at the beginning of April, that number was down to 53, as of September 2020.⁴ For some countries, this gradual reopening means a resumption in household survey operations, either through partial or full face-to-face interviews by the NSOs. As of October 2020, around 40 per cent of NSOs that have fully or partly halted face-to-face interviews expect to resume these in full within the next six months.⁵

This note provides guidance on what to consider when planning to implement a face-to-face survey, partially or fully, during the continuing COVID-19 pandemic, in response to a call by countries during the third round of UNSD and World Bank survey on the

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⁵ Information obtained through the UNSD and the World Bank survey on the impact of COVID-19 on national statistical offices, round 3, October 2020. With the COVID-19 pandemic situation worsening in many countries towards the end of 2020, household surveys will continue to be impacted.
impact of COVID-19 on national statistical offices. In particular, this document will focus on considerations to help mitigate the risk of COVID-19 transmission during survey field work and to maintain, to the extent possible, continuity in survey operations. The planning of the survey and the application of the recommendations in this document should be viewed as an iterative process that should be reviewed and adapted regularly by survey managers based on expected fluctuations in the COVID-19 situation.

The note was prepared based on a review of available national guidance on survey protocols for face-to-face interviewing during the COVID-19 period; as well as relevant guidance from international and non-profit organisations.

The note comprises five sections:

- **Section 1. General Principles** highlights the basic principles that guided the development of this note, i.e., minimizing the risk of COVID-19 transmission, keeping field operations to the minimum necessary, and ensuring the continued availability of timely and quality statistics.
- **Section 2. Planning data collection** covers areas such as setting or revisiting survey objectives, assessing the country’s COVID-19 situation, building the project team, budgeting, choosing data collection mode and designing survey questionnaires.
- **Section 3. Field organization** covers recruiting and organizing field staff, advocacy and communication, handling printed materials, training field staff and making fieldwork plan.
- **Section 4. Fieldwork** provides guidance for before, during and after the interview, including provision of transportation to and from the field.
- **Section 5. Post fieldwork** provides guidance on what to consider after fieldwork has been carried out.

Additionally, the note includes the following: Reference Checklist (Annex 1) that can guide decision-making around all aspects of survey operation; Etiquette for organizing and attending remote training sessions (Annex 2); COVID-19 Risk Assessment Questionnaire that can be used to assess whether the survey field staff and respondents might be at risk for COVID-19 (Annex 3); and an example of a standard informed consent script that make respondents aware of any risks of COVID-19 following the fieldwork (Annex 4).

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6 Information obtained through the UNSD and the World Bank survey on the impact of COVID-19 on national statistical offices, round 3, October 2020. Among countries that do not already have new survey protocols under COVID-19, around 75 per cent have indicated the need for such guidance.

7 A review of 80 countries was carried out and guidance from the following countries were gathered: Austria, Chile, Colombia, Costa Rica, Ecuador, France, Greece, Indonesia, Japan, Mexico, Mozambique, Paraguay, Portugal, Republic of Korea, Slovenia, South Africa, Uganda and United States of America.

1. General principles

The principles underlying the considerations in this note are as follows:

- Minimizing the risk of COVID-19 transmission among household survey field staff and survey respondents in order to prevent further contagion.
- Limiting field data collection activities to the minimum necessary to reduce the risk of COVID-19 transmission.
- Ensuring the continued availability of high quality and timely and well-documented data for policymaking at the national and local level.

Recognizing that it might not be possible to achieve all principles completely, countries should set their own priorities according to national circumstances and evaluate the risk and benefit of carrying out such data collection. Such evaluation should be done regularly as COVID-19 situation evolves constantly and should be transparent to all stakeholders.
2. Planning data collection

2.1 SETTING/REVISITING SURVEY OBJECTIVES
The survey objectives may change due to the limitations imposed by the COVID-19 pandemic. A clear and detailed proposal of data collection objectives and activities should be developed in the planning stage, in consultation with relevant stakeholders. In addition to traditional stakeholders—NSOs or survey organizations, funding agencies, development partners and data users—it is strongly recommended that national and local health authorities, the government’s labour protection unit, as well as the national inter-agency COVID-19 Task Force, if available, be included in the discussions.

Given the risk associated with face-to-face interview, the survey objectives should be carefully considered to address specific policy needs that cannot be informed by data collected through other sources. A prioritization exercise should also be conducted to select what topics/questions should be included, what could be shortened, and what could be dropped altogether. Regardless of the topics included and mode of interview, the interview length should be shortened, and efforts should be made to reduce the duration of contact between enumerators and respondents to the extent possible. It is also essential that an assessment be made of the available survey infrastructure and tools to identify new limitations imposed by the pandemic.

In addition, NSOs, development partners and other stakeholders should work in concert to increase efficiency in and avoid duplication of data collection.

2.2 ASSESSING THE COVID-19 SITUATION
Before resuming traditional fieldwork operations for household survey data collection, an assessment of whether face-to-face interviews can be implemented needs to be conducted in partnership with the health authorities. This assessment should be based on the COVID-19 situation at the national, regional and local levels where survey operations are going to be carried out. The assessment should be based on a variety of indicators, such as government restrictions, reported cases of COVID-19, cases per 100,000 residents, and the growth rate in cases.

Following the COVID-19 situation assessment, consultations should be held with the national and relevant regional health authorities and the national Inter-agency COVID-19 Task Force (if available) on whether it is feasible to resume face-to-face interviewing in certain regions or in the entire country. If local guidelines are not available, the assessment
should follow the WHO guidelines.\textsuperscript{9} Safety protocols to minimize the risk of contracting COVID-19 virus should be developed. These should include assessing the need for personal protective equipment.

