
MALAWI

COVID-19 IMPACT MONITORING REPORT HIGH-FREQUENCY PHONE SURVEY

**SURVEY REPORT FOR THE PERIOD
MAY TO SEPTEMBER 2020**

January 2021



Contents

1.0 BACKGROUND	8
2.0 METADATA.....	10
Sample Composition	10
Sample Composition	11
Respondents characteristics	11
Respondent relationship to head of household.....	12
Respondent education	13
Respondents over time.....	14
Dependency Ratio	15
3.0 KNOWLEDGE OF COVID-19 TRANSMISSION	16
3.1 Knowledge about COVID-19 Transmission.....	16
3.2 Government's action to curb further spread of COVID-19	17
3.3 Satisfaction with Government action.....	17
3.4 Prevalence of safe practices	18
3.5 Degree of worry about self or immediate family member becoming ill of COVID-19	19
3.6 Perceived threat to household's finances	20
3.7 Reported symptoms of COVID-19.....	21
3.8 Use of Government-provided Toll-Free Numbers	23
3.9 Safe Practices – Use of Face Masks	23
4.0 ACCESS TO SERVICES	26
4.1 Basic needs.....	26
4.2 Access to services since date of outbreak.....	27
4.4 Reasons households could not access pre-natal or post-natal services.....	28
4.5 Reasons households could not access check-up or Preventative care visit	29
4.5 Access to water.....	30
4.6 COVID-19 guidelines - effects on education	33
4.7 Access to Credit.....	36
5.0 EMPLOYMENT.....	39
5.1 Employment status last week	39
5.2 Main industry of those respondents working.....	39
5.3 Job Stability.....	40

5.4 Family businesses	44
6.0 Agricultural Activities.....	47
7.0 Shocks and Safety Nets	50
7.1 Shocks	50
7.2 Coping mechanisms	52
7.3 Safety Nets	52

List of Tables

Table 0-1 : Topics Covered during each survey round	9
Table 2-0-1 Sample Composition	10
Table 2-0-2: Sample composition.....	11
Table 2-0-3 Respondent relationship to head	12
Table 2-0-4 Respondent education.....	13
Table 3- 1 COVID-19 outbreak - awareness & government action	18
Table 3- 2 Prevalence of safe practices over time	18
Table 3- 3 Degree of perception of threat to household's finance caused by COVID-19	20
Table 3- 5 Prevalence of Safe Practices (Wearing a Mask when in Public), Last 7 days..	23
Table 3- 7 Reasons Households Could Not Access pre-natal or post-natal care (% of HHs that could not access).....	29
Table 4 - 1 Access to basic needs, past 7 days	26
Table 4 - 2 Reasons households could not access check-up or preventive care visit (% of HHs that could not access).....	30
Table 4 - 3. Reasons Households Could Not Access Water to Wash their Hands (% of HHs that could not access).....	32
Table 4 - 4 Reasons Households Could Not Access to Water to Drink (% of HHs that could not access)	32
Table 4 - 5 Sources of Credit Since the August (% of HHs that got credit)	36
Table 4 - 6 Reasons for obtaining a loan.....	37
Table 4 - 7 Expected Repayment Period of Loans Taken since August.....	38
Table 5 - 1 Respondents working status last week (any work for pay or any income generating activities).....	39
Table 5 - 2 Percentage of respondents that stopped working and relation to COVID-19 outbreak.....	40
Table 5 - 3 Type of work for those working.....	41
Table 5 - 4 Changes in working condition in wage work	42
Table 5 - 5 Wage Workers that worked last week, RESPONDENTS ONLY	42
Table 5 - 6 Family businesses by sector.....	44
Table 5 - 7 Challenges NFE has faced due to COVID-19.....	45
Table 5 - 8 Types of changes doing/planned for the Non-Farm Enterprise during 3 rd Round (August)	45
Table 7 - 1 Types of shocks, since last call (R2) & (R3)	51
Table 7 - 2 Safety Nets since mid-March(R1) last call (R2) & (R3)	53
Table 7 - 3 Source of Food Assistance since mid-March(R1) last call (R2) & (R3)	54

List of figures

Figure 2 - 1: Dependency ratio by IHPS PCA Index based Wealth Quintiles	15
Figure 3 - 1 Knowledge of measures that minimize the risk of contracting COVID-19 (% of HH).....	16
Figure 3 - 2 Knowledge of government actions to curb the spread of COVID-19 (% of HH).....	17
Figure 3 - 3 Degree of worry about self/immediate family becoming seriously ill from COVID-19 (% of respondents)	20
Figure 3 - 4: Incidence of households with at least a member that experienced COVID-19 Symptoms	22
Figure 3 - 5 Use of Toll-Free Lines After Experiencing COVID-19 Symptoms (% of Respondents who experienced Symptoms).....	23
Figure 4 - 1 Access to pre-natal or post-natal care since date of outbreak (round 3) and since last call (round 4)	27
Figure 4 - 2 Access to check-up or preventive care visit since last call.....	28
Figure 4 - 3 Access to water for washing hands (% of households)	31
Figure 4 - 4 Access to sufficient drinking water	31
Figure 4 - 5 Households with children aged 6-18 and those attending school pre closure	34
Figure 4 - 6 Children to return to school in September	34
Figure 4 - 7 Children returning to school by phase, % of households	35
Figure 5 - 1 Main industry of those respondents working, (% of respondents for selected sectors).....	40
Figure 5 - 2 Changes in job	40
Figure 5 - 3 Change in hours worked last week	43
Figure 5 - 4 Family businesses, main reason for closure.....	44
Figure 6. 1 Prevalence of Livestock and Dry/Dimba Season Crop Farming Households, by region	48
Figure 6. 2 Share of Livestock keeping households affected by COVID 19 in May/June and September by region and location.....	48
Figure 6. 3 Distribution of How COVID-19 affected Livestock keeping households in May/June and September by region and location.....	49
Figure 7 - 1a: Number of shocks per household since mid-March	50
Figure 7 - 2b: Number of Shocks since July (Round 2).....	50
Figure 7 - 3 Coping mechanisms for shocks.....	52

NUMERICAL HIGHLIGHTS

Knowledge and behavior

- ✓ 99% of respondents consider washing hands with soap as a measure to minimize risk of contracting COVID-19.
- ✓ 100% of respondents have heard of COVID-19.
- ✓ 57% of respondents are aware of government's advice to avoid gatherings.
- ✓ 79% of respondents were satisfied with government's action on COVID-19.
- ✓ 88% is worried about themselves or any immediate household member becoming ill of COVID-19 but in September, this share declined to 73%.
- ✓ 90% consider COVID-19 as a substantial threat to their household's finances.
- ✓ 16% experienced coughing in September, a decline from 21% experienced in August, and a decline from 29% experienced in July.
- ✓ 55% of respondents did not experience any COVID-19 related symptoms in July, 68% in August, and 74% in September.
- ✓ 2% of respondents who reportedly experienced some COVID-19 related symptoms in August (third round) called the toll-free number.
- ✓ 19% used face masks all of the time in public in July, 56% in August, 47% in September.

Access to services

- ✓ 55% of households needed to buy maize in May/June, of these households, 23% could not buy the maize.
- ✓ 46% of households needed to buy maize in July, of these households 30% could not buy the maize.
- ✓ 36% of households with child-bearing age women needed to access pre-natal or post-natal care in August and 26% in September.
- ✓ 7% of women who needed pre-natal or post-natal care could not access in August while 4% could not access in September.
- ✓ 40% of women who could not access pre-natal or post-natal care could not do so because of unavailable medical personnel.
- ✓ 2% of households did not have access to sufficient drinking water in August and 4% in September.
- ✓ 96% of households with children ages 6-18 were attending school pre-closure/pre-COVID-19.
- ✓ 9% of households with children attending school pre-closure would not send them back to school in September.
- ✓ 47% of households took a loan to buy food.

Employment

- ✓ 50% of respondents are working in Agriculture sector as of September.
- ✓ 16% of respondents changed jobs in July, 23% in August and 20% in September.
- ✓ 56% of respondents stopped working in May/June potentially on issues related to COVID-19, 12% in July and August, and 26% in September.
- ✓ 36% of wage workers worked less in July, 38% in August, and 28% in September.
- ✓ 20% of non-farm enterprises have changed or plan to change how business is conducted.

Agricultural activities

- ✓ 31% of households practice both crop and livestock farming.

Shocks and Coping Strategies

- ✓ 83% of households experienced at least a shock between mid-March and May/June while 76% experienced the same between May/June and July.
- ✓ 29% of households that received food assistance in May/June received from NGOs, 46% in July, and 18% in August.

1.0 BACKGROUND

Although Malawi had not yet registered any COVID-19 case, the country was declared a state of disaster on March 20, 2020. All schools were closed on March 23, government offices were restricted to essential duties only, public gatherings were restricted to 50 people, and although not very effective, local councils also announced measures such as closure of bars, banning weddings and other public gatherings. On April 2, the first COVID-19 case was registered in Malawi. On April 14, the government announced a 21-day lockdown to prevent further spread of the virus effective from April 18 till May 9th. On April 16 market vendors took to the street to protest the lockdown vowing to disregard it as the consequences of the lockdown would be devastating on their livelihood. Meanwhile, the Human Rights Defenders Coalition (HRDC) and other concerned citizens also challenged the lockdown at the High Court. On April 17, the High Court judge blocked the government from implementing the proposed nationwide lockdown for at least seven days. Following fresh presidential elections on June 23 that ushered in a new government, on July 10, another set of new COVID-19 guidelines was issued through the Ministry of Health and as previous guidelines. As of October 22, Malawi had a total of 5874 confirmed cases and 183 deaths.

Since August, the rate of confirmed cases has dropped prompting government to relax some of its guidelines. A phased reopening of schools was proposed effective September 7 for those sitting for final examinations and final year college students. Furthermore, the government has increased the number of people in public gatherings from 50 to 100 which include churches, mosques and workplaces.

Overtime, there is a need to understand the socio-economic impact of the pandemic on the people of Malawi. Since government-imposed Covid-19 guidelines which among others include social distancing are increasingly becoming common to fight the spread of the virus, these measures limit the use of traditional face-to-face interviews in population-based surveys to address data needs. Phone surveys, on the other hand, do not require face-to-face interactions and could elicit information from individuals and households rapidly and at low cost. It is against this background that in May 2020, the National Statistics Office (NSO), with support from the World Bank, launched the High-Frequency Phone Survey on COVID-19 (HFPS COVID-19), which tracks the socio-economic impacts of the pandemic on a monthly basis for a period of 12 months. The approach to this survey offers flexibility to alter questionnaire design in response to evolving information needs over the twelve-month period. The survey aimed to recontact the entire sample of households that had been interviewed during the Integrated Household Panel Survey (IHPS) 2019 and that had a phone number for at least

one household member or a reference individual. This report presents results from the first four rounds of the survey. The first round of the survey was conducted during the period of May 26-June 14. The second round was conducted over the period July 1 to 22, the third was from August 12 to 28 while the fourth round was from September 14 to October 2. New questions were added or dropped in each round depending on needs and other developments in the country.

Table 0-1 : Topics Covered during each survey round

Topic	May/June (Round 1)	July (Round 2)	August (Round 3)	September (Round 4)
Household Composition	X	X	X	X
Knowledge and False Beliefs Re: COVID-19	X	X		
Concerns Re: COVID-19 Impacts	X	X*	X	X
COVID-19 Symptoms + Lab Diagnosis	X	X	X	X
Anti-COVID-19 Behavior and Social Distancing	X – basic set	X – basic set	X – basic set + mask	X – basic set + mask
Anti-COVID-19 Behavior and Social Distancing – Intention to Comply w/Gov Regulations			X	
Perceptions Re: Efficacy of Government Actions	X	X		
Access to Financial Services	X			
Access to Water	X – washing hands only	X - washing hands, drinking water	X –washing hands, drinking water	X –washing hands, drinking water
Access to Soap/Cleaning Supplies	X	X		
Access to Staple Foods	X	X		
Health - Access to Medicine and Treatment	X	X	X	
Health – Women’s Pre/post-natal Care			X	X
Health - Vaccination/ Immunization children 0-5				X
Education	X – detailed on pre/post outbreak		X - intention to return to school	X – asked if children return, any safety measures, and satisfaction

Employment of All Respondents	X	X	X	X
Non-Farm Enterprises		X	X	X
Agriculture – Detailed Post Harvest	X			
Agriculture – Dry Season Incidence				X
Agriculture – Crop Sales				X
Other Income			X	X
Income Losses	X	X	X	X
Credit			X	X
Shocks and Coping Strategies		X	X	X
Food Security	X	X	X	
Safety Nets	X	X	X	
Livestock Detailed Module				X
Livestock Sales				X
Livestock Products				X

2.0 METADATA

Sample Composition

In May/June during round 1 of the survey, 2,337 households were targeted for interviews. Of these, 1,729 were successfully interviewed (74%). In July during the second round, the target households were all those who were successfully interviewed in round one and of these, 1,646 were successfully interviewed representing 95% response rate. In August during the third round, the target number of households was 1,722 of which 1,624 were successfully interviewed (94%) while in the fourth round in September, 1,709 households were targeted of which 1,617 households were successfully interviewed (95%).

Table 2-0-1 Sample Composition

(# of Households)										
Sample Size	Total	Sector		Design Strata						Response rate
		Urban	Rural	Urban North	Urban Center	Urban South	Rural North	Rural Center	Rural South	
May/June (Round 1)	2,337	779	1,558	123	390	266	202	658	698	74%
HHs fully interviewed	1,729	617	1,112	107	292	218	149	443	520	
July (Round 2)	1,729	637	1,092	108	304	225	148	431	513	95%
HHs fully interviewed	1,646	613	1,033	103	293	217	141	403	489	
August (Round 3)	1,722	633	1,089	107	301	225	148	431	510	94%
HHs fully interviewed	1,624	596	1,028	103	279	214	142	403	483	
September (Round 4)	1,709	624	1,085	105	297	222	148	428	509	95%
HHs fully interviewed	1,617	597	1,020	102	284	211	141	400	479	

Sample Composition

Of the interviewed households, the weighted average household size is about 5. In terms of sex of household head, about 30% of the interviewed households are female headed. The average age of the household head is 46 years while about 77% of the household heads can read and write in any language.

Based on pre-COVID-19 figures, about 80% of the weighted interviewed households reported to own a mobile phone, about 16% own television, about 8% own a refrigerator, 3% own a car while only 1% reported to own a generator. This composition was also factored in the computation of wealth quintiles.

The weighted distribution of households from the Integrated Household Panel Survey Index Based Wealth Quintiles shows that about 15% of the households are in the lowest quintile (5th), the second quintile has about 18%, the third has about 25% and probably the highest. The fourth quintile has about 23% of the households while nearly one in every five households belong to the highest quintile (5th).

Table 2-0-2: Sample composition

Characteristics	May/June (Round 1)		July (Round 2)		August (Round 3)		September (Round 4)	
	Un weighted	Weighted	Un weighted	Weighted	Un weighted	Weighted	Un weighted	Weighted
<i>IHPS PCA Index Based Wealth Quintiles</i>								
Q1	7	13	8	15	8	15	8	15
Q2	13	18	13	18	13	18	13	19
Q3	21	26	21	25	21	25	21	25
Q4	27	23	27	23	27	23	27	23
Q5	32	20	31	19	31	18	32	19

Respondents characteristics

In this survey, the median age of respondents is 37 and has remained so across the four rounds. Male respondents are slightly older (38 years) compared to their female counterparts (36 years). In May/June, almost 46% of the respondents were of the age group 25-39 years followed by those in the age group 40-49 years 20%. In July, there was a slight decline in respondents of the age group 25-39 years from 46% to 40% and this went further down in August to 39% and back to 40% in September.

