BACKGROUND

This brief presents findings of the second round of the Malawi High-Frequency Phone Survey on COVID-19 (HFPS COVID-19) conducted in July 2020. In May 2020, the National Statistical Office (NSO), with support from the World Bank, launched the HFPS COVID-19; a monthly survey of a nationally representative sample of households previously interviewed as part of the Malawi Integrated Household Panel Survey to monitor the economic impact of the pandemic and other shocks. The first round (baseline) of the survey was conducted in May/June 2020 and the second round was conducted between July 2-16, 2020. Of the 2,337 households targeted, 1,756 households were interviewed in round 1 and of those, 1,646 were interviewed in Round 2 representing a 95% response rate between rounds.

KNOWLEDGE, BEHAVIOR AND CONCERNS OF COVID-19 TRANSMISSION

Similar to the first round of data collection, 93% of respondents are very worried or somewhat worried about themselves or their immediate family member(s) becoming seriously ill from COVID-19 (94% in wave 1). 96% of respondents consider this crisis as a substantial or moderate threat to their household’s finance (95% in Round 1).

Although concerns remained high, as seen in Figure 1 the survey revealed that there were significant changes in the prevalence of safe practices over time.

In the second round of the survey 66% of all respondents reported having at least one false belief about COVID-19 and this was consistent across urban and rural areas at 67 and 65%, respectively. There was some variation across educational attainment with 67% of respondents with no formal education reported at least 1 false belief, however even among respondents that completed secondary education more than 50% held a false belief. The most commonly reported belief was that lemon and alcohol can be used as sanitizers against COVID-19. 25% of respondents believe COVID-19 is a common flu and 25% believe that it cannot survive in warm weather.

There was an increase in the proportion of people who avoided groups of more than 10 people (from 17% in May/June to 22% in July), and the proportion of people who avoided physical greetings (from 68% in May/June to 71% in July).

Round 2 also asked respondents the frequency of washing their hands and wearing a mask. Although 61% of respondents reported washing their hands with soap and water all of the time, only 19% of respondents reported wearing a mask all of the time, and 61% wear a mask none of the time.
ACCESS TO BASIC NEEDS

Although the percentage of households with insufficient water to wash hands or insufficient drinking water is 3% or less across wealth quintiles, 45% of households surveyed in Round 2 reported having insufficient soap to wash hands. This was highest for the poorest quintile at 61% of households but even for the richest wealth quintile approximately one quarter of households did not have enough soap. Among households without enough soap to wash their hands, the two most commonly reported reasons were lack of access to cash and cannot pay with credit (52%) and cannot afford (52%).

FOOD SECURITY

In the 7 days leading up to the Round 2 interview, 66% of households reported at least one adult in the household skipping a meal while 52% of households ran out of food and 23% reported at least one adult not eating for an entire day.

The prevalence of (i) severe and (ii) moderate or severe food insecurity, based on the Food Insecurity Experience Scale, among adult population is remained high throughout Malawi across survey rounds. The prevalence of food insecurity is higher in rural areas than urban, and higher in the South than the other regions though the North saw the most significant drop in severe food insecurity across survey rounds.

13% of the households needed to buy maize but could not the last 7 days prior to the interview during both the first and second rounds of the survey.

The proportion of households that needed to buy medicine but could not was about the same across the two rounds but the percentage of households that did not need medicine at all was much higher.

It can also be noted that the proportion of households that sought medical services but reported not to access it was lower (7%) in the second round of the survey than 10% in the first round.
EMPLOYMENT

The proportion of respondents that stopped working between mid-March and May/June was 5% while the proportion that stopped working between May/June and July was 14%. The proportion of respondents who were working at the baseline and at the time the survey was conducted in July was 49% among the poorest and 65% among the richest. The proportion of respondents that were still not working since the outbreak was 5% among the poorest and 9% among the richest. Of the 14% that stopped working since the baseline survey in May/June, 36% were because it was no longer farming season and 10% because they are seasonal workers. 10% were because their business or office closed due to COVID-19 legal restrictions.