Given the fluidity of the pandemic and understanding of how the virus affects lives, the survey implementer should monitor the COVID-19 situation continuously (preferably at a set schedule for example, every two weeks), update safety protocols if needed, and be prepared to adapt quickly and halt fieldwork immediately, if necessary.

### 2.3 BUILDING THE PROJECT TEAM

The survey planning is usually led by a gender-balanced small group of subject-matter specialists and technical and administrative staff members of the national statistical offices, in consultation with key stakeholders. The small team of key stakeholders should be involved from the early planning stage, when formulating the scope and objectives of the survey.

When planning a survey during the pandemic, it is imperative to involve government policymakers for guidance on priorities and how collected data will be used. For instance, health authorities and experts are crucial, not only in assessing whether the COVID-19 situation in the country allows face-to-face interviewing, but also in ensuring proper COVID-19-related concepts and definitions are applied and reflected in the questionnaire design, and are communicated well with enumerators and supervisors during trainings.\textsuperscript{10} Consultation with health authorities should also cover the need for personal protective equipment (PPE) and procedures to minimize the risk of transmission of COVID-19 for both enumerators and respondents.

Collaboration with government labour protection offices is crucial when discussing protocols on income protection and paid sick leave for suspected cases of COVID-19 among field staff.

### 2.4 BUDGETING

Implementing a survey incorporating COVID-19 risk mitigation measures is going to significantly increase the survey cost. Items that may potentially increase the cost include.\textsuperscript{11}

- **Personnel Costs:** Additional personnel costs to cover expanded consultations with health authorities and labour protection unit, testing of new concepts on COVID-19 for data collection, building new sampling infrastructure if a new data collection mode is to be used, additional enumerator-days to meet the social distancing and travel restriction requirements or to cover COVID-19-related absences, extended

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\textsuperscript{9} World Health Organization, available at https://www.who.int/health-topics/coronavirus

\textsuperscript{10} In case the survey includes topics related to COVID-19.

\textsuperscript{11} United Nations Statistics Division, 2005. *Household Sample Surveys in Developing and Transitioning Countries*, Eric Keogh, Chapter XIV – Developing a framework for budgeting for household surveys in developing countries.
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enumeration period to cover the extra time needed to comply with stricter protocols, including extra training, and additional data processing when data collection mode varies from previous practices.

• **Transportation Costs:** Additional transport costs to meet social distancing requirements when transporting field staff from and to the field. For example, some countries mandated 50% vehicle capacity or less. In this case the number of vehicles needed will double.

• **Equipment Costs:** Additional equipment costs to cover the procurement of masks, sanitizers, disinfectant for surfaces and personal protection equipment (PPE). In addition, thermometers should be procured if the temperature of field staff is to be regularly checked. Examples of suggested quantities would be 3 masks per day per interviewer, plus masks for respondents that don't have one, or 1 liter of sanitizer per interviewer per month. Additional cost will arise if rapid COVID-19 tests for fieldworkers are administered.

• **Training:** Additional costs related to renting larger venues that meet the requirement of social distance, additional projectors and computer equipment for in-person training will need to be taken into consideration.

• **Electronic Device and Associated Costs:** If telephone interviews are to be implemented, the cost of telephones (smart phones or regular phones depending on how surveys are carried out) and airtime for interviewers and respondents might also need to be budgeted for. Cost related to incentives to phone respondents may also have to be added. For equipment and consumables, additional costs in some geographies might arise from the purchase of printers and printing paper to avoid the use of public spaces and shops, which will help reduce the risk of COVID-19 transmission.

• **Other costs:** Broadened and strengthened communication is required to obtain cooperation from respondents.

Another set of costs that do not fit tidily in the framework above are those associated with the potential interruption in data collection due to a worsening in conditions or a return of government restrictions. Note that the above list of items is in no way an attempt to be exhaustive; it is in fact very challenging to anticipate all possible areas of survey operations where the cost will be affected by COVID-19, as situations vary across countries and even across areas within the same country.

2.5 CHOOSING THE MODE OF DATA COLLECTION

Traditionally, household surveys have been conducted through face-to-face interviews. However, given the health risks posed by COVID-19 and the associated restrictions, there should be a limit on the use of face-to-face interview techniques. Based on the country/local context, survey implementers should choose the most appropriate method of data collection from the following:

• the entire questionnaire will be conducted via a face-to-face interview, or

• part of the questionnaire will be conducted via a face-to-face interview (e.g. Con-
tact Information, Roster, Consumption Module), and the remainder through a telephone interview or web survey (mix-mode), to minimize the time in the field, or
• Some households will be interviewed in person and some over the phone.

The decision should be made based on the following factors:
• Whether it is safe to resume face-to-face interviews following the COVID-19 situation assessment at the national and local level. Ideally, it is recommended to keep the duration of the face-to-face interview to a minimum even if it is considered safe to physically approach the household.
• Whether infrastructure to carry out surveys through other modes such as telephone (CATI) and internet (CAWI) is available and with wide coverage. Unfortunately, not all countries are well-equipped to carry out surveys through these media.
• Other elements to be considered include, urgency of data needs, the availability of contacts through telephone and web (phone numbers and email addresses), sample coverage, response rate and attrition, data quality, breadth and depth of topics covered, comparability of data from different data collection modes, comparability over time, presence of established call centers, and back-end data infrastructure. These are all major elements that need to be taken into consideration.\textsuperscript{12}

When more than one data collection mode is used in the same survey (mix-mode), additional considerations are required. Such considerations vary by ways in which different data collection modes are used in the survey. For example, phone interviews can be used for certain questionnaire modules, while in-person interviews are used to collect information that is best collected face-to-face.\textsuperscript{13} Another option (which should be considered carefully) is a model in which a different mode is used for different respondents. For example, households in certain areas are interviewed over the phone due to being classified as a higher COVID risk, while households in other areas with less risk are interviewed in person. Another example is that telephone interview is administered in urban areas where telephone penetration is high and face-to-face interview is used for rural areas.