In terms of share of respondents by sex, about 40% of respondents are female across all the months. In August, the share was slightly higher at 43%.

Respondent relationship to head of household

Across all the four rounds from May to September, almost 78% of the respondents are household heads. Spouses have been respondents in 15 to 17% of the interviews while children have responded to about 4 to 5% of all the interviews.

Table 2-0-3 Respondent relationship to head

Relationship to HH Head:	Number of respondents			Distribution of respondents			
	Total	Male	Female	Total	Male	Female	
Head	1353	1039	314	78	96	49	May/June (Round 1)
Spouse	290	8	282	17	1	44	
Child (own/step/adopted)	60	23	37	3	2	6	
Other relative	25	11	14	1	1	2	
Not related	1	1		0	0		
Head	1273	975	298	78	94	56	July (Round 2)
Spouse	296	6	290	16	1	37	
Child (own/step/adopted)	48	17	31	4	3	5	
Other relative	28	14	14	2	2	2	
Not related	1	1		0	0		
Head	1207	907	300	76	94	54	August (Round 3)
Spouse	335	7	328	17	1	39	
Child (own/step/adopted)	59	21	38	5	4	5	
Other relative	22	10	12	2	2	2	
Not related	1	1		0	0		
Head	1221	934	287	78	94	54	September (Round 4)
Spouse	308	8	300	15	1	36	
Child (own/step/adopted)	63	24	39	5	3	7	
Other relative	23	9	14	2	2	3	
Not related	1	1		0	0		

In this survey, male respondents are generally the household heads (96%) with a very small share being male child about 2 to 3%. Amongst female respondents, there has been some variation across rounds. During round 1 in May/June, almost half (49%) of the female respondents were household heads while in July, this rose to 56%. In August and September, 54% of the female respondents were household heads. Amongst female respondents, spouses were respondents in 44% of the interviews in May/June, and the share dropped to 37% in July, and rose again to 39% in August, and dropped again to 36% in round 4 in September. Compared to their male counterparts, more female children responded to the interviews across all the four survey rounds.

Respondent education

Of the 1,729 successful interviews in May/June, 1,516 respondents are literate representing 88%. In July, the share of literate respondents rose to 92% but dropped to 83% in August and dropped further to 81% in September. Across all survey rounds, literacy is higher amongst male respondents than their female counterparts.

Table 2-0-4 Respondent education

Education	Number of respondents			Distribution of respondents			
	Total	Male	Female	Total	Male	Female	
Literate (in any language)	1516	987	529	88	91	82	May/June (Round 1)
Level							
No school	94	38	56	6	4	9	
Primary - partial	841	492	349	50	46	55	
Primary - completed	607	417	190	36	39	30	
Tertiary - partial & completed	155	120	35	9	11	6	
Literate (in any language)	1583	995	588	92	97	85	July (Round 2)
Level							
No school	62	17	45	8	3	15	
Primary - partial	526	308	218	44	43	47	
Primary - completed	290	169	121	15	15	15	
Secondary - partial	606	400	206	28	33	21	
Tertiary - partial & completed	161	118	43	4	6	2	
Literate (in any language)	1461	895	566	83	92	72	August (Round 3)
Level							
No school	73	20	53	10	5	16	
Primary - partial	520	289	231	43	41	46	
Primary - completed	288	161	127	15	15	15	
Secondary - partial	590	370	220	28	33	21	
Tertiary - partial & completed	152	106	46	4	6	2	
Literate (in any language)	1403	875	528	81	86	73	September (Round 4)
Level							
No school	64	20	44	9	4	15	
Primary - partial	520	310	210	44	45	43	
Primary - completed	271	156	115	15	14	16	
Secondary - partial	602	383	219	28	31	23	
Tertiary - partial & completed	153	103	50	4	5	3	

In terms of level of education completed, most of the respondents have attended some primary school education but did not complete. In May/June, half of the respondents were in this category, and about 44% in the other three rounds July, August and September. Across sex of respondent, there are more female respondents with no education than male respondents. In May/June, 9% of female respondents compared to 4% of male respondents have no education. In the other three rounds, there is over 10-percentage point gap between male and female respondents with no education. The situation is reversed for those with tertiary education. There are more male respondents with partial or completed tertiary education compared to female respondents.

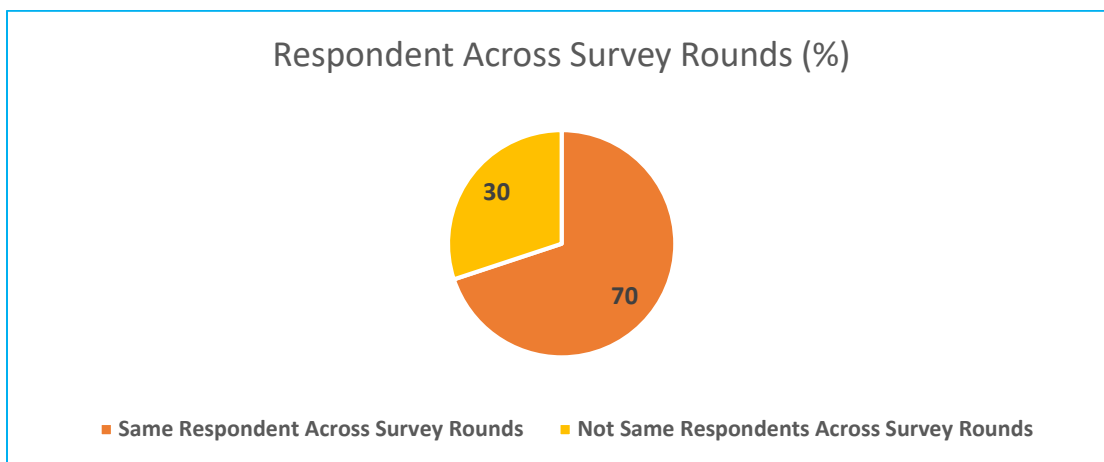
Respondents over time

This survey aims to interview the same household once in a month for a period of twelve-months (twelve surveys rounds). About 90% of the targeted households have been interviewed in all the four survey rounds. Less than 1% of the households were interviewed in round 4 (September) and round 1 (May/June). About 2% were interviewed in rounds 1 (May/June), 3 (August) and 4 (September) but not in round 2 (July). About 2% of households were interviewed in rounds 1 (May/June), 2 (July) and 4 (September) but not in round 3 (August). About 2% were only interviewed in round 1 (May/June) of the survey and not in the other three survey rounds. 2% have been interviewed in the first three survey rounds (May-August) but not in the fourth round (September). Less than 1% of households have been interviewed in rounds 1 (May/June) and 3 (August) but not in rounds 2 (July) and 4 (September). About 2% of the households have been interviewed in the first 2 rounds (May-July) but not in the last two rounds (August-September).

Table 2 - 1 Proportion of Households Repeatedly Interviews Across Survey Rounds

Survey rounds	# of Households	% of Households
R4+ R3+ R2+ R1+	1550	90
R4+ R3- R2- R1+	4	0
R4+ R3+ R2- R1+	33	2
R4+ R3- R2+ R1+	31	2
R4- R3- R2- R1+	41	2
R4- R3+ R2+ R1+	36	2
R4- R3+ R2- R1+	5	0
R4- R3- R2+ R1+	29	2
Malawi	1729	100

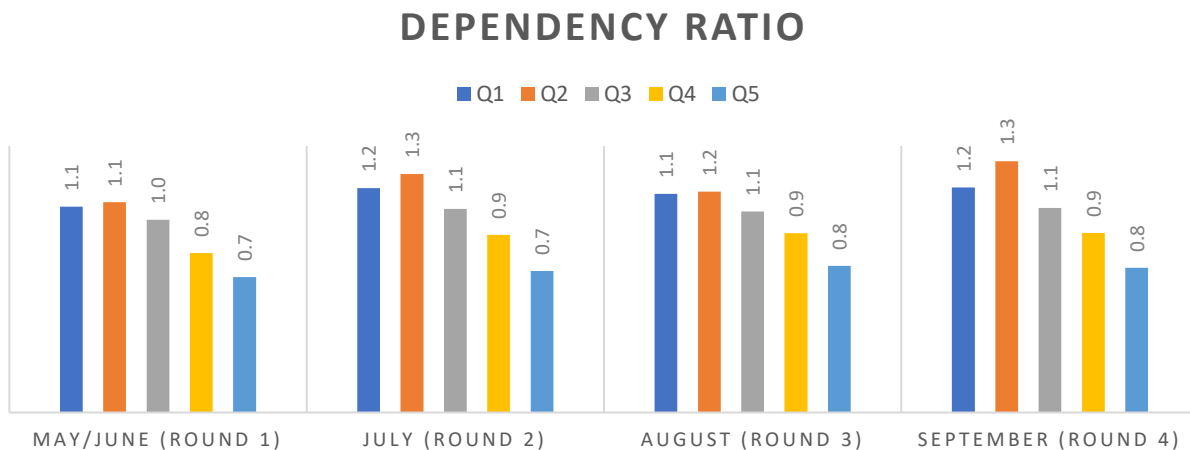
Figure 2 - 1 Respondents Across All the Four Survey Rounds



Of the households that have been interviewed in all the four survey rounds, about 70% of the interviews were responded to by the same respondent. The remaining 30% had different respondents across survey rounds.

Dependency Ratio

Figure 2 - 2: Dependency ratio by IHPS PCA Index based Wealth Quintiles



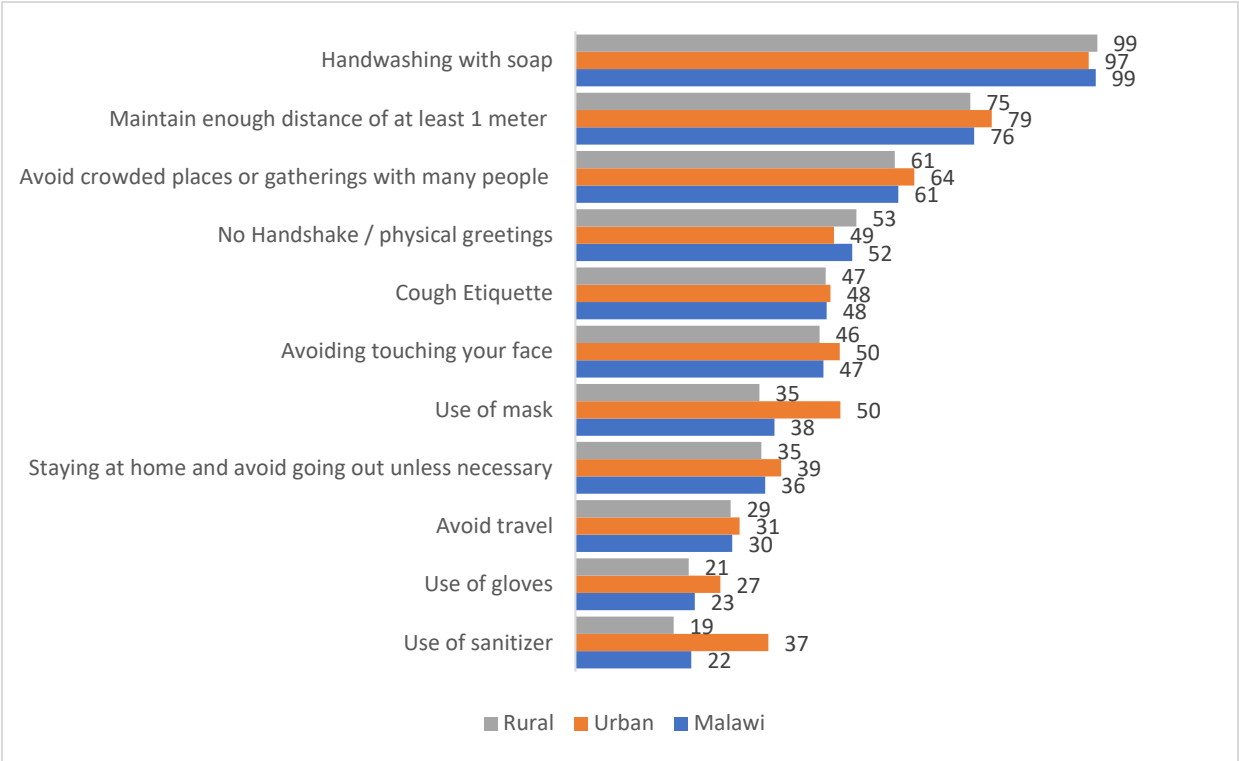
Across IHPS PCA Index Based Wealth Quintiles, dependency ratio is higher the lower the quintile. This is true across all the four survey rounds.

3.0 KNOWLEDGE OF COVID-19 TRANSMISSION

3.1 Knowledge about COVID-19 Transmission

During the first round of the survey (May 26 to Jun 14), respondents were asked of their knowledge regarding COVID-19 transmission and other actions the government is taking to prevent further spread of the pandemic.

Figure 3 - 1 Knowledge of measures that minimize the risk of contracting COVID-19 (% of HH)

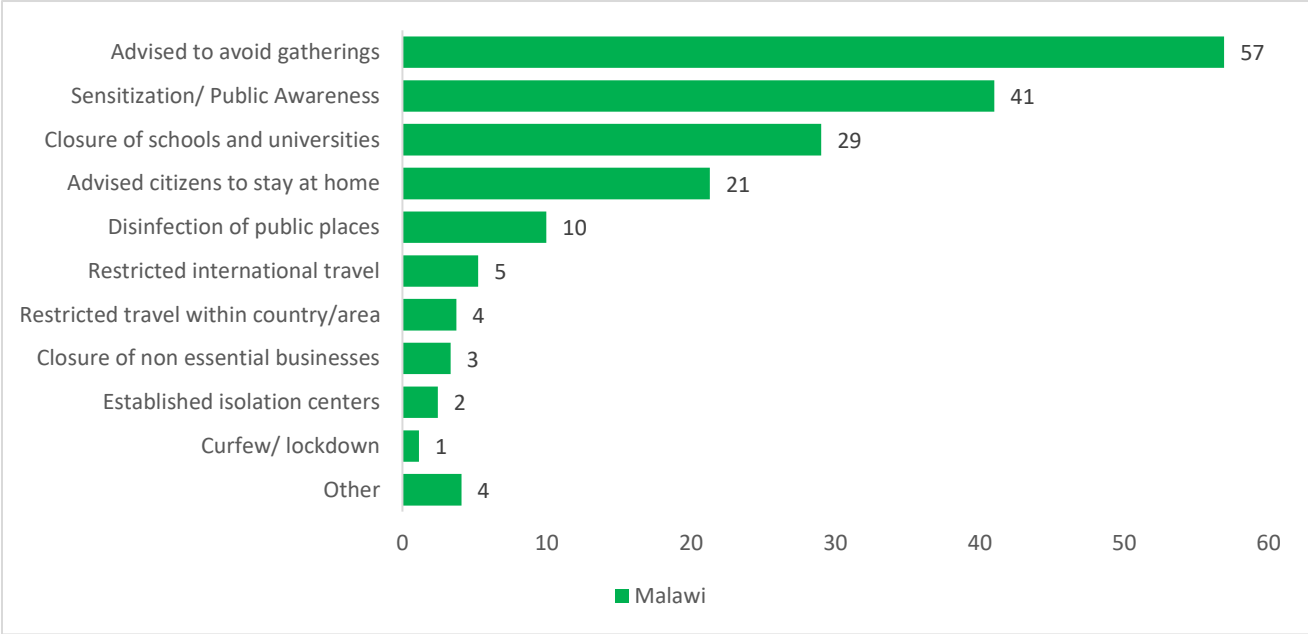


Handwashing with soap as a measure of reducing the risk of contracting COVID-19 is widely known as reported by 99% of the respondents. Maintaining enough distance of at least 1 meter is the second most reported measure by 75% of respondents. The third most reported measure is that of avoiding crowded places or gatherings with many people which has been reported by 61% of the respondents. There are some measures which are more pronounced in urban than in rural areas and these include use of face masks (50% urban against 35% rural), use of gloves (28% in urban areas against 22% in rural areas), and use of sanitizers (37% in urban areas against 19% in rural areas). Almost all the respondents reported one or more measure of reducing the risk of contracting COVID-19.