Figure 8. Work status at time of interview

<table>
<thead>
<tr>
<th>% of respondents</th>
<th>Q1_Poorest</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Q5_Richest</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working: also working at baseline</td>
<td>55</td>
<td>47</td>
<td>46</td>
<td>60</td>
<td>59</td>
</tr>
<tr>
<td>Working: not working at baseline nor before outbreak</td>
<td>9</td>
<td>15</td>
<td>17</td>
<td>14</td>
<td>8</td>
</tr>
<tr>
<td>Stopped since outbreak</td>
<td>14</td>
<td>3</td>
<td>2</td>
<td>6</td>
<td>2</td>
</tr>
</tbody>
</table>

NON-FARM HOUSEHOLD BUSINESSES

34% of households interviewed in Round 2 reported operating at least 1 non-farm households business. 28% of Non Farm Enterprises (NFE) that closed permanently were because they were ill/quarantined due to COVID-19, 26% because they couldn’t travel/transport goods for trade, and 9% because the usual place of business closed due to COVID-19 legal restrictions. 17% of NFEs that closed temporarily were because they were ill/quarantined due to COVID-19, 32% because they couldn’t travel/transport goods for trade, and 14% because the usual place of business closed due to COVID-19 legal restrictions.

Due to COVID-19, 62% of households with NFEs reported difficulty raising money for the business and 58% had difficulty selling goods or services to customers.

Of the 32% of households with an NFE that reported they have changed or plan to change the way business is conducted, 38% will require customers to maintain a distance between each other and 24% will require masks.
SAFETY NETS, SHOCKS, AND COPING MECHANISMS

In Round 2, 83% of households experienced at least 1 shock since mid-March with 48% of households experiencing 2 or more shocks. The most commonly reported shock experienced was a fall in the price of farming/business outputs (66% of households) followed by an increase in the price of farming/business inputs (30%) and disruption of farming, livestock, and/or fishing activities (29%). The difference between the incidence of urban and rural households reporting different shocks was quite significant for the majority of shocks reported with only non-farm business closure having a similar effect on both areas.

Of the 83% of households that experienced a shock, 78% reported doing nothing when asked how they coped with the shock. 20% of households with a shock reported relying on savings as a coping mechanism after experiencing at least one of the shocks listed in Figure 11. 10% of households with a shock reduced their food consumption, and 6% engaged in additional income-generating activity. The remainder of the coping mechanisms were reported by 5% or less of households experiencing a shock.

Among the surveyed households, the percentage receiving any type of social safety net was very low with less than 5% receiving non-food or direct cash transfer and only 1% receiving food transfer.

Among other sources of income, 13% of households received remittances from within the country, 9% reported income from properties investments, and/or savings, and 8% reported assistance from other individuals.

Data Notes: Malawi High-Frequency Phone Survey COVID-19 (HFPS COVID-19) is implemented by the National Statistical Office (NSO) on a monthly basis during the period of May 2020 and June 2021. The survey is part of a World Bank-supported global effort to support countries in their data collection efforts to monitor the impacts of COVID-19. The financing for data collection and technical assistance in support of the Malawi HFPS COVID-19 is provided by the United States Agency for International Development (USAID) and the World Bank. The technical assistance to the Malawi HFPS COVID-19 is provided by a World Bank team composed of staff from the Development Data Group—Living Standards Measurement Study (LSMS) program and the Poverty and Equity Global Practice. In Round 1, 2,337 households that had been previously interviewed during the 2019 round of the Integrated Household Panel Survey (IHPS) were contacted, and 1,729 households were successfully interviewed, with the goal of re-interviewing them in the subsequent monthly HFPS COVID-19 rounds. 1,846 of these households were successfully interviewed in Round 2. The 2019 IHPS data are representative at the national- and urban/rural-levels and phone survey weights were calculated (i) to counteract selection bias associated with not being able to call IHPS households without phone numbers, and (ii) to mitigate against non-response bias associated with not being able to interview all target IHPS households with phone numbers. For further details on the data, please visit https://www.worldbank.org/lsms-covid19 and email enquiries@statistics.gov.mw.