Given that there may be different types of errors associated with different modes of data collection, specific requirements need to be taken into consideration at different stages such as in sampling, weight calculation, questionnaire design and post data col-


\textsuperscript{13} For instance, for some sensitive questions such as drug use or sexual behavior, it may be preferable to conduct individual interviews by phone or through the internet. Groves RM, Fowler JF, Couper MP, Lepkowski JM, Tourangeau R, & Singer E. Survey Methodology, 2nd Edition. New York: J.W. Wiley and Sons, 2009. Depending on the topics covered by the survey, certain topics such as violence against women are recommended to be collected through face-to-face interviews.
lection process. A sampling expert should be consulted as this would have implications for the estimates.

2.6 DESIGNING THE QUESTIONNAIRE

Once the data collection mode is decided, the survey questionnaire needs to be re-assessed. Independently of the mode of interview it is recommended to limit the interview time, which would have implications on questionnaire content, depth, and length. When a mix-mode data collection is planned, the questionnaire needs to be designed or adjusted to fit all modes employed.

Survey questions or modules that require extensive in-person interactions (e.g., anthropometric information of children) that might risk violating safety survey protocols should be minimized or avoided altogether. It is strongly recommended to minimize questionnaire length and to limit the number of visits to households.

In cases where information on the socioeconomic impacts of COVID-19 is not yet available, it is recommended to add questions related to COVID-19, to better inform current policies and interventions. Below is a list of topics that are specifically related to COVID-19 to be considered for inclusion:

- Knowledge of the spread of COVID-19
- Behavior in response to the risk of COVID-19
- Access to basic health and medical goods and services, including sexual and reproductive health supplies and services
- Access to other basic goods and services such as food, clean water supply, sanitation, public transport, education, housing, internet
- Impact of COVID-19 on food security, employment, unpaid care and domestic work, income and migration
- Assistance and social services provided by the government during the COVID-19 period
- Shocks and coping strategies
- Health status and COVID-19 infection rate


• Individual and household experiences related to and subjective wellbeing about COVID-19 (e.g., physical or mental health)

It is important to underscore the need for more individual-level information (in addition to households-level), cognizant of the fact that household-level data may mask the differential gender impact of COVID-19.

The COVID-19 related topics to be included will depend on the type of survey being implemented. It is the responsibility of the survey team to ensure that the number of additional modules/questions included, as well as their complexity, do not compromise the quality of the overall data collection. It is important to ensure that the questionnaire content (number and type of questions) is compatible with the mode of data collection. For example, interviews carried out by telephone should not be longer than 30 minutes, and thus, there should be limitations on the number of questions that can be included. Additionally, the lack of face-to-face interaction makes it difficult to explain the questions, thus it is required that the questions are simple and short to be easily understood over the phone and the answer options should be limited.

Another consideration in designing the questionnaire when telephone interview is one of the data collection modes is allow extra time for proxy responses when information for more than one household member is being collected. Often time with telephone interview enumerators resort to proxy responses to reduce the number of callbacks. This further limits the number of questions that can be included as interview time adds up quickly when information for more than multiple individuals is collected from the same respondent.

3. Field organization

3.1 RECRUITING FIELD STAFF
Interviewers, supervisors, data entry staff, and data system back-end and front-end technical staff are an essential part of the survey team. Strict safety and health protocols need to be taken to protect the respondents and the survey staff responsible for carrying out face-to-face interviews and who have physical interactions with the respondents. One consideration to reduce the risk of cross-region transmission of the virus, is to minimize the movement of interviewers across regions. When recruiting field staff, it is important to take into consideration the potential for COVID-19-related absences and plan accordingly.

The following are potential scenarios of absences:

- Sickness. If an interviewer contracts COVID-19, they risk infecting others. If an interviewer has either COVID-19 or symptoms of the virus, they will need to withdraw from the survey. The same protocol should be applied if an interviewer’s family member or close friend with whom they had been in contact contracts COVID-19. In the case of a confirmed COVID-19 case, they will need to quarantine and receive care. In the case of COVID-19 symptoms, or suspicion of transmission, they will need to get tested and quarantine while awaiting results.
- Containment. If any interviewer contracts COVID-19, out of an excess of caution, all those in contact with the infected person should follow the country’s health authority protocol for quarantine. This will prevent the virus from spreading among interviewers and respondents.
- Care. If an interviewer’s family member or close friend becomes infected with COVID-19, the interviewer may need to take care of the sick person or assume some of their responsibilities. This may prevent them from continuing with survey activities.

Thus, it is advisable to plan for more reserve staff than under typical circumstances.

3.2 ORGANIZING FIELD STAFF
Field teams should be structured into smaller groups to limit contact between field staff, and to limit the impact of anyone contracting the virus. Contact information of all field staff and respondents should be collected to assist with contact tracing in the case of a positive case of COVID-19. Government supported contact tracing apps should be installed on mobile phones for all field staff before all field work. Communication channels (hotlines) between field enumerators and offsite staff should be established and maintained for constant and open communication, in the event of any questions or issues in the field.

18 With the installed app, the survey implementer needs to ensure that the location of interviewed households is not revealed in the data.
Survey implementers should establish protocols on how to monitor the compliance of field staff with COVID-19 safety measures and corrective measures should be put in place for cases when protocols are not adhered to. Survey implementers should consider creating incentive structures that encourage field staff to report on any issue that may affect theirs and the respondent’s safety immediately. It is highly recommended that a system be put in place for regular testing, if feasible. There should also be a mechanism for feedback from respondents, through a telephone hotline or an online feedback website, if an enumerator acts in a way that may endanger the safety of the respondents or their household.