3.2 Government’s action to curb further spread of COVID-19

In order to prevent further spread of COVID-19, the government has put in place several measures. Respondents were asked to mention these measures on their own. Overall, 87% of respondents were able to mention at least one government action to curb the spread COVID-19.

Figure 3 - 2 Knowledge of government actions to curb the spread of COVID-19 (% of HH)



The most reported government action is that people were advised to avoid gatherings. This was reported by 57% of the respondents followed by sensitization or public awareness (41%). Lockdown was least reported government action.

3.3 Satisfaction with Government action

Overall, 79% of respondents were satisfied with government response to the COVID-19 crisis. Of those not satisfied, shortage of medical materials was the most reported (26%) followed by no food assistance from the government (24%). More urban respondents (31%) were not satisfied with government action compared to rural respondents (18%).

All respondents have heard COVID-19 and are aware of any government action that may have been taken by the government to curb spread of COVID-19.

Table 3- 1 COVID-19 outbreak - awareness & government action

	Overall (% of respondents)	% of respondents by IHPS Wealth Quintile					% of respondents by residence	
		Q1	Q2	Q3	Q4	Q5	Urban	Rural
Respondents - have heard of COVID-19	100	100	100	100	100	100	100	100
Respondents - aware of any government action*	100	99	100	100	100	100	100	100
Respondents - satisfied with government action	79	87	89	81	79	59	69	82

* The respondent is aware of at least one action that may have been taken by the Government according to the respondent

Across wealth quintiles, the share of respondents satisfied with government action is higher amongst poor households as compared to richer households. Similarly, more respondents in the rural areas (82%) are satisfied with government action than in urban areas (70%).

3.4 Prevalence of safe practices

Table 3- 2 Prevalence of safe practices over time

	% of respondents	% of respondents by residence		
		Urban	Rural	
More frequent handwashing with soap	87	91	86	May/June (Round 1)
Avoid handshakes/physical greetings	68	68	68	
Reduce Trips to Grocery Store	63	61	64	
Cancel Travel Plans	58	55	59	
Stock up more food than normal, due to restricted movement	27	29	27	
Avoid groups of more than 10 people	17	22	16	
More frequent handwashing with soap	79	78	80	July (Round 2)
Avoid handshakes/physical greetings	71	65	73	
Reduce Trips to Grocery Store	47	49	47	
Cancel Travel Plans	33	34	33	
Avoid groups of more than 10 people	22	24	22	
Stock up more food than normal, due to restricted movement	15	16	15	
Avoid handshakes/physical greetings	75	74	76	August (Round 3)
More frequent handwashing with soap	74	77	73	
Avoid groups of more than 10 people	45	47	45	

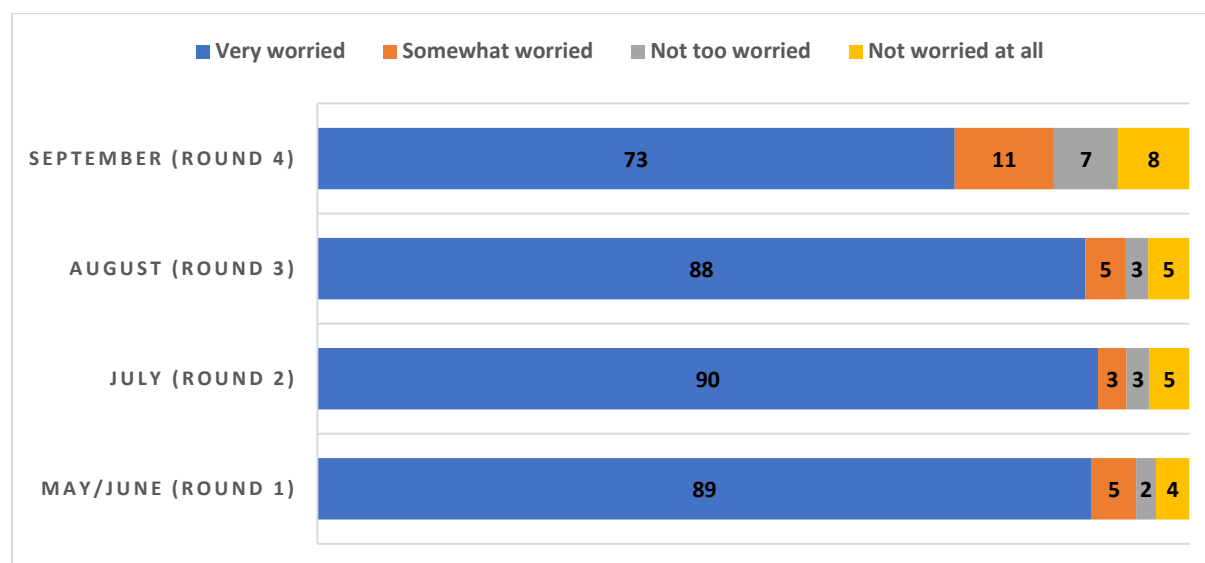
Avoid handshakes/physical greetings	79	74	80	September (Round 4)
More frequent handwashing with soap	49	48	49	
Avoid groups of more than 10 people	39	45	38	

Over the four survey rounds, respondents were asked some questions relating to their behavior that can protect them from contracting COVID-19 and prevent its further spread. Across these survey rounds, there has been some variations in actions taken by individuals. During the first round of the survey (May 26 to June 14), hand washing with soap was the most prevalent action as reported by 87% of respondents and this trend continued into the second round of the survey although there was an eight percentage point decline to 79%. In the third and fourth rounds the behaviors changed. The most reported behavior is that of avoiding handshakes/physical greetings as reported by 75% of respondents in round three and 79% of respondents in round four. In urban areas, during the first round, nearly 90% of the respondents reported more frequent handwashing with soap while in the rural areas 86% reported the same. 68% of urban respondents and a similar share of rural respondents reported avoiding handshakes/physical greetings in round one of the survey. Other actions that were less reported during the second round of the survey include stock up more food than normal, restricted movement reduced trips to grocery store and cancellation of travel plans. However, avoiding groups of more than 10 people has been increasing from survey round one (17%) to 23% in round two and 45% in round three but declined slightly to 39% in the fourth round.

3.5 Degree of worry about self or immediate family member becoming ill of COVID-19

Respondents were asked how worried they were about themselves or any of their immediate family member becoming ill of COVID-19. Across the four survey rounds, respondents have become less worried in the fourth round. The share of respondents that reported being very worried declined from around 88% in the first three rounds to 73% in the fourth-round while those that were somewhat worried rose from around 5% in the first three rounds to 11% in the fourth round. Those that reported not to be worried at all also increased from 5% in the first round to 8% in the fourth round.

Figure 3 - 3 Degree of worry about self/immediate family becoming seriously ill from COVID-19 (% of respondents)



3.6 Perceived threat to household's finances

Apart from being asked about their worry about self or immediate family member being sick of COVID-19, respondents were also asked the degree of perception of threat to their household's finance caused by the corona virus.

Table 3- 3 Degree of perception of threat to household's finance caused by COVID-19

	% of respondents	% of respondents by IHPS Wealth Quintile					% of respondents by residence		
		Q1	Q2	Q3	Q4	Q5	Urban	Rural	
A substantial threat	90	93	93	91	88	88	90	90	May/June (Round 1)
A moderate threat	5	2	5	5	5	6	6	4	
Not much of a threat	2	2	0	2	4	2	1	2	
Not a threat at all	3	3	2	2	3	4	4	3	
A substantial threat	89	91	92	88	90	86	83	91	July (Round 2)
A moderate threat	6	5	4	7	5	9	10	5	
Not much of a threat	2	3	2	2	2	3	4	2	
Not a threat at all	2	1	2	3	3	2	3	2	
A substantial threat	89	93	96	88	88	83	85	90	August (Round 3)
A moderate threat	7	1	3	8	8	12	11	6	
Not much of a threat	2	4	0	2	1	2	0	2	

Not a threat at all	2	3	1	3	3	4	3	2	
A substantial threat	76	79	79	77	73	72	70	77	September (Round 4)
A moderate threat	19	16	18	20	20	19	23	18	
Not much of a threat	3	2	2	1	5	3	1	3	
Not a threat at all	3	3	2	2	2	6	6	2	

There is a decline in the perceived threat of the virus on household's finance between the first three months May/June and August to the September (fourth round). In the first three months of the survey (, about 90% perceived the virus as substantial threat to their household's finances while this share declined in September (fourth round) to 76%. Across the survey rounds, there has been a shift from perceiving the virus as substantial threat to moderate threat. In survey May/June, about 5% of the respondents perceived the virus as moderate threat to their household's finances, and this slightly rose to 6% in July and rose further to about 7% in August, and substantially rose to 19% in September.

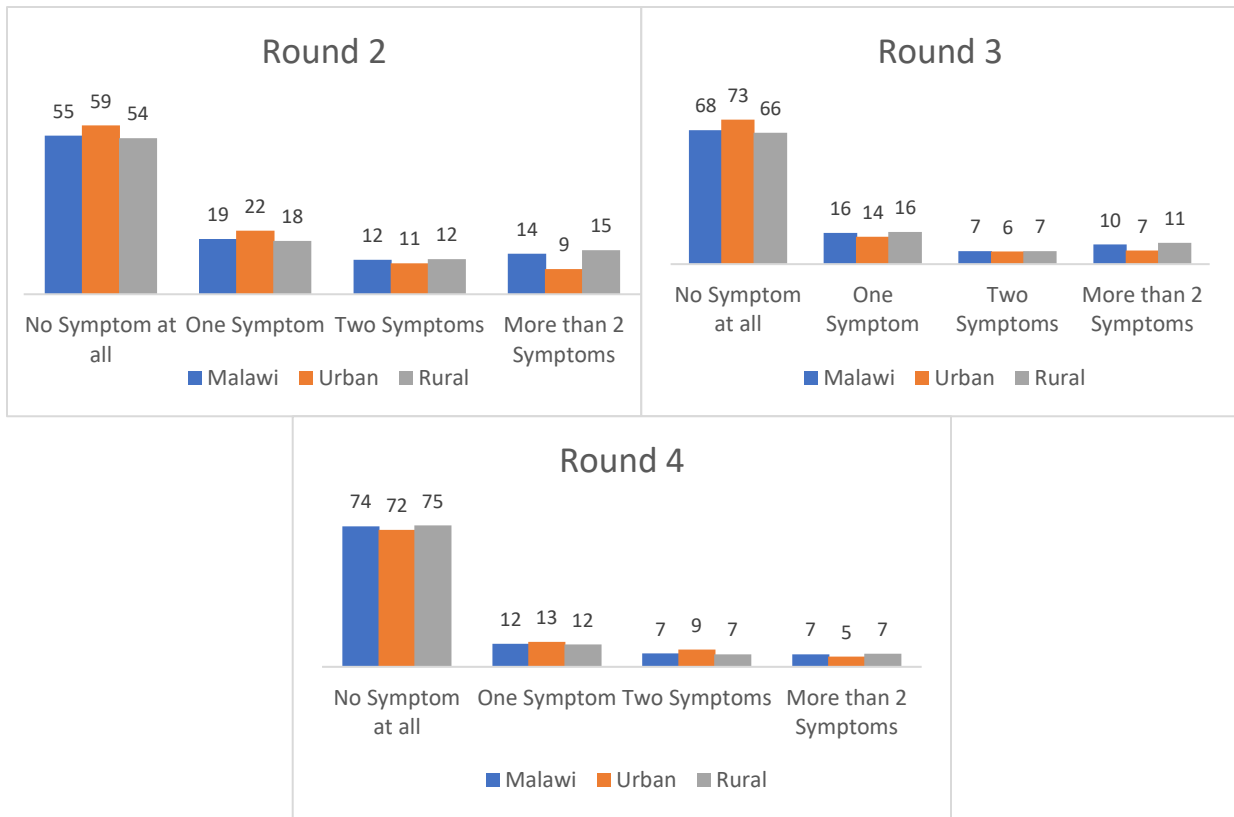
Across wealth quintiles, more respondents in the lowest wealth quintile perceive COVID-19 as a substantial threat to their household's finances as reported by 93% in May/June, 91% in July, 93% in August and 79% in September. This perceived substantial threat is declining amongst richer households reported by 88% in May/June, 86% in July, 83% in August and 72% in September.

By place of residence, the share of respondents that perceived COVID-19 as substantial threat to their finances was higher in rural areas than in urban areas. For instance, about 91% of the respondents in rural areas reported that COVID-19 was substantial threat to their finances in May/June compared 90% in urban areas in the same period. In September, 77% of rural respondents perceived COVID-19 a substantial threat compared to 70% in urban areas.

3.7 Reported symptoms of COVID-19

The respondents were asked if they experienced any of the COVID-19 related symptoms since last week from the July to the September.

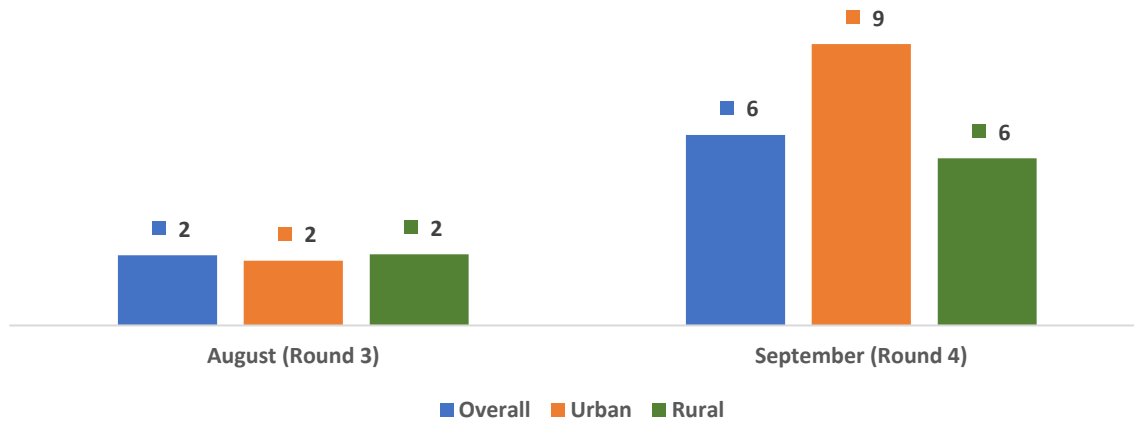
Figure 3 - 4: Incidence of households with at least a member that experienced COVID-19 Symptoms



The share of respondents that did not experience and COVID-10 related symptoms increased over the reporting period. Overall, 55% of respondents did not experience any symptom in July. This share increased from 55% July to 68% in August and to 74% in September. The share of those who experienced one or more symptoms has declined over the reporting period. Overall, the share of those that experienced more than two symptoms declined from 14% in July to 10% in August to 7% in September. Across place of residence, the share of rural residents that reported experiencing more than 2 symptoms is higher than in urban areas over the entire reporting period.