In addition, it is strongly recommended that income protection and sick leave should be provided for field staff who become infected with COVID-19. These measures encourage reporting of symptoms and potential exposure rather than hiding them for fear of job loss.

3.3 ADVOCACY AND COMMUNICATION
A successful survey operation requires the cooperation of the households being interviewed, and this is particularly crucial during the COVID-19 period. The advocacy and sensitization materials for household surveys should be adapted to take into account the COVID-19 context.

To ensure the maximum cooperation of households, there should be channels to clearly communicate the goals and format of the survey to households. This could be in the form of sensitization over the radio or TV, and SMS or telephone calls, rather than distributing printouts and physical materials. This communication should cover:
- the objective of the survey
- survey plans due to COVID-19, if any
- safety protocols that are being implemented by the survey team
- arrangements to be made by the household for the interview (e.g., a space outside where the enumerator and respondent could sit down in private and record the responses, wear a mask).

3.4 SURVEY MATERIALS AND EQUIPMENT
The procurement of equipment and its distribution should be taken into consideration when planning the survey timeline even more now that demand for certain items has increased and the time to secure them may be longer. The survey operation should, as much as possible, be carried out through electronic devices. When it is necessary to handle any distributed materials such as printed questionnaires and manuals, PPEs, electronic devices, etc., the following measures should be taken and monitored by supervisors:
- Staff should wash hands before and after handling any materials
- Masks should be worn at all time
- Mark a date for packaged materials and process them in a chorological order so that packages received earliest are processed first. This would keep the materials untouched for a maximum duration of time before they are being handled again.

19 Information on how long COVID-19 stay on surfaces is available at: https://www.who.int/docs/default-source/coronaviruse/risk-comms-updates/update-20-epi-win-covid-19.pdf?sfvrsn=5e0b2d74_2.pdf?sfvrsn=5e0b2d74_2
3.5 TRAINING FIELD STAFF

To the extent possible, all training of enumerators should be carried out via remote sessions. This requires that all involved staff have access to a reliable internet connection, suitable locations and adequate equipment. Etiquette for organizing and attending remote training sessions is available in Annex 2.

Under COVID-19, field staff should receive additional training on all safety and COVID-related field protocols that are being implemented. This might include guidelines on how to screen respondents for COVID-19, and on COVID-related field protocols intended to reduce the risk of transmitting the virus.

If in-person training is being carried out, the following should be considered:

- **Resource availability**, as the cost of providing protective measures and conducting socially distanced training is substantially higher than normal training, given the need to reduce the number of participants per room
- **Protocols**, for how the training should be conducted; what rules participants should observe and what to follow if someone is tested positive for the virus during or after training
- **Venue**, the layout and configuration of which should limit the risk of transmission
- **Supplies**, the type and quantity of which should help participants protect themselves throughout the training

**Protocols**

To keep participants safe, protocols must clearly dictate what participants must do, what participants must not do, and what happens if anyone becomes infected during the training. In other words, protocols must be both preventative and reactive in nature.

The preventative protocols should address:

- **Admission**. Prior to the first day of training, participants should provide a recent negative test result for COVID-19.
- **Arrival**. Before entering, all participants should have their temperature checked. In addition, all participants should complete a daily COVID-19 risk assessment.
- **Masks**. Participants should wear protective face masks throughout the training.
- **Sanitation**. Before starting training, participants should sanitize their area, unless it has been previously cleaned by sanitation staff. When sharing physical objects, participants should either sanitize the object, or sanitize their hands with an alcohol-based gel.
- **Social distancing**. Throughout training, participants should observe social distancing protocols, i.e. remaining 1.5 meters from others. When arriving at and departing from the training venue, participants should avoid congregating near the entrance/exit.

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exit or in groups. When moving around the training center—for example, for meals or bathroom breaks—social distancing should still be observed.

- **Grouping.** Staff should be separated into groups, for the entire duration of the training. The groups should not mix and people should not change groups. Additionally, the number of people in each room should not exceed the maximum allowed by the country’s health authority protocol.

The reactive part should deal with:

- **Fever.** If a participant presents a fever upon arrival, that person should be excluded for that day’s training and should not be allowed to enter the training center. The participant would need to produce a negative test result to be allowed back to the training. The cost of tests should preferably be covered by the survey implementer.

- **Protocol violations.** There should be measures in place to address any failure to adhere to protocols. For example, participants could receive a written warning for the first offense, and a dismissal for any subsequent offense.

- **COVID-19 case.** If a participant contracts COVID-19, all participants that have been in contact with the infected person should be notified and will be required, out of an excess of caution, to quarantine. During that period, quarantining participants should continue to be paid.

- **Contact with someone with COVID-19.** If a participant has been in contact with someone (family member, friend) that contracted COVID-19, they should notify the survey implementer and the country’s health quarantine protocol should be followed.

**Venue**

Traditionally, survey trainings take place in large meeting halls, with interviewers seated close to one another, that arrangement would not be ideal under the circumstances of COVID-19. To restrict and limit transmission, the venue should offer:

- **Rooms sized for social distancing.** Rooms should be set up in such a way that makes it easier for participants to be seated at least 1.5 meters away from the next person.

- **Several rooms.** Rather than congregate in a single space, participants should be divided into several smaller groups, and each group should occupy a room.

- **Ventilation.** Each room must have either air conditioning or some other form of ventilation that exchanges indoor air with outdoor air. This will attenuate concerns of virus particles subsisting in stagnant air.

- **Water and soap.** The venue should have available running water and soap to wash hands.

In addition, NSOs should develop thoughtful plans on meal services to limit contact between staff. They should decide whether meals will be served, and if not, they should provide time for and advice on how to safely eat outside. If meals are served, participants should be provided a safe space and time to eat that takes into account social distancing requirements.
Supplies
To enable the training to take place as described above, the survey implementer should procure appropriate protective and pedagogical equipment. The protective equipment should include:

- **Masks.** Masks should be worn by all staff at all times during training. Spare masks should be provided for all staff. To remain effective, masks must be changed periodically.
- **Hand sanitizer.** Each training room should be equipped with a large bottle of hand sanitizer. Everyone entering the room should use the sanitizer. Additionally, portable sanitizers could be provided to each participant.
- **Disinfectant and cleaning supplies.** Each training room should be equipped with disinfectants and cleaning supplies (e.g. paper towels, napkins, wipes). They should be used to sanitize surfaces and equipment in the training room.
- **Touchless thermometer.** Touchless thermometers should be made available for each training room. Additionally, each participant should be trained on how to use the device.
- **Projector.** Each training room should have its own projector, computer and other equipment such as a laser pointer (not to be shared between rooms).

During training
To maintain a safe training environment, the survey implementer should:

- **Conduct temperature checks.** All participants should have their temperature checked before entering the training center. If their temperature is less than 38°C, they can participate in the training. If their temperature is above 38°C, they should not be allowed to participate, and plans should be made to get a COVID-19 test for the staff. To return to training, a participant with a fever should provide a negative test.
- **Enforce safe behavior.** For protocols to be effective, there should be plans to monitor compliance, and corrective measures should be put in place for cases when protocols are not adhered to.
- **Quarantine.** If a participant contracts COVID-19, all participants that have been in contact with the infected person should be notified and quarantine according to country protocols. During that period, quarantining participants should continue to receive income.

3.6 MAKING FIELDWORK PLAN
Given that the COVID-19 situation is fluid, the field work plan should be adaptable, as modifications might need to be made at any point. Field work schedules should be flexible to deter participants from engaging in risky behavior.

When developing the fieldwork plan, a number of considerations need to be made:

- Only what is necessary should be collected in the field, all other tasks such as debriefs, timesheets, and assignments should be conducted remotely – as much as possible.
• Interactions between field staff and supervisors or with central administrative staff should be carried out remotely whenever possible. Payment should be sent via electronic transfer if possible.
• Collect information in such a way that enables follow up phone interviews when needed. For example, if fieldwork must stop due to unforeseeable circumstances.
  • Information to be collected include: contact information (phone numbers, best ways to contact the household and the preferred time for a phone interview), preferred language and roster information
  • Distribute materials such as mobile phone and SIM card when needed.
• Update field staff continuously on public health information on COVID-19. Provide a document with field protocols in an easy-to-carry form (a card or brochure).
• **Provide COVID-19 testing.** Provide COVID-19 testing for field staff to reduce the risk of transmission.
• **Provide safe transport.** Transport—to, from, and within the field—needs to be done in a way that reduces the risk of transmission. First, vehicle occupancy should be reduced to allow for social distancing. For example, vehicle capacity could be reduced to 50%. In this case, vehicles that typically accommodate 1 driver and 4 passengers, should accommodate 1 driver and 2 passengers. Second, all passengers, including the driver, should wear masks at all times, and windows should be rolled down whenever practical, in order to provide good ventilation. In addition, drivers should be provided with hand sanitizer, disinfectant and cleaning supplies. They should use the hand sanitizer before driving, and disinfect surfaces in the vehicle, like the steering wheel and door handles.
• **Provide protective equipment for interviewers.** Field staff should be provided with appropriate and sufficient equipment, such as masks, hand sanitizer and disinfectants. Field staff should wear masks at all times, and they should have enough replacements to ensure their proper use.
• **Provide protective equipment for respondents.** To keep both respondents and interviewers safe in a face-to-face interview, interviewers need to be able to offer all respondents a mask. Because household interviews consist of individual interviews with several members, more than one mask is needed per household.
• **Provision of accommodation and meals.** In situations where accommodations and meals are provided to field staff, the arrangement should be made in such a way that social distancing is observed.

**Prepare an extra survey team.** If one or more members of a survey team contracts COVID-19, the whole team will need to quarantine. To continue the work assigned to that team, the survey implementer needs to be in a position to rapidly deploy a replacement team. To support the team, the implementer should also have access to extra equipment and an extra driver and vehicle.
4. Fieldwork

To reduce the risk of COVID transmission, detailed guidance for interviewers should be provided. Note that field protocols should be regularly reviewed and revised based on feedback from the field.

4.1 BEFORE THE INTERVIEW

Before starting work each day, interviewers should:

- **Complete a COVID-19 risk assessment.** This short questionnaire will assess individuals for any symptoms or suspected exposure to COVID-19 (see an example in Annex 3).

- **Temperature checks.** This objective measure will identify fever, a symptom of COVID-19.

- **Conduct a rapid COVID-19 test, if available.**

These measures will help with early detection of COVID-19 in the survey team. If there are any warning signs of the virus, the team will need to stop work, quarantine and/or get tested. This will prevent infection both in the team and in the survey population.

Before approaching the household, interviewers will:

- **Wear a mask.** If an adjustment or replacement is needed, this should be done before approaching the respondents.

- **Sanitize hands and equipment.** Sanitation prevents transmission of the virus from one household to the next. Hand sanitization keeps the interviewers safe.

Upon approaching the household, interviewers will:

- **Offer respondents a mask.** If the respondent does not have a mask, the interviewer will offer one. This will keep both the respondent and the interviewer safe during the interview. If a respondent refuses to wear a mask or follow other safety protocols, do not initiate the interview and record the interview result as “Respondent refused to wear a mask.”