3.8 Use of Government-provided Toll-Free Numbers¹

Figure 3 - 5 Use of Toll-Free Lines After Experiencing COVID-19 Symptoms (% of Respondents who experienced Symptoms)



Government has provided toll-free numbers to help those in need of help relating to COVID-19. During the third and fourth survey rounds, the survey asked those who experienced some symptoms if they called any of the government provided toll-free numbers. Around 2% of respondents who reportedly experienced some symptoms in the third round called the toll-free number. This share almost tripled in the fourth round to 6%. Urban areas the proportion of respondents that called the toll-free number increased from 2% in round 3 to 9% in round four.

3.9 Safe Practices – Use of Face Masks

Respondents were asked if they were wearing a face mask or cover when in public places over the last 7 days.

from the second round of the survey through the fourth round,

Table 3- 4 Prevalence of Safe Practices (Wearing a Mask when in Public), Last 7 days

	% of respondents								July (Round 2)
	Overall	by IHPS Wealth Quintile					by residence		
		Q1	Q2	Q3	Q4	Q5	Urban	Rural	
All of the time	19	11	22	19	15	29	26	18	
Most of the time	6	3	5	4	10	10	7	6	
About half of the time	1	1	3	1	1	2	2	1	
Some of the time	7	12	5	3	7	12	12	6	
None of the time	61	66	62	69	64	42	48	64	

¹ Toll-free numbers include: Airtel 54747 or *929# or 321; for tnm 929 or *929# or whatsapp 0990 800 000

I have not been in public during the last 7 days	5	7	4	4	4	5	6	4	
All of the time	56	36	51	58	58	71	68	53	August (Round 3)
Most of the time	16	16	16	15	19	13	12	17	
About half of the time	3	3	2	4	4	2	4	3	
Some of the time	8	6	8	7	8	8	8	7	
None of the time	15	32	23	12	10	3	6	17	
I have not been in public during the last 7 days	3	6	0	3	2	2	2	3	
All of the time	47	42	51	47	45	50	53	46	September (Round 4)
Most of the time	23	19	22	21	25	24	23	23	
About half of the time	4	3	5	3	6	4	3	5	
Some of the time	13	14	11	12	14	13	14	13	
None of the time	11	19	8	15	8	8	6	12	
I have not been in public during the last 7 days	1	3	2	1	1	0	1	1	

In July, most respondents (61%) reported not wearing a face mask when in public in the last 7 days. In August and September, the share of those reporting not wearing a face mask in public dropped to 15% and 11% respectively. Over the same period, those who reported to wear a mask all of the time in public has increased from 19% in July to 56% in August and 47% in September.

Across wealth quintiles, those who did not wear face mask when in public were highest among the poorest quintile and lowest among the richest wealth quintile. In July, 61% of respondents in the lowest quintile did not wear masks when in public compared to 42% in the highest quintile. In the following month in August, the share is 32% for the lowest quintile compared to 3% for the highest quintile while in September, the share is 22% in the lowest quintile compare to 7% in the highest quintile. Looking at those wearing a face mask all of the time when in public across wealth quintiles, the highest share is among the richest households while the lowest share is amongst the poorest households and this is true over the entire reporting period. In July, 11% of respondents in the lowest quintile wore face masks all of the time when in public compared to 29% of respondents in the highest quintile. 36% of respondents in the lowest quintile compared to 29% in the highest quintile was the case August while in September, 43% of respondents in the lowest quintile compared to 50% in the highest quintile wore face masks all the time

when in public. Across all the survey rounds, there is an increase in the share of respondents wearing face masks all the time when in public amongst poorest and richest respondents.

By place of residence and over time, the share of respondents that reported wearing face masks none of the time when in the public is higher in the rural areas than in urban areas and the opposite is true for those wearing face masks all of the time when in public. In July, 64% of rural respondents compared to 48% of urban respondents did not wear face masks when in public. In August, the share was 17% of rural respondents compared to 6% of urban residents while in September the share was 14% of rural residents compared to 7% of urban residents. In July, 18% of rural respondents wore face masks all of the time in public compared to 27% of urban respondents. In August, 53% of rural respondents compared to 68% and in September, 45% of rural residents compared to 54% of urban respondents wore face masks all of the time when in public.

4.0 ACCESS TO SERVICES

4.1 Basic needs

During the first two rounds of the survey, respondents were asked if they needed to buy a selected list of items including their staple food. Of those who needed to buy the items, they were further asked if they were able to buy the required items.

Table 4 - 1 Access to basic needs, past 7 days

	Neede d to buy (% of HHs)	Could not buy (% HH that needed to buy)								
		Overall	IHPS PCA Index Based Wealth Quintiles					% of respondents by residence		
			Q1	Q2	Q3	Q4	Q5	Urba n	Rura l	
Soap	94	7	7	8	8	7	4	7	7	May/Jun e (Round 1)
Medicine	64	12	8	13	13	14	9	10	12	
Medical Services	61	16	13	15	15	17	17	20	14	
Cleaning supplies	60	34	39	35	41	37	28	30	37	
Maize	55	23	36	21	27	24	18	18	27	
Maize	46	30	33	31	27	31	27	21	32	July (Round 2)
Medical Services	46	16	19	7	16	18	18	26	14	
Medicine	45	14	13	2	19	16	18	13	14	

In terms of basic items, in May/June, most people needed to buy soap (94%), medicine (64%), medical services (61%) and cleaning supplies (61%). Of the households that needed to buy cleaning supplies, about 35% could not buy. Those that needed medical services 16% could not access while 12% of those that needed to buy medicine could not. A small share of those who needed to buy soap was not able to (7%).

Access to staple food was asked in May/June and July. In May/June, about 55% of respondents needed to buy maize but this share dropped to 44% in July.

The share of households that needed to buy maize but could not do so, rose from 23% in the May/June to 29% in July.

Across wealth quintiles, more respondents from the poorest households who needed to buy some selected items were not able to buy compared to the richest households. In May/June, 7% of respondents who wanted to buy soap in

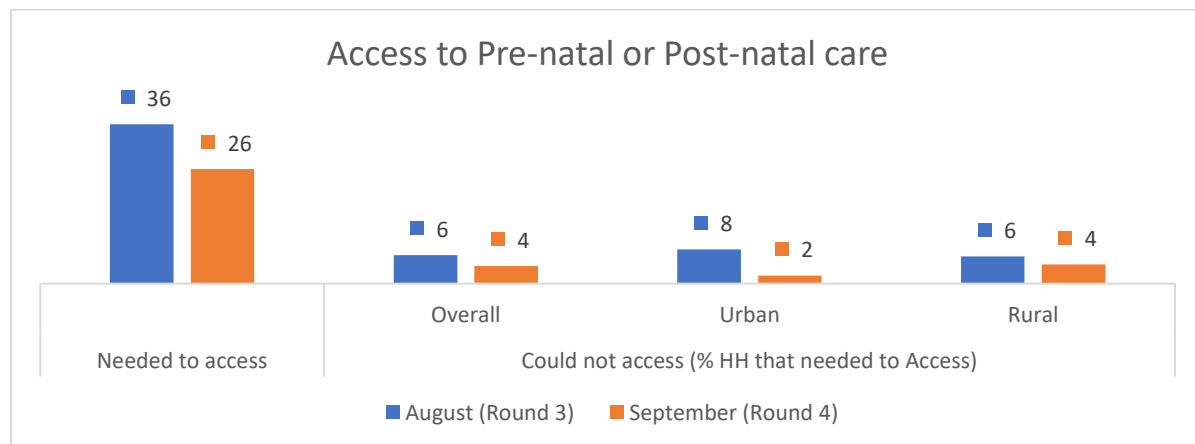
the lowest wealth quintile could not do so compared to 4% in the highest quintile. 39% of the lowest quintile respondents could not buy cleaning supplies compared to 28% in the highest quintile. The same is true for staple food. In May/June, 36% of respondents who needed to buy maize in the lowest wealth quintile could not do so compared to 18% in the highest wealth quintile. In July, 41% compared to 29% of rural and urban respondents respectively could not buy maize.

By place of residence, the share of households that could not buy items or services they needed is higher in the rural areas than in urban areas Over the reporting period except for medical services. 37% of rural respondents who needed to buy cleaning supplies could not do so compared to 30% of urban respondents in May/June. 12% of rural residents who needed to buy medicine could not do so compared to 10% of urban residents. More of those rural areas respondents who needed to buy staple food, could not buy compared to their urban counterparts. In May/June, 27% of rural respondents could not buy maize compared to 18% of urban respondents. In July, 29% of rural respondents could not buy maize compared to 28% of rural respondents. Overall, there was a rise in the share of respondents who needed to buy maize but could not do so in both rural and urban areas between May/June and July.

4.2 Access to services since date of outbreak

Households with women of child-bearing age were asked if any of the women in the household needed to access pre-natal or post-natal care August and/or September. In August, about 36% of households with women of child-bearing age needed access to pre-natal or post-natal care but this share dropped to 26% in the September.

Figure 4 - 1 Access to pre-natal or post-natal care since date of outbreak (round 3) and since last call (round 4)

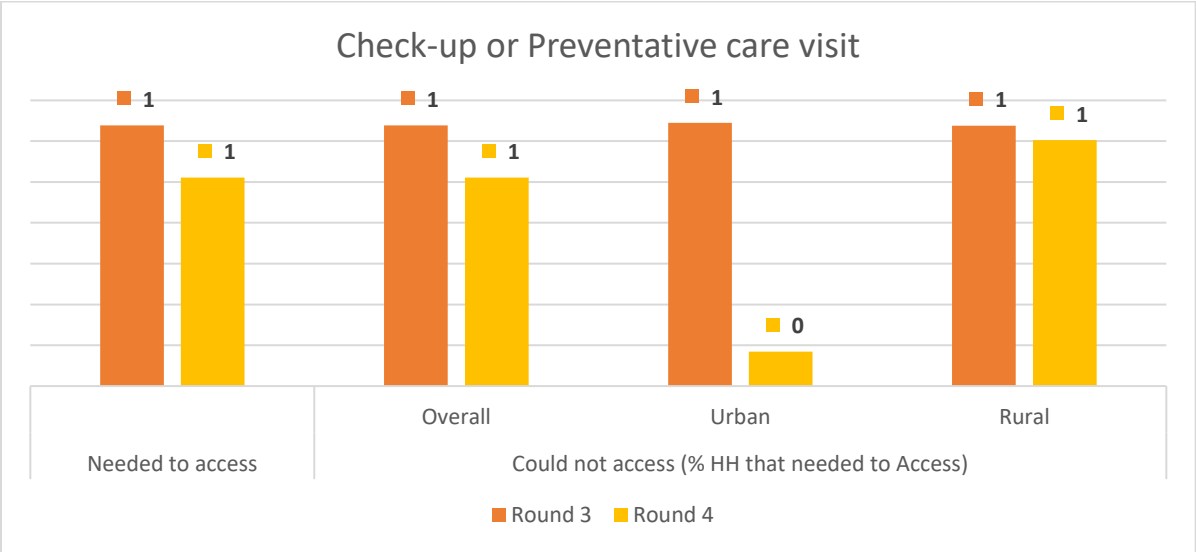


Overall, of those who needed to access the pre/post-natal services, 6% could not access the service in August and the share dropped to 4% in September. By place of residence, both urban and rural areas experienced a decline in the share of households that could not access the services between August and September, but urban areas had a larger decline of 6 percentage points compared to rural areas with a decline of about 2 percentage points.

4.3 Access to check-up or preventative care visit

The share of households that needed to access check-up or preventive care visit is generally very low at about 1% in both August and September. Of these households, the share of households that could not access these services is also very low at 1% over the same period.

Figure 4 - 2 Access to check-up or preventative care visit since last call



4.4 Reasons households could not access pre-natal or post-natal services

Unavailable medical personnel was the most reported reason (40%) households could not access pre-natal or post-natal services in August. The second most reported reason is that those seeking services were turned away because facility was full (24%). Restriction to go out was reported by 16% of the households as the reason they could not access pre-natal or post-natal care in August.

In September, the most reported reason households could not access pre-natal or post-natal care was that they were turned away because facility was full (35%) while lack of funds was the second most reported reason (24%). Unavailable

medical personnel was the third most reported reason down to 21% from 39% in August.

By place of residence, 46% of rural households that needed pre-natal or post-natal care in August could not access the care due to unavailable medical personnel compared to 12% of urban households. In urban areas however, 58% of households were turned away because facility was full versus 17% in rural areas. In September more respondents in the rural areas (36%) were turned away because facility was full compared to the urban counterparts at 19%.

Table 3- 5 Reasons Households Could Not Access pre-natal or post-natal care (% of HHs that could not access)

Frequency of reasons given across all times	Pre-natal or Post-natal care			
	Overall	Urban	Rural	
Unavailable Medical Personnel	40	12	46	August (Round 3)
Turned away because facility was full	24	58	17	
Restriction to go outside	16	2	19	
Refused Treatment by the Facility	14	0	18	
Suspicion of Being positive for COVID-19	5	27	0	
Lack of Funds	3	13	1	
Other Specify	2	0	3	
Turned away because facility was full	35	19	36	September (Round 4)
Lack of Funds	24	12	24	
Unavailable Medical Personnel	21	0	22	
Restriction to go outside	11	0	12	
Other Specify	9	51	6	
Suspicion of Being positive for COVID-19	1	18	0	
Refused Treatment by the Facility	0	0	0	

4.5 Reasons households could not access check-up or Preventative care visit

In August, households that wanted to access check-up or preventive care, 37% could not access due to unavailable medical personnel. Lack of funds and distance to the facility are other reasons that prevented households to access check-up or preventive care visit in August (17%). However, in the following month in September, the most reported reason for not accessing check-up or preventing care visit is lack of funds (32%) and fear of contracting COVID-19 (15%).

About 43% of rural households that wanted to access check-up or preventive care could not access due to unavailable medical personnel reported during the third round of the survey as compared to 8% of urban households. Distance to the

facility (21%) and lack of funds (19%) are also some of the most reported reasons by rural households that prevented them from accessing check-up or preventive care visit. In the same round of the survey, urban areas reported turned away because facility was full (37%) and fear of contracting the virus (31%) as the reasons they could not access the services. In the fourth round, lack of funds was most reported in rural areas (33%) followed by fear of contracting the virus (15%).