- **Read consent script and explain COVID-19 risks.** During the COVID-19 pandemic, there is an inherent risk associated with participation in a face-to-face survey. When approaching the household, the interviewers should have a standard informed consent script that explains the safety protocol of the interview as well as any risks the interview might bring to respondents (see an example in Annex 4). If respondents refuse to participate, interviewers should record the interview result as “Respondent refused due to COVID-19 risks.”
• **Assess COVID-19 risk of respondent.** To minimize risks, interviewers will screen respondents for symptoms and risks of COVID-19 exposure (Annex 3). If the assessment does not identify any issues, the interview may continue. If the assessment identifies symptoms or risks, the interview with that respondent cannot continue. In that case, the interviewer should provide information on where to seek health care to respondent such as a national COVID hotline and record the interview result as “Respondent failed the risk assessment.”

### 4.2 DURING THE INTERVIEW
- **Wear a mask.** To protect both respondents and themselves, interviewers should wear a mask throughout the interview. If the interviewer needs to change or adjust their mask, they will excuse themselves and find a safe spot, distant from others, to perform the necessary changes.
- **Respect social distancing.** To limit the risk of transmission, interviewers will conduct the interview in a way that respects social distancing protocols. This means that there must be at least 1.5 meters between the respondent and the interviewer, and any physical contact should be avoided, including handshakes.
- **Prioritize outdoor settings.** To be as safe as possible, interviewers should attempt, wherever possible, to conduct interviews in an open, well-ventilated space. Ideally, this would be outdoors. A back-up plan should be in place for cold or inclement weather.
- **Protocols for interviewing multiple members.** Protocols should be available on how to interview multiple members of the same household, if the survey requires it.
- **Incentives.** If providing incentives to the respondents, considering using cash transfer/airtime instead of physical gifts to limit contact.
- **Leave phone number.** Contact information from the survey implementer should be provided to all households in case they have any questions or get sick. Respondents will also be notified if the field staff gets sick.

### 4.3 AFTER THE INTERVIEW
At the close of each interview, the interviewer should:
- **Sanitize hands**
- **Sanitize equipment**

### 4.4 TRANSPORTATION TO AND FROM THE FIELD
Guidance should be provided on protective measures to take when traveling to and from the field including means of transportation, accommodations (if far from interviewers’ residences), and ways to put on and take off PPE. One should avoid rush hour if he or she is using public transportations. If the survey provides vehicles to transport field staff, the numbers of vehicles should be increased to reduce the number of passengers in each vehicle (at most, 50 per cent capacity), and the windows should be kept open at all times.
To ensure safe transport to and from the field, teams must observe the following protocols:

- **Vehicles should operate at reduced capacity.** For example, vehicles that typically accommodate 1 driver and 4 passengers should be reduced to 1 driver and 2 passengers.

- **All vehicle occupants must wear masks.** While in the vehicle, the driver and all passengers must wear a mask at all times. In addition, it is strongly advised that, when practical, vehicles should drive with their windows down, in order to promote proper ventilation.

- **Drivers should observe safety protocols.** Drivers should be subject to the same safety protocols as interviewers: mask wearing, hand sanitization, equipment sanitization, and social distancing.

- **Drivers should sanitize vehicles.** Drivers should sanitize the vehicle daily or at each stop, whichever is more frequent. Sanitization will consist of, at a minimum, sanitizing the steering wheel, door handles, and surfaces that passengers may touch (e.g., window controls).
5. Post fieldwork

Immediately after fieldwork, all equipment must be safely returned to the survey implementer. Before doing so, survey teams must:

- **Sanitize equipment.** Before equipment is transferred from field teams to the survey implementers, all pieces of equipment must be sanitized in the same way they were in the field. This precaution is meant to prevent transmission through touching infected surfaces.
- **Schedule equipment handover.** To limit the number of people in the survey implementer’s office, each team or their designated representative (e.g., team leader) should schedule a date and time for returning all survey equipment. No entry will be granted outside of this window.
- **Observe safety protocols during handover.** During the handover, each team’s designated representative must observe all the relevant safety protocols in the field. This includes wearing a mask, sanitizing hands, and observing social distancing.

For up to two weeks after the end of fieldwork, the survey implementer should monitor the health status of all field staff.\(^1\) If a case of COVID-19 is detected, then the survey implementer should conduct contact tracing and inform all relevant parties. This includes both interviewers on the same team and survey respondents that may have been in contact with the infected person to be tested early. Survey respondents who have had contact with field staff with COVID-19 symptoms should be informed and referred to health institutions for close monitoring.

Methodological considerations outlined above will certainly impact on the remaining steps of the entire process, including data processing, analysis, disseminate, archiving and evaluation. Dissemination of data and metadata should highlight the differences in methodology and how that impact on data quality and comparability.

\(^1\) [https://www.who.int/health-topics/coronavirus#tab=tab_3](https://www.who.int/health-topics/coronavirus#tab=tab_3)
ANNEX 1
Checklist for planning and carrying out household surveys under COVID-19

The checklist is created to facilitate the planning and organization of household surveys. More detailed explanation of each item is available in the text in its corresponding section.

1. General principles
   • Minimizing the risk of COVID-19 transmission among household survey field staff and survey respondents
   • Limiting the field data collection activity to the minimum that is necessary
   • Ensuring high quality and timely data are available for policymaking at the national and local level.

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<th>Phase</th>
<th>Sub-phase</th>
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<tbody>
<tr>
<td></td>
<td>2.1. Setting/ Revisiting survey objectives</td>
<td>Develop/revise survey objectives with all stakeholders</td>
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<td>Prioritization of modules/questions to be included</td>
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<td>2.2. Assessing COVID-19 situation</td>
<td>Gather data on government restrictions, number of cases, overall transmission rate, transmission hot spots</td>
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<td>Assess whether face-to-face interview is plausible at the national, regional and local level</td>
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<td>Develop safety protocols to minimize the risk of COVID-19 transmission</td>
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<td>Assess the need for personal protective equipment</td>
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<td>2. Planning data collection</td>
<td>2.3. Building the project team</td>
<td>Involve health authorities and experts in the survey planning team</td>
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<td>2.4. Budgeting</td>
<td>Budget for COVID-19-related additional costs: personnel, transportation, equipment</td>
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<td>Budget for additional cost in case field operation must stop and restart</td>
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<td>2.5. Choosing data collection mode</td>
<td>Is it safe to resume face-to-face interviews?</td>
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<td>Is the infrastructure to carry out surveys through telephone (CATI) and internet (CAWI) available and with wide coverage?</td>
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<td>Make decision on mode of interview: face-to-face, phone, web or mix-mode</td>
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<td>2.6. Designing questionnaire</td>
<td>Design the questionnaire to fit the data collection mode</td>
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<td>Reassess inclusion of questions that require extensive physical interactions such as anthropometric</td>
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<td>Reassess questionnaire to reduce the length, limit interview time, and reduce number of visits</td>
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<td>Consider including questions related to COVID-19 if the information is not readily available</td>
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<td></td>
<td>3.1. Recruiting field staff</td>
<td>Check national/local regulations on size of small group gathering and plan accordingly when hiring field staff</td>
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<td>Recruit enough reserve staff to prepare for COVID-19 related absences</td>
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<td>Hire field staff locally, when possible, to minimize the movement of interviewers</td>
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<td>3.2. Organizing field staff</td>
<td>Structure field staff into smaller groups and limit contact between groups</td>
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<td>Collect phone numbers from all field staff for contact tracing – ensure all field staff have a mobile phone and SIM card and provide, if not available. If government supported contact tracing apps are available, ensure installation on mobile phone for all field staff.</td>
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<tr>
<td>3. Field organization</td>
<td>3.3. Advocacy and communication</td>
<td>Establish communication channels between field staff and survey management (headquarter) staff to respond in real time to any questions</td>
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<td>Establish procedures on how to monitor compliance with safety protocols in the field</td>
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<td>Set protocols on income protection and paid sick leave for suspected cases of COVID-19 among field staff</td>
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<td>Decide on type and quantity of PPE, and how and when it will be distributed</td>
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<td>3.4. Survey materials and equipment</td>
<td>Ensure that the advocacy and sensitization materials include COVID-19 elements</td>
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<td>Communicate in advance (radio, TV, SMS or telephone) on survey objective(s), survey plan, safety protocol, requirements for the household</td>
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<td>Check procurement timeline for equipment when planning fieldwork</td>
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<td>Wash hands before and after handling any distributed materials</td>
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<td>Date the packaged materials and process them in chronological order</td>
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<td>3.5. Training field staff</td>
<td>Conduct remote training if possible</td>
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<td>If in-person training offered, limit the number of participants, provide PPE, soap, clean water, sanitizer and disinfectant, and follow a fully-developed protocol</td>
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<td>Select appropriate venue that complies with social distance measures</td>
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<td>Provide additional training on how to screen respondents who may be at risk for COVID-19</td>
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<td>Provide additional training on COVID-19 related protocols to reduce the risk of transmission</td>
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<td>Make training materials available in easy-to-carry pamphlet to be carried at all time</td>
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<tr>
<td>3. Field organization</td>
<td>3.6. Making fieldwork plan</td>
<td>Collect the minimum information needed in the field and complete other processes (debriefs, timesheets and assignments) remotely</td>
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<td>Collect contact information, preferred time for interview and language to prepare for possible future remote data collection</td>
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<td>Distribute materials such as mobile phone and SIM card for future remote data collection</td>
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<td>Prepare document with field protocols in an easy-to-carry form for field staff</td>
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<td>Provide COVID-19 testing, when available</td>
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<td>Provide safe transport to, from, and within the field for all field staff</td>
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<td>Provide protective equipment for interviewers and respondents</td>
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<td>Prepare extra survey team</td>
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<td>4. Fieldwork</td>
<td>4.1. Before the interview</td>
<td>Assess the health status of field staff by (a) requesting a mandatory COVID-19 risk assessment survey, (b) conducting temperature checks before the dispatch to the field; and/or (c) carrying out a rapid COVID-19 test if available.</td>
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<td>If any staff is sick, he/she along with the interview group should follow the country’s health quarantine protocol</td>
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<td>Read out to respondents the consent script that reflects any COVID-19 risks of participating in a face-to-face interview</td>
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<td>If the respondent refuses to participate, interviewers should record the interview result as “Respondent refused due to COVID-19 risks”</td>
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<td>Wear a mask, wash and sanitize hands and the interview equipment</td>
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<td>Offer mask and sanitizer to respondents if not available in the household</td>
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<td>If the respondent refuses to wear a mask, do not initiate the interview and record the interview result as “Respondent refused to wear a mask”</td>
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<td>Screen respondents for symptoms and risks of COVID-19 exposure through a risk assessment</td>
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<td>If the respondent fails the assessment, do not initiate the interview and record the interview result as “Respondent failed the risk assessment”</td>
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<td>4.2. During the interview</td>
<td>Wear a mask at all times when interviewing</td>
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<td>Maintain strict social distancing and avoid handshake and body contact</td>
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<td>Follow protocols for interview location, prioritize outdoor settings</td>
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<td>Make protocols for interviewing multiple members while maintaining social distancing requirement</td>
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<td>Offer incentives through cash transfer or phone credits, rather than physical gifts</td>
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<td>Provide respondent with contact information from the survey implementer in case they have any questions or get sick.</td>
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<td>4.3. After the interview</td>
<td>Wash and/or sanitize hands after the interview and disinfect all equipment</td>
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<td>4.4. Transportation to and from the field</td>
<td>Follow strict protocols when travelling to/from the field</td>
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<td>Limit passenger capacity of vehicles, keep the windows open when practical, all vehicle occupants must wear a mask</td>
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<td>Drivers should observe safety protocols and sanitize the vehicles</td>
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<td>5. Post fieldwork</td>
<td>Monitor the health status of field staff for up to 2 weeks after completing the data collection</td>
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<td>Carry out contact tracing and inform field staff who had close contact with the staff with COVID-19 following the country's health quarantine protocol</td>
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<td>Inform the households who have had contact with field staff with COVID-19 symptoms and refer them to health institutions for close monitoring</td>
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ANNEX 2
Etiquette for organizing and attending remote training sessions