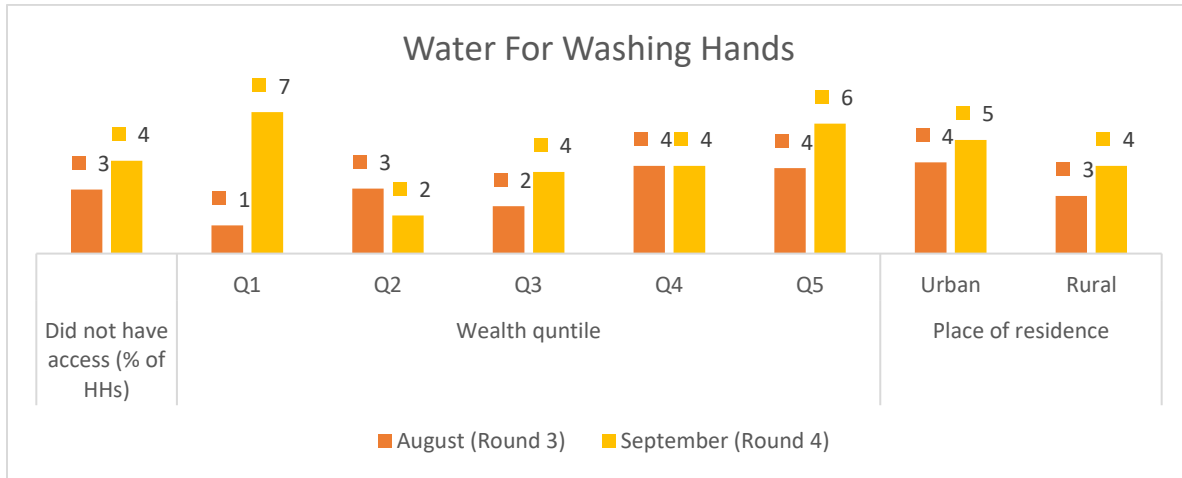
Table 4 - 2 Reasons households could not access check-up or preventive care visit (% of HHs that could not access)

Frequency of reasons given across all times	Check-up or Preventative care visit			
	Overall	Urban	Rural	
Unavailable Medical Personnel	37	8	43	August (Round 3)
Lack of Funds	17	11	19	
Distance to Facility	17	0	21	
Restriction to go outside	7	0	9	
Fear of Contracting COVID-19	7	31	2	
Turned away because facility was full	7	37	0	
Refused Treatment by the Facility	5	0	6	
Suspicion of Being positive for COVID-19	2	14	0	
Lack of Funds	32	0	33	September (Round 4)
Fear of Contracting COVID-19	15	0	15	
Unavailable Medical Personnel	7	94	4	
Refused Treatment by the Facility	1	0	1	
Turned away because facility was full	0	0	0	
Restriction to go outside	0	0	0	
Suspicion of Being positive for COVID-19	0	0	0	
Distance to Facility	0	0	0	
Other Specify	49	6	51	

4.5 Access to water

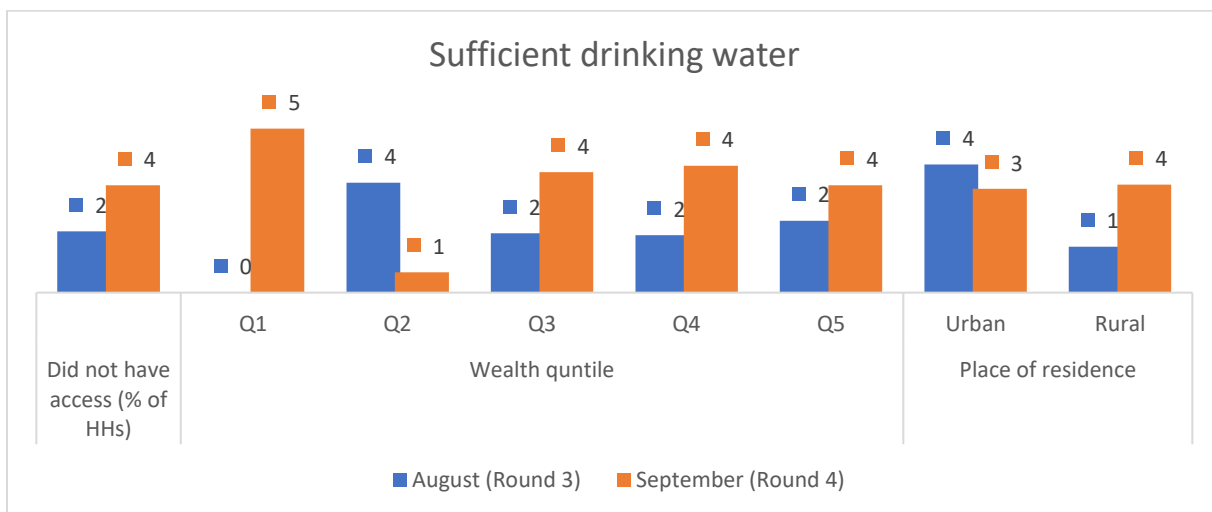
In August and September, respondents were asked if household was unable to access water for washing hands since last week from the interview date. In August, 3% of households did not access water for washing hands. This share increased by 1 percentage point to 4% in the following month.

Figure 4 - 3 Access to water for washing hands (% of households)



By wealth quintiles, in August, 1% of poorest households did not have access to adequate water for washing hands compared to 4% of richest households. In September, 7% of the poorest households did not access adequate water for washing hands compared to 6% of the richest households. By place of residence, 4% of urban households could not access adequate water for washing hands in August compared to 3% of rural households. In September, 5% of urban households could not access adequate water for washing hands compared to 4% of rural households. Overall, both urban and rural households experienced a rise in the share of households that could not access water for washing hands in between the two months.

Figure 4 - 4 Access to sufficient drinking water



There was a slight increase in the share of households that did not access sufficient drinking water from 2% in August to 4% in September. Across wealth quintiles, there were no households that did not have access to sufficient drinking water in the lowest wealth quintile in August, but the share rose to 5% in September. 2% of

households in the richest quintile did not have access to sufficient drinking water in August compared to 4% in September.

Share of urban residents that did not have access to sufficient drinking water dropped over the two months from 4% to 3% but the opposite is true for rural residents as the share increased from 2% to 4% over the months August to September.

Table 4 - 3. Reasons Households Could Not Access Water to Wash their Hands (% of HHs that could not access)

Frequency of reasons given across all times	% of respondents by residence			
	Overall	Urban	Rural	
Water Source Too Far	31	7	40	August (Round 3)
Too Many People at the Water Source	25	1	34	
No Money	22	66	6	
Other Specify	22	26	21	
September (Round 4)				
Water Source Too Far	36	32	38	September (Round 4)
Too Many People at the Water Source	14	2	18	
Other Specify	20	27	18	

In August, of the households that could not access water to wash their hands, 31% percent cited water source being too far, 25% indicated too many people at the water source, while 22% indicated lack of money. In September, during the fourth round, 36% cited water source being too far and 14% cited too many people at the water source as the reasons they could not access water to wash their hands. In August, 40% of rural households cited water source being too far compared to urban households 7%. Too many people at the water source was also reported more by rural respondents at 34% compared to urban respondents reported at 1%. The situation was almost the same in September as 32% of urban households reported that water source was too far compared to 38% of rural households. There were more households that could not access water for washing hands in rural areas due to too many people at the water source, reported by 18%, compared to urban households, reported by 2%.

Table 4 - 4 Reasons Households Could Not Access to Water to Drink (% of HHs that could not access)

Frequency of reasons given across all times	% of respondents by residence			
	Overall	Urban	Rural	
Water Supply Reduced	32	27	36	August (Round 3)
Other Specify	30	46	20	
Unable to access communal sources	29	23	34	

Water Supply No Longer Available	6	1	9	
Unable to afford Water	3	4	2	
Unable to access communal sources	30	0	37	September (Round 4)
Water Supply Reduced	28	42	25	
Other Specify	19	10	21	
Water Supply No Longer Available	17	20	16	
Unable to afford Water	5	28	0	

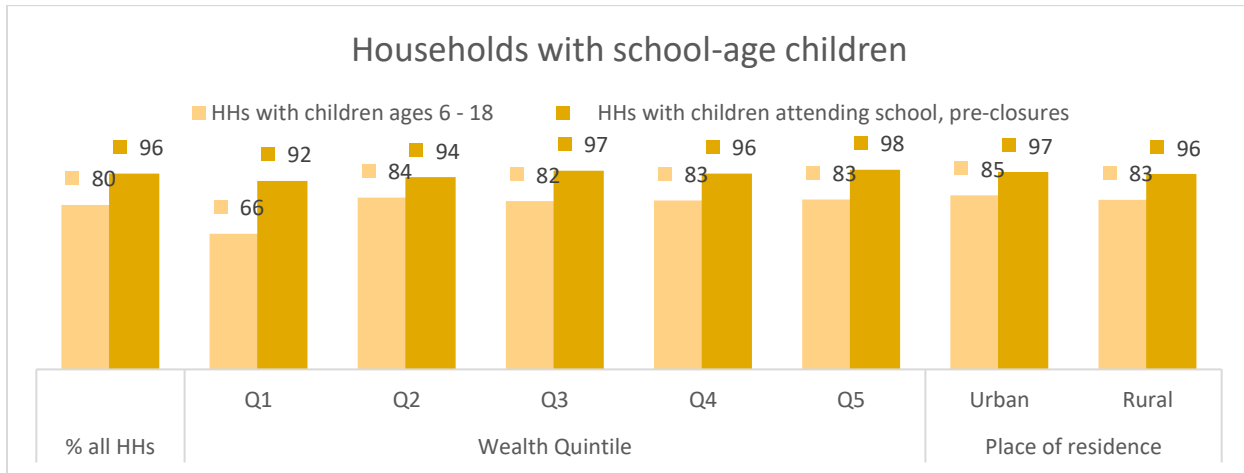
Households that did not access sufficient water for drinking were further asked to cite the main reason as to why they were not able to access sufficient water for drinking. In August during the third round, 32% of households reported water supply reduced as the main reason. This proportion dropped to 28% in September. Unable to access communal sources was the second most reported reason in August reported by 29% of the respondents and slightly rose to 30% in September.

In August, about 36% of households in rural areas reported water supply reduced as the main reason they could not access sufficient drinking water. This is followed by unable to access communal sources reported by 34% of the households. In September, 37% of the households reported unable to access communal sources as the main reason for not accessing sufficient drinking water which is an increase from 34% reported in the previous month. Water supply reduced was reported by 25% of respondents in September down from 36% reported in August. Water supply reduced is the most reported reason in urban areas reported by 27% and 42% of respondents in August and September respectively.

4.6 COVID-19 guidelines - effects on education

Following government's closure of schools and the proposed phased opening in September and October, households with school-going age children (6-18 years) were asked whether the children were attending school prior to COVID-19 outbreak in March.

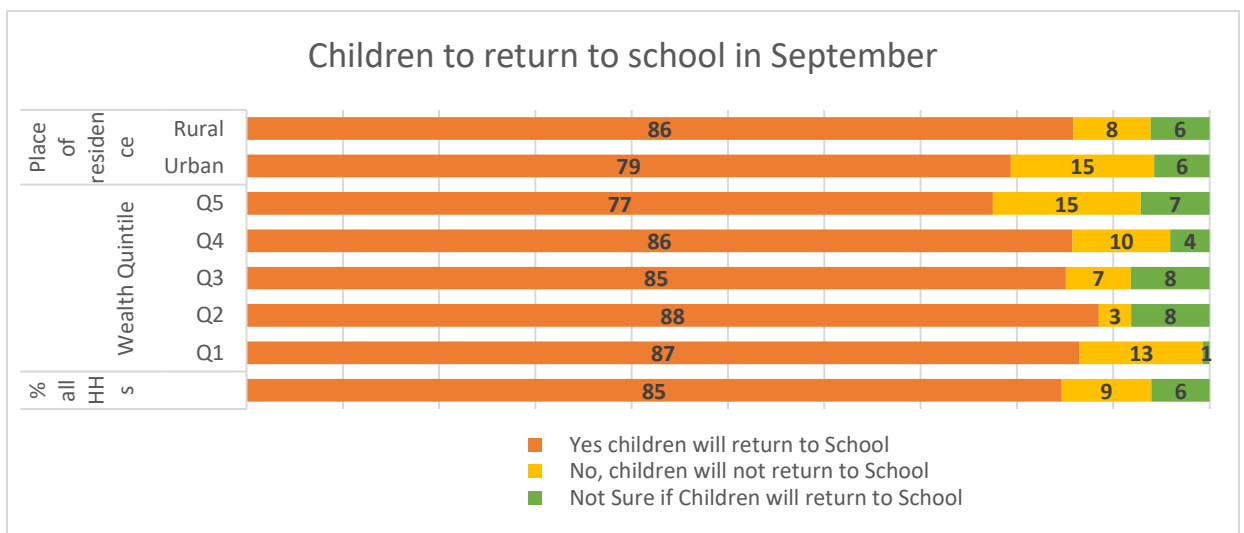
Figure 4 - 5 Households with children aged 6-18 and those attending school pre closure



Overall, 81% of households interviewed in August had children aged 6-18. Of these households, 96% had children that were attending school pre-closure in March 2020. The lowest quintile reported the lowest share of households with children aged 6-18 at 66% while the second quintile had the highest at 84%. Households with the most children attending school were in the highest quintile (98%) and lowest in the poorest quintile (92%).

Urban areas reported slightly more households with children aged 6-18 at 85% compared to rural areas at 83%. There is only one percentage point gap between urban and rural areas in terms of children attending school pre-closure with the urban areas registering 97% and rural areas slightly lower at 96%.

Figure 4 - 6 Children to return to school in September

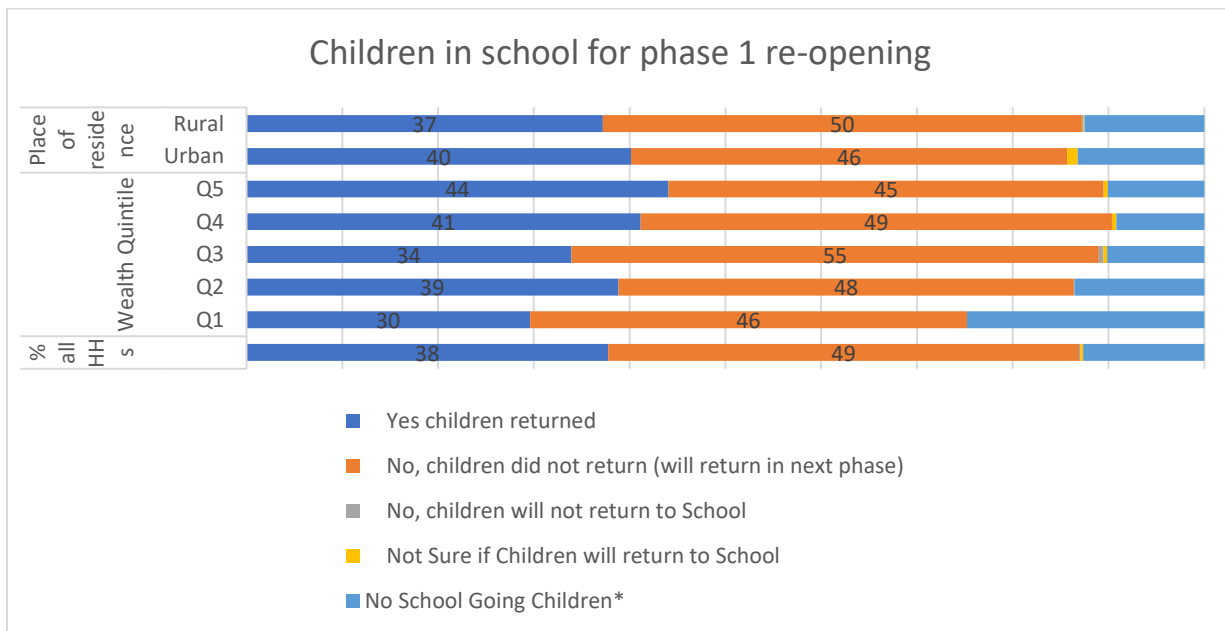


Households with children attending school pre-closure were asked if the children would return to school when schools re-opens. 85% indicated that their children will return to school while 9% reported that their children will not return to school. About 6% were not sure if children will return to school. Across wealth quintiles, the second quintile reported the highest share of households whose children will return to school at 89% and the fourth quintile at 86%. The richest quintile has the lowest share at 78%. Likewise, the richest quintile has the highest share of households whose children will not return to school at 15% followed by the lowest quintile at 13%.