FOR ORGANIZERS

- Keep participants number manageable - complex topics with ambitious agendas have a better chance of success with fewer participants
- Organise 2-4 hours of training sessions. More participants require longer time for the overall training to allow sufficient participation.
- Keep in mind different time zones where participants are and plan accordingly
- Have a clear objective for the training workshop; and use micro-activities (5-10 minutes each) and exercises (no more than 30 minutes each) to engage the participants while achieving the objective
- Design the training sessions to include not only formal trainings but also side activities and networking opportunities
- Keep the participants stay engaged by
  - Whenever possible, trainers should keep the camera on throughout the training (Note: for countries that have slower internet speed, ask the participants to turn off the camera)
  - Keeping introduction and statement short from the moderator/trainer and complement with tasks or problems to solve
  - Using more breakout rooms to encourage small group discussion
  - Calling on people and raising direct questions towards specific people
  - Breaking a larger conversation into smaller subconversations, organized around specific questions
  - Engaging participants beyond audio and video such as screensharing and collaborative workspaces (e.g., Mural) to work on items together
  - Assigning roles to each participant to keep everyone engaged
- Give participants a break every 1 to 1.5 hours.

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22 TANDEMIC, Mastering digital facilitation, a cheat sheet; Tippin, Kalbach and Chin, The Definitive Guide To Facilitating Remote Workshops.
FOR PARTICIPANTS

- Join the call on time
- Unless you are talking, your microphone MUST always be on mute
- Keep camera on unless internet speed is slow.
- If you have any questions, please type them up and post them in the group chat. We will address them one-by-one at the end of each section and may come back to you for clarification, but this will help us manage things, so we don't have multiple people trying to talk at the same time.
- Try to join the call from a sterile environment without too much background noise and distraction if you can. I know since everyone is connecting from home the options are limited, but anything you can do to limit noise and distraction, please do.
ANNEX 3
COVID-19 Risk Assessment Questionnaire

The purpose of this Assessment is to assess whether the survey field staff and respondents might be at risk for COVID-19. It is NOT intended for the diagnosis or treatment of diseases such as COVID-19. If the individual responding to the questionnaire has questions or concerns about the symptoms, he or she is experiencing their medical provider should be contacted.

Personally-identifiable information collected from the assessment will not be used, except when conducting case investigations for confirmed COVID-19 cases. For questions related to COVID-19, the public can contact the national or local health authority.

QUESTIONS FOR RESPONDENTS

1. Have you experienced a fever of 100.4F (38C) or greater, a new cough, new loss of taste or smell, or a shortness of breath within the past 14 days?
   - Yes, stop and do not proceed with interview
   - No

2. In the past 14 days, have you been tested positive for COVID-19?
   - Yes, stop and do not proceed with interview
   - No

3. To the best of your knowledge, in the past 14 days, have you been in close contact (within 6 feet (1.5 meter) or less for at least 10 minutes) with anyone while they had COVID-19?
   - Yes, stop and do not proceed with interview
   - No

4. In the past 14 days, have you traveled to a place that is having widespread community transmission of COVID-19?
   - Yes, stop and do not proceed with interview
   - No
If answering **No** to all four questions above, proceed with the interview

**QUESTIONS FOR FIELD STAFF – TO BE SUBMITTED TO SUPERVISOR EVERY DAY (OR A PERIOD OF TIME THAT IS TO BE DEFINED BY THE HEALTH AUTHORITY OF THE COUNTRY)**

1. Have you experienced a fever of 100.4F (38C) or greater, a new cough, new loss of taste or smell, or a shortness of breath within the past 14 days?
   - Yes, go to Q5
   - No

2. In the past 14 days, have you been tested positive for COVID-19?
   - Yes, go to Q5
   - No

3. To the best of your knowledge, in the past 14 days, have you been in close contact (within 6 feet (1.5 meter) or less for at least 10 minutes) with anyone while they had COVID-19?
   - Yes, go to Q5
   - No

4. In the past 14 days, have you traveled to a place that is having widespread community transmission of COVID-19?
   - Yes, go to Q5
   - No, end of the Assessment
ANNEX 4
Informed consent (example)

The [name of NSO] is conducting a survey of households on [title of the survey] across [country]. The findings from the survey will provide important information to the Government for developing policies and programmes to [objective]. Your household was selected as one of those to which the survey questions will be asked. You were not selected for any specific reason. Rather, your household was selected randomly from a list of all the households in this village/city.

All the information that your household provides is strictly confidential. It will not be shared with any other government agency, and it will only be used for statistical purposes by the [NSO] or under its supervision. Please spare some time to answer the questions.

Under the COVID-19 pandemic, our office is closely monitoring the situation and have put in place preventative measures aimed to reduce the spread of COVID-19. All field staff are required to wear masks throughout the interview, sanitize their hands and equipment before the interview and check their temperature in the morning [add other measures here]. The interview will only take place outdoors [revise accordingly if different protocol is in place] with field staff maintaining a distance of 6 feet (or 1.5 meters) from all members of your household. However, given the nature of the virus, there is an inherent risk of becoming infected with COVID-19 by proceeding with this interview. Should any of the field staff that work with you today become sick from COVID-19, we will inform you as soon as possible.

We thank you in advance for your time.

Do you consent to take part in the survey?