In urban areas, 79% of households with school-age children will return to school compared to 86% in rural areas.

In September, households with school-age children were further asked if their children have returned to school for the phase one re-opening or would return for the second phase reopening.

Figure 4 - 7 Children returning to school by phase, % of households



In September, 38% of households had their children returned to school and 49% were expected to return in the next phase in October. The share of households whose children returned to school is increasing from the lowest quintile to the highest quintile. 40% of urban households had their children back in school compared to 37% of rural households. Inversely, 50% of rural households compared to 46% of urban households have children who will return in the next phase in October.

For households that reported their children will not return to school, the main reason cited is that the schools are not yet safe from COVID-19. The proportion was much high in August at 86% and declined to 61% in September. The proportion of households that

reported financial challenges due to unavailability of jobs as the main reason for not sending children to school rose from 4% in August to 37% in September.

4.7 Access to Credit

In September, respondents were asked if anyone in their household successfully obtained a loan from sources such as banks, cooperative societies, savings associations, micro-finance institutions, money lenders, family, friends, etc.

About 16% of households took a new loan in August. More urban households (20%) took a loan in August than rural households (16%). About 22% of households that took a loan in August have also outstanding loan that was taken pre-COVID-19. Additionally, more urban households (31%) have outstanding loan taken pre-COVID-19 than rural households (20%).

Table 4 - 5 Sources of Credit Since the August (% of HHs that got credit)

Frequency of reasons given across all times	Overall	IHPS PCA Index Based Wealth Quintiles					% of respondents by residence	
		Q1	Q2	Q3	Q4	Q5	Urban	Rural
Micro Finance	48	32	69	54	40	47	28	52
Friends & Relatives	27	30	31	18	32	30	45	23
Savings Association	22	39	0	23	19	17	22	22
Money Lenders	2	0	0	4	7	0	3	2
Bank	1	0	0	0	0	6	1	1

The most reported source of loan is micro finance (48%) followed by friends and relatives at 27% and savings association at 22%. In the lowest quintile, most respondents obtained their loan from savings (39%) then micro finance (32%) and from friends and relatives (30%). About 47% of households in the richest quintile took their loan from micro finance while 30% from friends and relatives and 17% from savings association.

By place of residence, 45% of those who took a loan in urban areas got the loan from friends and relatives. About 28% got the loan from micro finance and 22% from savings association. For rural households, of those who took a loan, slightly above half (52%) got their loan from micro finance, 23% from friends and relatives and 22% from savings association.

Respondents that obtained a loan or attempted to obtain a loan were asked the main purpose for borrowing/attempting to borrow Money. 47% of respondents

wanted to buy food, 37% wanted to purchase inputs/working capital for non-farm enterprise and 8% to buy farm inputs either seeds or fertilizer.

By wealth quintile, 45% of respondents in the poorest quintile compared to 33% in the richest quintile obtained a loan to buy food stuff. 48% in the poorest quintile compared to 55% in the richest quintile obtained or attempted to obtain a loan in order to purchase inputs /working capital for non-farm enterprise.

63% of urban respondents compared to 42% of rural respondents obtained a loan or attempted to obtain a loan to buy food stuff. 36% of urban respondents compared to 37% of rural respondents obtained or attempted to obtain a loan to purchase input/ working capital of non-farm enterprise.

Table 4 - 6 Reasons for obtaining a loan

	Malawi						Urban	Rural
		Q1	Q2	Q3	Q4	Q5		
Buy food stuff	47	45	68	46	40	33	63	42
Purchase of inputs/ working capital for non-farm enterprises	37	48	25	29	36	55	35	37
Buy farm inputs (seeds, fertilizer)	8	4	12	2	9	14	10	7
Buy other non-food consumption goods/services	5	0	4	2	7	10	6	5
House construction or purchase	5	0	1	12	1	5	3	5
Pay for health expenses	3	3	0	5	5	1	4	3
Pay for education expenses	3	0	1	4	1	8	0	4
Buy farm tools/implements	2	0	0	0	7	2	0	3
Other	2	0	0	2	3	1	4	1
Pay for ceremonies expenses	1	0	2	3	0	0	4	1
Buy livestock	1	0	0	2	0	2	0	1

About 11% of those who took a loan in August already repaid while 7% had an overdue loan. About 50% had their loan due within one month while 23% had their loan due within the next 2-3 months.

Of the respondents that had not yet repaid their loan, they were asked of the degree of worry about not paying back the loan within loan repayment period. About 62% is very worried while 17% is somewhat worried and 13% is not worried at all.

Table 4 - 7 Expected Repayment Period of Loans Taken since August

	Overall
Status of loan repayment	
Loan Already Due	7
Within One Month	50
Within the Next 2 - 3 Months	23
Within the Next 4 - 6 Months	5
Within the Next 7 - 12 Months	1
More than 12 Months	3
Loan Already Paid	11

Households with outstanding loan were asked of the degree of worry about not Paying back loan within Loan Repayment Period. The majority (62%) is very worried with 17% somewhat worried. Only 13% is not worried at all. Comparing rural and urban respondents, 11% of urban households responded that they were not worried at all about not paying back the loan within the stipulated tie frame compared to 13% of rural areas.

5.0 EMPLOYMENT

5.1 Employment status last week

Respondents were asked if during the week before the interview, they did any work for pay, any kind of business, farming or other activity to generate income, even if only for an hour.

Table 5 - 1 Respondents working status last week (any work for pay or any income generating activities)

Table 4.1 Respondents working status last week (any work for pay or any income generating activities)				
Status of work	Round 1 (May/June)	Round 2 (July)	Round 3 (August)	Round 4+ (September)
Respondent WORKING (%)	69	68	73	80
Also was working in previous round		81	80	85
Returned to work since previous round		19	20	15
Respondent NOT WORKING (%)	31	32	27	20
Also not working in previous round*	68	56	56	65
Stopped working since previous round*	32	44	44	35

This table includes only 1209 observations that represent HHs with information for all rounds and that they did not change respondents along the way for Round

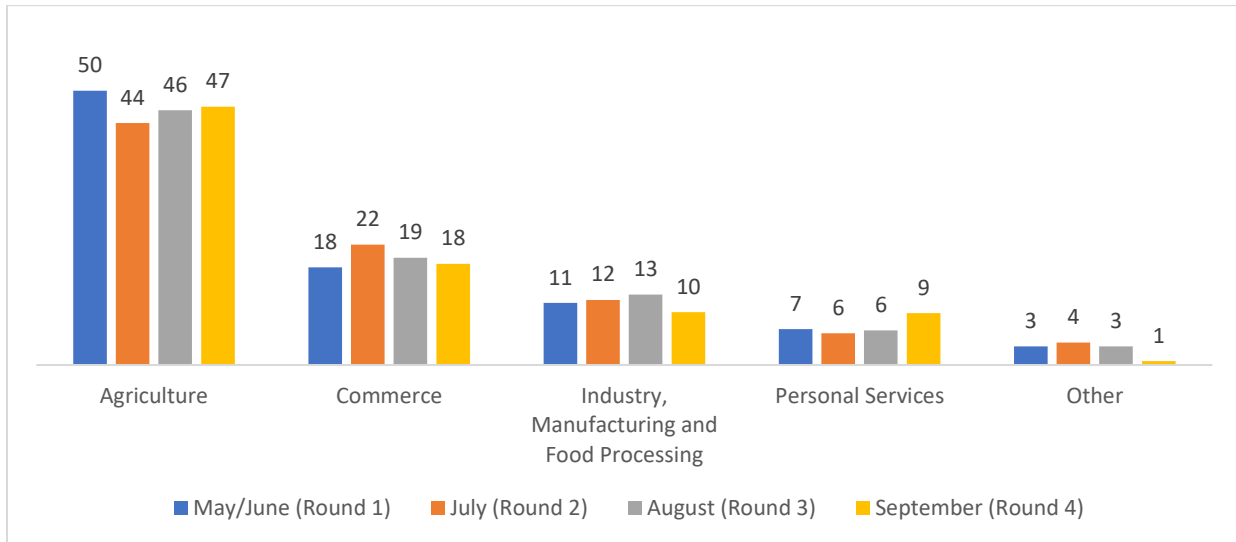
Impacts in employment do not seem to be significant; since May, around 70% of the population has been working despite COVID-19. In May/June, during the first round of the survey, 69% of respondents was working. The share dropped slightly to 68% in July but rose again to 73% in August and rose further to 79% in September. Of those interviewed in July, 81% was also working May/June while of those interviewed in August, 80% was working in July while 85% of those interviewed September was also working in August during the third round.

5.2 Main industry of those respondents working

The respondents that reported to be working were asked the main activity of the business or organization in which they are working in their main job.

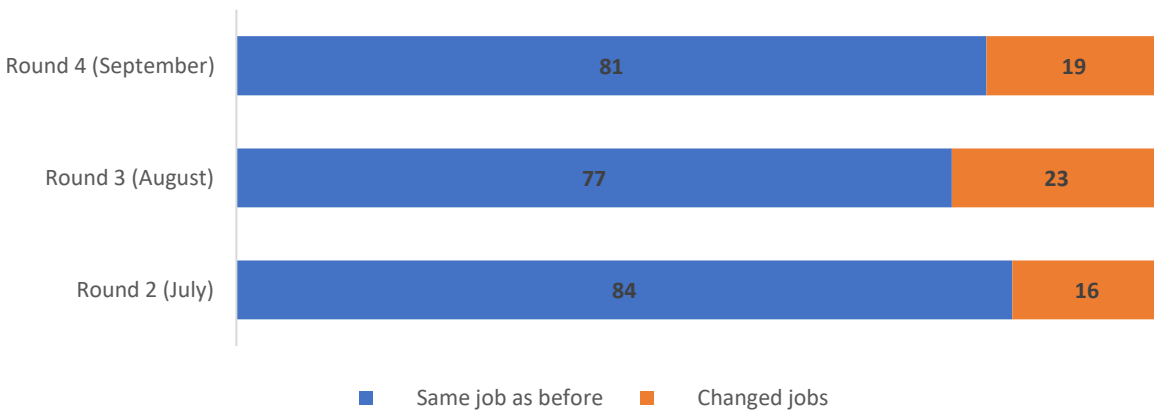
As expected, most of the employees work in Agriculture. About half of respondents work in agriculture with seasonal variations. Buying and selling sector is the next big employer employing around 20% of the respondents, following the opposite seasonal effects than agriculture.

Figure 5 - 1 Main industry of those respondents working, (% of respondents for selected sectors)



5.3 Job Stability

Figure 5 - 2 Changes in job



Most of the respondents (84%) have maintained their jobs between May/June and July. However, this share dropped to 77% for those still working between July and August but rose again to 81% between August and September.

Table 5 - 2 Percentage of respondents that stopped working and relation to COVID-19 outbreak.

Percentage of respondents that stopped working				Relation to COVID-19
June/May (Round 1)	July (Round 2)	August (Round 3)	September (Round 4)	
56	12	12	26	Potentially related
44	88	88	74	Potentially unrelated

Respondents that stopped working were asked reasons that lead them to stop working. Reasons such as business/office closed - COVID-19 legal guidelines; ill/quarantined; need to care for ill relative; not able to go to farm - movement restrictions; laid off while business continues; furlough (temporarily laid off); and not able to farm due to lack of inputs are assumed to be potentially related to COVID-19 outbreak. While reasons such as business/office closed for another reason; not farming season; seasonal worker/or farming season; retired; vacation; and rotation of personnel are assumed to be potentially unrelated to COVID-19.

In May/June there were more signs of potential impacts of COVID to the labor market. 56% of those who stopped working had reasons that were potentially related to COVID-19. However, the potential effects drop significantly in subsequent months of the survey recording 12% in July and August but rose again to 26% in September.

Table 5 - 3 Type of work for those working

	% of all respondents working			
	May/June (Round 1)	July (Round 2)	August (Round 3)	September (Round 4)
Percentage of respondents working	69	68	73	72
Family farming (or livestock or fishing)	41	38	39	44
Own business	30	33	30	29
As an employee for someone else	27	28	29	25
Business of HH or family member	2	1	2	2
As an apprentice, trainee, intern	1	0	0	0

Around 40% of the working respondents work in family farming. During the first round of the survey in May/June, of the 69% respondents working, 41% are in family farming or livestock or fishing. 30% are in own business while 27% are working as an employee for someone else. A very small share (1%) is working as an apprentice, trainee or intern. This trend is almost similar across all the four survey rounds.

Table 5 - 4 Changes in working condition in wage work

	R2 (July) - Percent	R3 (August) - Percent	R4 (September) - Percent
Respondent working less* (% of respondents with wage-work)	7	7	4
Other adults working less* (% of HHs)	10	4	1
Average number of HH members working less, HH w respondent wage worker*	0.17	0.11	0.05
Average number of HH members working less, all HHs*	0.08	0.06	0.04

* NOT ABLE to work as usual in their WAGE JOB (at place of work or from home) last week.

Respondents with wage work were asked if there are changes in the number of hours of work. During July and August, there were slightly more wage workers who worked less hours than during the fourth round of the survey in September. If other household adults are considered, there were more other adults working less hours in July than in August and much less in September than in August.

The average number of household members working less among the households with a wage worker was slightly higher in July, then dropped slightly in August and dropped further in September and the same is true if all households are considered.

Respondents with wage employment were asked if they were able to work as usual. 81% of respondents working in wage employment was able to work as usual in May/June during round one. The share remained at 80% in July and August but rose to 91% in the fourth round in September.

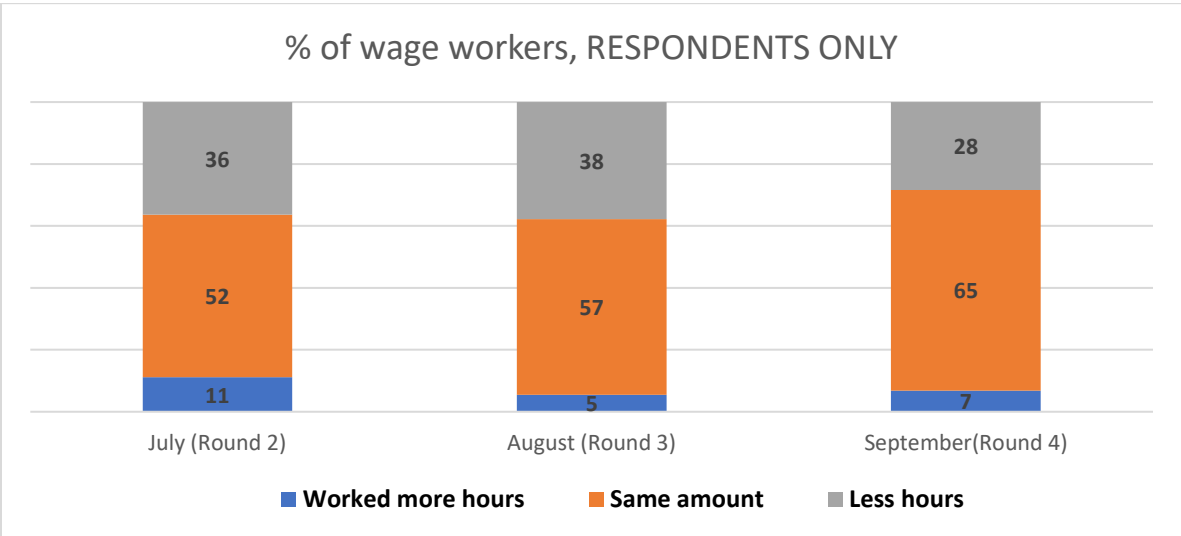
Table 5 - 5 Wage Workers that worked last week, RESPONDENTS ONLY

	Average # of hours worked last week		
	July (Round 2)	August (Round 3)	September (Round 4)
All	30	32	32
Tourism	51	64	31
Food Processing	51	59	57
Manufacturing	44	55	48
Professional/Scientific/Technical Activities	38	36	40
Health	36	34	38
Construction	34	31	38
Transportation	32	46	38
Personal Services	31	24	29
Financial/Insurance/Real Estate Services	31	35	42
Mining	29	15	42
Agriculture	27	30	24

Buying and Selling	26	28	36
Public Administration	24	37	49
Utilities	20	25	16
Education	4	20	26

Among respondents with wage work, the average number of hours worked last week is 30 in July and slightly higher to 32 in August and September. By sector, tourism, food processing and manufacturing recorded the highest average number of hours worked while education registered the lowest in July averaging 3.8 hours, but the hours increased in August and September.

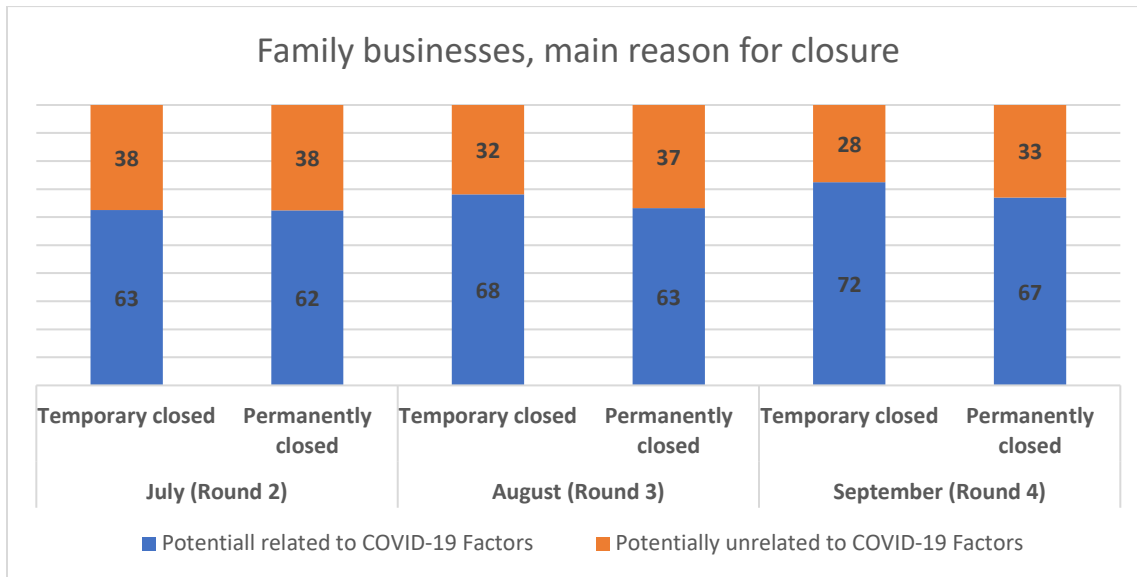
Figure 5 - 3 Change in hours worked last week



The share of respondents working more hours in July was about 11% but dropped almost by half to 5% in August and slightly rose to 7% in September. Those that worked less hours in July and August were about 37% of the respondents but in September, this share dropped to 28%.

5.4 Family businesses

Figure 5 - 4 Family businesses, main reason for closure



Family businesses that have closed were asked whether the closure was temporary or permanent. Whether temporary or permanent, the family businesses were also asked the reasons for closure. Reasons such as usual place of business closed due to COVID-19 legal guidelines; no customers/ fewer customers; can't get inputs; can't travel/ transport goods for trade; and ill/ quarantined due to COVID-19 were all considered to be potentially related to corona virus. Conversely, reasons such as usual place of business closed, other reasons; ill, other reason/disease; need to take care of a family member; seasonal closure; and vacation were considered potentially unrelated to corona virus.

Generally, the share of family businesses closed for reasons potentially related to corona virus are higher ranging from 63% in July to 72% in September among those temporary closed and from 62% in July to 67% in September among those permanently closed.

Table 5 - 6 Family businesses by sector

	May/June (Round 1)	July (Round 2)	August (Round 3)	(September) (Round 4)
Buying and Selling	60	63	53	59
Food Processing	14	11	17	0
Construction	6	5	4	4
Agriculture	5	3	2	0
Personal Services	5	5	10	10
Professional/Scientific/Technical Activities	3	4	3	4
Manufacturing	3	2	4	4

Transportation	3	3	4	4
Others	1	1	0	0

Buying and selling is the dominant sector among family businesses. Across all the survey rounds, over half of the family businesses are in this sector. Some seasonality was observed that it is likely correlated with the agricultural cycle where workers support the harvesting period and go back to no-farm related work in September. Food processing is the next dominant sector across the first three months of the survey rounds and dropped in the fourth month.

Table 5 - 7 Challenges NFE has faced due to COVID-19

	Percent of respondents with NFE, Round 3 (August)		
	All	Urban	Rural
Have changed or plan to change how business is conducted	19	15	21
Difficulty raising money for the business	67	65	68
Difficulty selling goods or services to customers	44	39	46
Difficulty buying and receiving supplies and inputs to run my business	29	30	29
Difficulty repaying loans or other debt obligations	24	16	26
Difficulty paying rent for business location	8	9	8
Difficulty paying workers	4	4	4

Households that had non-farm enterprise were asked if they changed or plan to change how business is conducted. About 20% confirmed changing the way their business is conducted. More households in rural areas (21%) than in urban changed the conduct of their business. The most reported challenge is difficulty to raise money for the business (67%) followed by difficulty to sell goods or services to customers (44%).

Table 5 - 8 Types of changes doing/planned for the Non-Farm Enterprise during 3rd Round (August)

Types of changes doing/planned (multiselect possible)	Percent of respondents that reported doing/plan to change how business is conducted in August (Round 3)		
	All	Urban	Rural
Require customers to wear masks	61	82	55
Maintain distance between customers	61	85	53
Reduce number of customers at a time	25	19	26
Switched to delivery only	3	2	4
Market products/services by phone/social media	2	8	0
Switched product/service offering	0	0	0

Other	29	16	32
-------	----	----	----

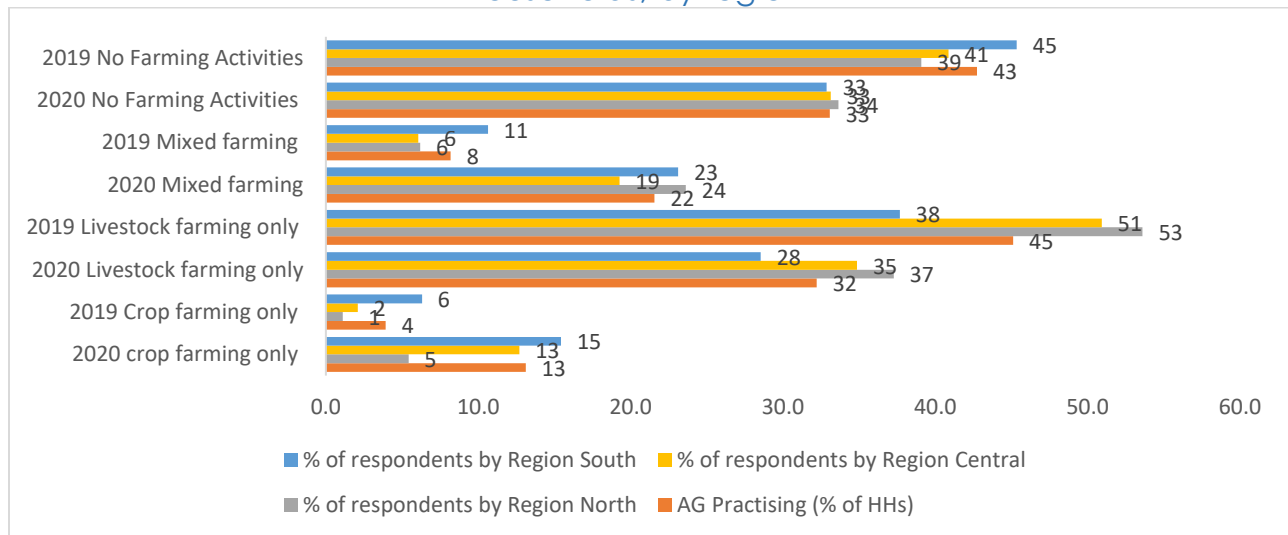
As a cost-effective coping strategy to the COVID-19 related challenges facing the non-farm enterprises the most reported change is to require customers wear masks (61%) and maintain a distance between customers (61%). Nearly a quarter has resorted to reduce number of customers at a time.

6.0 Agricultural Activities

Malawi has one main cropping seasons starting November to March /April and the dry farming or Dimba season starting May to October. The agricultural modules (crop and livestock) were include in round 1 in May/June and round 4 in September. In September, the interviewed households were asked if they practiced any agricultural activity during the 2020 Dimba season. To assess the COVID-19 impacts the data on participation in agriculture, data from September (2020 Dimba season) was compared with 2019 IHS Panel survey data. The results reveal that the share of households participating in agriculture during the Dimba season significantly increased in 2020 across all regions in Malawi as shown in Figure 6.1 below. The highest increase in agricultural activity was in the Southern Malawi followed by central and the least increase being in the Northern. Also, the share of households that did not participate in the farming activities declined by 10% and highest decline was Southern Malawi (12%), followed by central (8%) and last was Northern Malawi (5%). The result suggests that COVID-19 increased households' participation in agriculture.

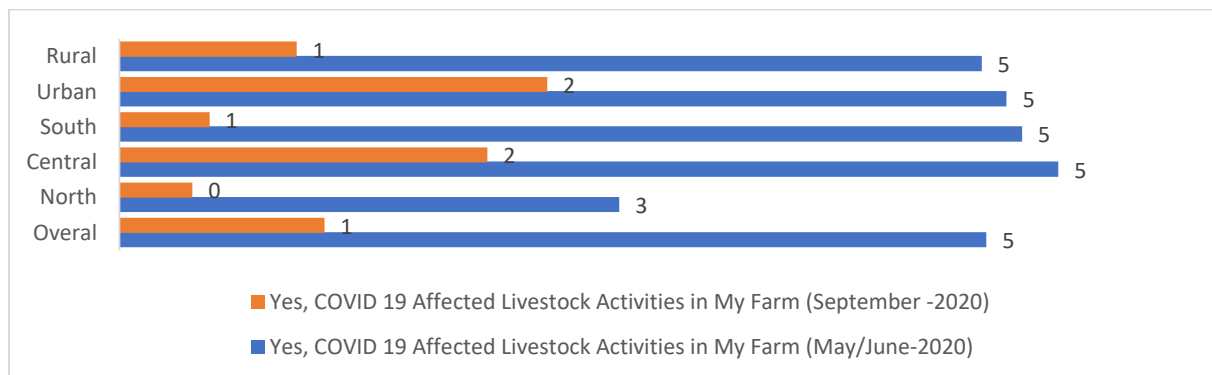
However, the share of households keeping livestock declined by 13% between 2019 and 2020 Dimba seasons. The greatest decline in livestock activity occurred in Northern Malawi (17%) followed by Central Malawi (16%) and lastly southern Malawi (9%). Again, suggesting that COVID-19 had negative effect on livestock farming. Overall, the results suggest that COVID-19 had positive impact on crop farming and negative impact on livestock farming. Households that grew dry season crops (Dimba farming) were asked the type of crops that they had grown and the results reveal that the most grown crops to be vegetables (26%) followed by maize (13%),beans (4%), Irish Potatoes (3%) and sweet potatoes (2%).

Figure 6. 1 Prevalence of Livestock and Dry/Dimba Season Crop Farming Households, by region



In May/June 2020 (Round 1) and in September 2020 (Round 4) Households that practiced livestock farming were asked if activities were affected by COVID-19. The results show that the share of livestock keeping households affected by COVID-19 declined from 5% to 1% probably because of the relaxation of the COVID-19 restrictions and declining cases over the same period. The results further show that the most affected livestock keeping households in both months were from the central followed by southern and last being Northern Malawi as shown figure 6.2. Similarly, the results also show that the most livestock keeping households in both months were those from urban areas compared to the rural areas.

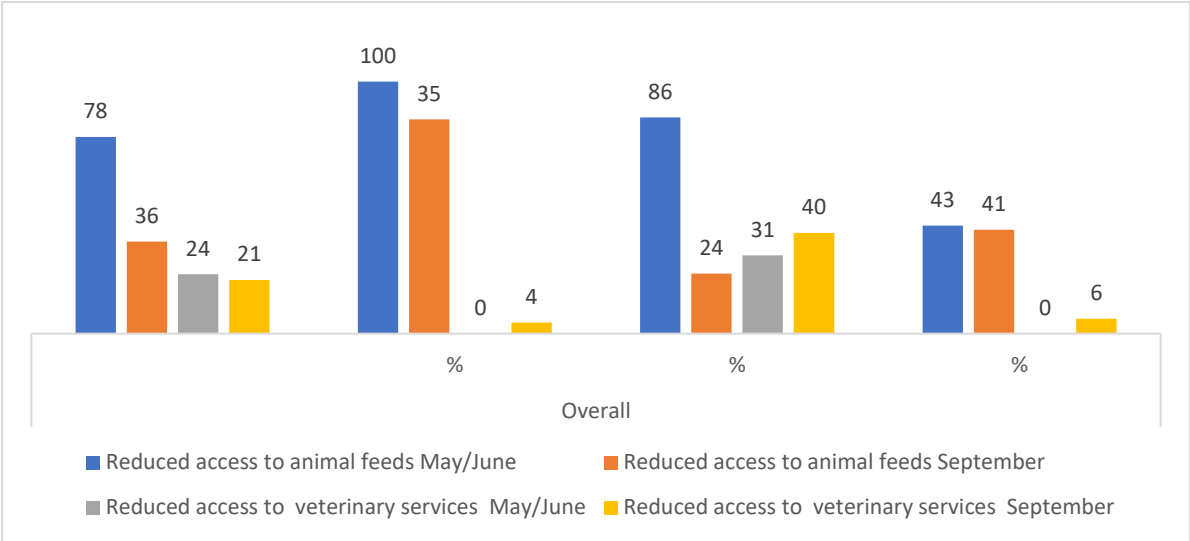
Figure 6. 2 Share of Livestock keeping households affected by COVID 19 in May/June and September by region and location



The livestock keeping households were also asked how COVID-19 affected their livestock farming activities the result revealed that the main effects of COVID-19

to livestock keeping households is reduced access to animal feeds and veterinary services. Overall, the share of livestock farming households reporting reduced access to animal feeds decline between May/June and September 2020. The decline in the share of households reporting reduced access to animal feeds was higher in central, north and least in the South. In the case of access to veterinary services, the difference in the share of the livestock keeping households reporting reduced access to veterinary services was small (insignificant) between the two months as shown in figure 6.3.

Figure 6. 3 Distribution of How COVID-19 affected Livestock keeping households in May/June and September by region and location



The households were further asked if they needed to sell their livestock and 30% confirmed they wanted to sell. Of these households, 61% were not able to sell their livestock. In the northern region, up to 82% of households were not able to sell their livestock compared to 59% in the south and 52% in the center. Households that sold their livestock were asked to compare what they normally sell to the revenues from livestock sales since mid-March 2020. About half of the respondents reported the revenue is not good and less than normal. 20% reported revenue is good and better than normal while 17% believe the revenue is average.

7.0 Shocks and Safety Nets

7.1 Shocks

Households were asked if they have been affected by any of the following shocks: - job loss; nonfarm business closure; theft/looting of cash and other property; disruption of farming, livestock, fishing activities; increase in price of farming/business inputs; fall in the price of farming/business output; lack of availability of farming/business inputs; increase in price of major food items consumed; and illness, injury, or death of income earning member of household.

Figure 7 - 1a: Number of shocks per household since mid-March

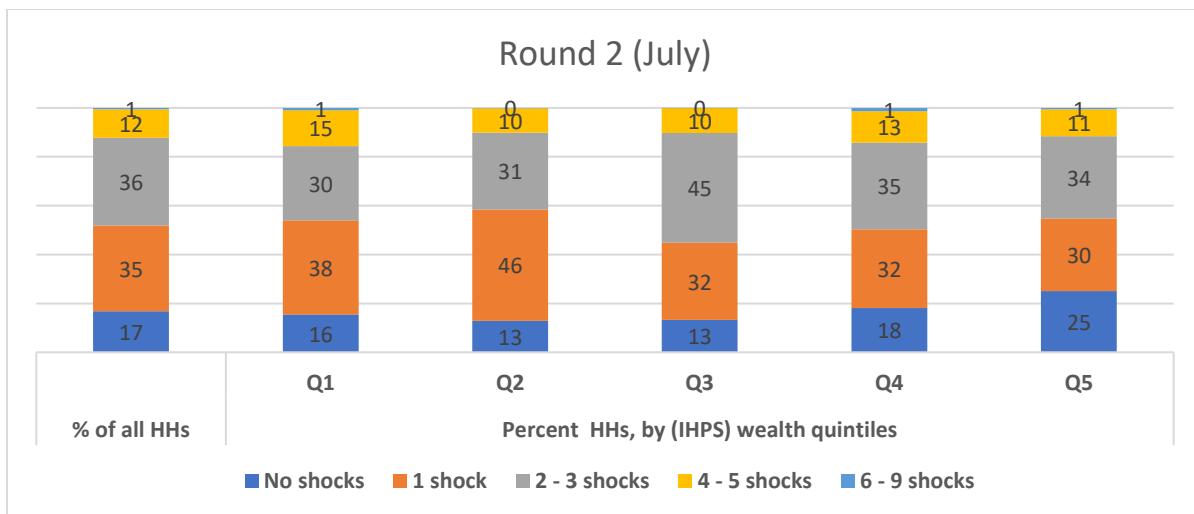
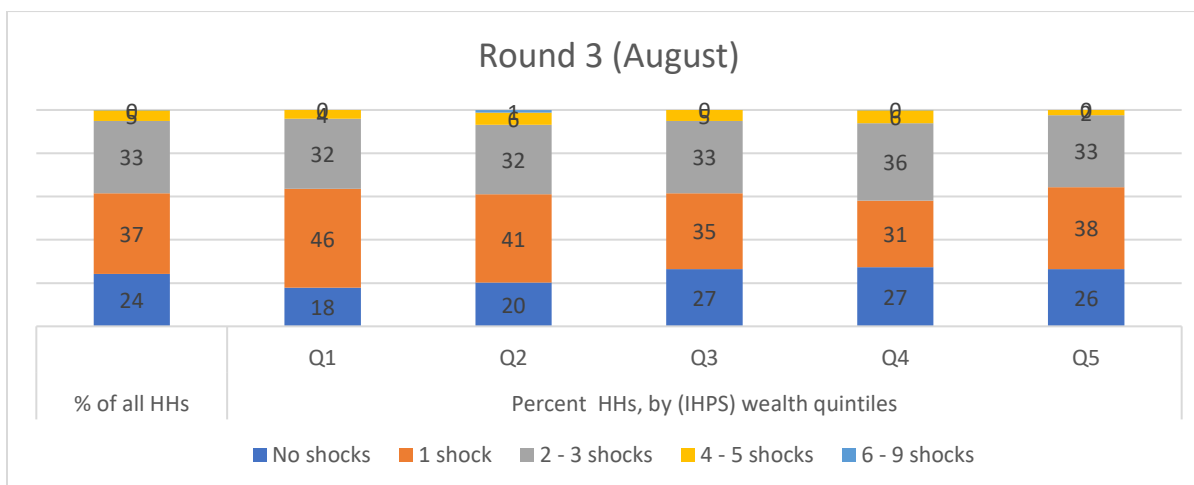


Figure 7 - 2b: Number of Shocks since July (Round 2)



During the July interviews (round 2), about 83% of households reportedly experienced a shock between mid-March and July. In August, during the third round of the survey, 76% of the households reportedly experienced a shock between the July interviews and the August interviews. 35% of households experienced one shock during July interviews while 37% experienced the same during the August interviews.

Across wealth quintiles, the share of households that did not experience any shock is higher among richer households which rely less in agricultural self-production. Most of the households experienced one to three shocks and this is true across all the wealth quintiles.

Table 7 - 1 Types of shocks, since last call (R2) & (R3)

	% of all HHs	% of HHs, by (IHPS) wealth quintiles					
		Q1	Q2	Q3	Q4	Q5	
Fall in the price of farming/business output	66	72	67	68	65	58	July (Round 2)
Increase in price of farming/business inputs	30	35	27	36	31	21	
Disruption of farming, livestock, fishing activities	29	26	27	32	30	28	
Theft/looting of cash and other property	16	15	17	15	18	14	
Job loss	14	7	17	14	10	19	
Increase in price of major food items consumed	10	14	7	8	14	9	
Nonfarm business closure	7	7	3	9	8	6	
Illness, injury, or death of income earning HH member	4	1	1	4	4	7	
Other (specify)	0	0	0	0	0	0	
Fall in the price of farming/business output	56	60	60	58	53	52	August (Round 3)
Disruption of farming, livestock, fishing activities	22	27	28	20	20	18	
Increase in price of farming/business inputs	18	16	23	15	23	11	
Theft/looting of cash and other property	12	9	10	11	17	9	
Job loss	10	6	14	11	7	13	
Increase in price of major food items consumed	10	9	10	12	11	6	
Nonfarm business closure	6	7	2	5	4	10	
Illness, injury, or death of income earning HH member	2	0	3	1	2	2	
Other (specify)	1	2	0	0	0	0	

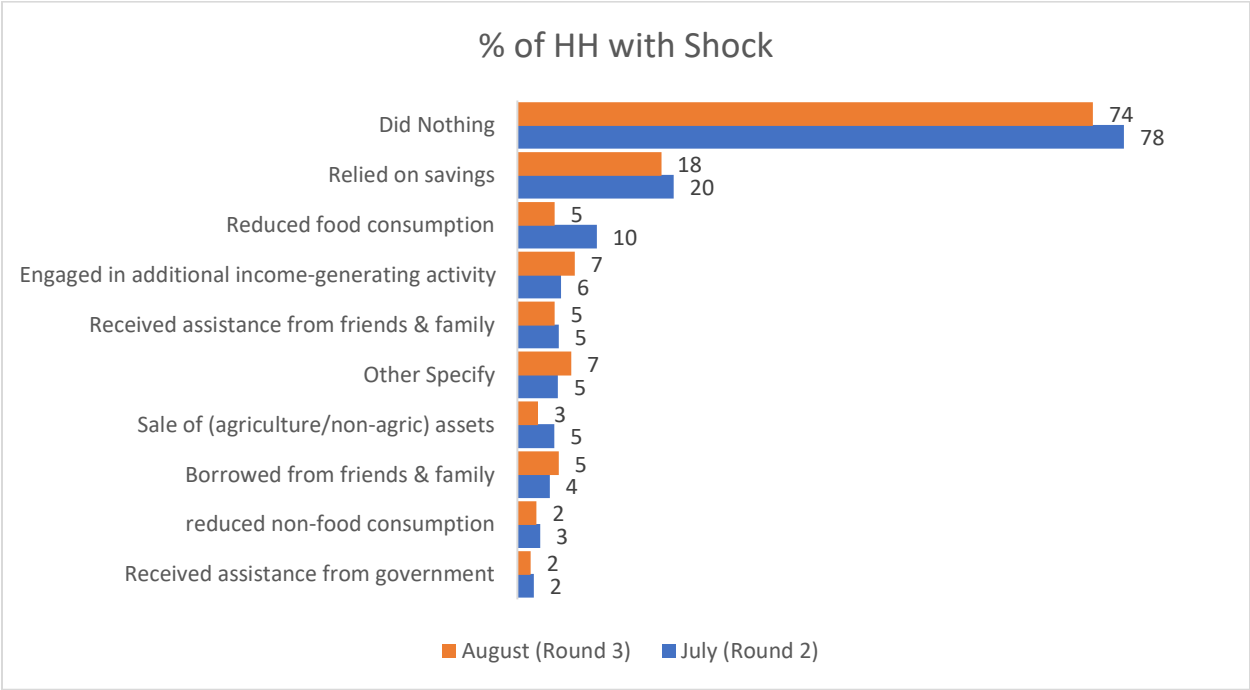
The most reported shock by households is fall in the price of farming/business output. This is reported by over half of households both in July (66%) and in August (56%). Increase in price of farming/business inputs and disruption of farming,

livestock, fishing activities became second and third respectively July but swapped positions in August.

More poor than rich households reported fall in the price of farming/business output 72% versus 58% in July and 60% versus 52% in August; and increase in price of farming/business inputs 35% versus 21% in July and 16% versus 11% in August.

7.2 Coping mechanisms

Figure 7 - 3 Coping mechanisms for shocks



Most of the households that experienced a shock did nothing as a coping mechanism against the shock. This is the case in both July and August. However, close to one in every five households relied on savings while 10% of households in July reduced food consumption but only 5% reported the same during the August. 6% of households reported that they engaged in additional income-generating activities in July and almost similar share (7%) in August.

7.3 Safety Nets

The first three rounds of the survey collected information on safety nets. During the first round in May/June, the reference period was mid-March while for July and August interviews, the reference period was last call. Respondents were therefore asked if any member of the household received any assistance from any

institution such as the government, international organization, religious bodies, excluding assistance from family and friends.

Table 7 - 2 Safety Nets since mid-Match(R1) last call (R2) & (R3)

Types of assistance, any institution	% of HHs	% of HHs, by (IHPS) wealth quintiles					% of respondents by residence		
		Q1	Q2	Q3	Q4	Q5	Urban	Rural	
Food	2	0	3	2	2	3	1	2	May/June (Round 1)
Direct cash transfers	1	4	3	0	1	0	0	2	
Average amount of cash transfer (in Kwacha)	17,861	8,489	27,313	9,826	22,519		11,887	18,309	
Other in-kind (not food) transfers	6	8	7	7	5	5	5	7	
Food	1	1	1	1	3	1	3	1	July (Round 2)
Social Cash Transfer, SCT (Mtukula Pakhoma)	0	0	0	0	1	1	0	0	
Average amount of SCT (in Kwacha)	8,695		16,052	24,000	9,014	4,052	500	8,870	
COVID-19 Urban Cash Intervention, CUCI (Mzati Pa Covid)	1	0	2	1	2	1	1	1	
Average amount of Mzati Pa COVID-19 (in Kwacha)									
Other cash transfers	1	0	1	0	2	1	0	1	
Other in-kind transfers (excluding food)	4	7	3	5	2	3	1	5	
Food	1	0	0	1	1	2	2	1	August (Round 3)
Social Cash Transfer, SCT (Mtukula Pakhoma)	1	1	3	1	1	1	0	2	
Average amount of SCT (in Kwacha)	19,172	14,000	24,808	15,755	13,625	19,916	35,091	18,259	
COVID-19 Urban Cash Intervention, CUCI (Mzati Pa Covid)	0	0	0	0	0	1	1	0	
Average amount of Mzati Pa Covid (in Kwacha)	31,683				36,000	30,214	31,683		
Other cash transfers	1	1	1	0	1	0	0	1	
Other in-kind transfers (excluding food)	2	1	3	2	2	1	1	2	

Social assistance is not abundant in Malawi. In May/June during the first round of the survey, about 2% of the households received food between mid-March and the interview date. In July (second round) and in August, the share of households that received food dropped to 1% in both survey rounds. In May/June, households were also asked if they received direct cash transfer of which 1% of households confirmed receiving. During the second and third rounds, direct cash transfer was split into Social Cash Transfer, SCT (Mtukula Pakhoma) and COVID-19 Urban Cash Intervention, CUCI (Mzati Pa COVID-19) to capture specific interventions. A very small share (0.4%) reportedly received Social Cash Transfer between May/June (R1) and July (R2). However, there was an increase in the share of households that received the same between July and August from 0.4% to 1.4%. COVID-19 Urban Cash Transfer was received by 1% of households between mid-March and May/June. But this share dropped to 0.2% the period between May/June and July.

The average amount of money received through direct cash transfer between mid-March and May/June is MK17,861. Between May/June and July, an average of MK8,695 was received through Social Cash Transfer and this average nearly doubled to MK19,172 between July and August. Although the amount of COVID-19 Urban Cash transfer was only collected in the third round (August) of the survey, the average amount is above MK30,000.

By place of residence, a slightly higher share of households in rural areas received food (2%) between mid-March and May/June than their urban counterparts (1%). However, the situation reversed between May/June and July as the share of urban households that received food was higher (3%) than rural households (1%) and for the period July and August recording 2% for urban and 1% for rural households.

Table 7 - 3 Source of Food Assistance since mid-March(R1) last call (R2) & (R3)

Main source of food assistance	% of HH that received food assistance	% of respondents by residence		
		Urban	Rural	
NGO	29	67	23	May/June (Round 1)
Religious bodies	26	11	28	
Government	23	8	25	
International Organization	8	3	9	
Community Organization	8	5	8	

Cooperative Companies	5	6	5	
Other	1	0	2	
NGO	46	56	44	July (Round 2)
Government	27	16	29	
Community Organization	10	0	12	
Cooperative Companies	8	10	7	
Religious bodies	7	18	5	
International Organization	2	0	3	
Other				
Government	54	49	56	August (Round 3)
NGO	19	39	14	
Community Organization	14	1	17	
International Organization	7	8	6	
Religious bodies	5	2	6	
Other	1	1	1	

Of the households that received food, the most reported source in May/June was Non-Governmental Organization (NGO) (29%) followed by religious bodies (26%) and government at 23%. During the second round, in July, NGOs remained the most reported source of food assistance (46%) and then the government come second (27%). In the third round, in August, government became the highest provider of food assistance (54%) followed by NGOs (19%).

In terms of rural-urban comparison, the share of respondents that received food assistance from NGOs is higher in urban areas than in rural areas across all the three survey rounds from May/June to August. Conversely, the share of households that received food assistance from the government is consistently higher in rural areas than urban areas across all the three survey rounds.