

| 1.14 | 1. Completed <br> 2. Incomplete <br> 3. Absent/no competent household member present <br> 4. Entire household absent for extended period of time/migrated out <br> 5. Postponed <br> 6. Dwelling vacant/no dwelling <br> 7. Dwelling destroyed <br> 8. Not eligible <br> 96.Other (specify) [ $\qquad$ <br> 97.Refused |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | INFORMED CONSENT |  |  |  | SKIP |
|  | My name is $\qquad$ [NAME OF FW] $\qquad$ . I am working with ............ [NAME ORGANISATION]. We are conducting a survey about nutrition. The information will be used to plan for interventions to improve nutrition of vulnerable groups in the community. Your household was selected for the survey. All the answers you give will be confidential and will not be shared with anyone other than members of our survey team. Your participation in the survey is voluntary and we hope you will agree to answer the questions since your views are important. If I ask you any questions you would not want to answer, just let me know and I will move on to the next question or you can stop the interview at any time. In case you need more information about the survey, you may contact.. $\qquad$ Do you have any questions? May I begin the interview now? |  | $\begin{aligned} & \text { 1.Yes -------- > } \\ & \text { 2.No --------- > } \end{aligned}$ |  | If Yes go to 1.12 <br> If No END THE INTERVIEW |
|  | RECORD START TIME (24 HOURS FORMAT) | $\underbrace{\mid}_{(\mathrm{HR})}\|\underset{\text { (MIN) }}{\mid}\|$ |  |  |  |
| 1.15 | HOUSEHOLD ID | \|___|__|_C_| | \|__| |  |  |
| 1.16 | HOUSEHOLD HEAD NAME |  |  |  |  |
| 1.17 | SEX OF HOUSEHOLD HEAD |  |  | 1. Male <br> 2. Female |  |
| 1.18 | AGE OF HOUSEHOLD HEAD (YRS) | \|-_|_-| |  |  |  |
| 1.19 | HOUSEHOLD FAMILY NAME (Surname) |  |  |  |  |


| 1.20 | CONTACTS OF HOUSEHOLD HEAD |  |
| :---: | :---: | :---: |
| 1.21 | ALTERNATIVE CONTACT | \| |
| 1.22 | RELATIONSHIP TO ALTERNATIVE CONTACT |  |

### 1.23. HOUSEHOLD SCHEDULE/ROSTER





## Instructions and Codes

| Q1 | Q3 | Q8 | Q10 |
| :---: | :---: | :---: | :---: |
| After listing the names, and recording the relationship and sex for each, ask if any other member child/infant to be sure that the listing is complete. <br> Then ask appropriate, questions in COLUMNS 5-13 FOR EACH person | 1.Household head <br> 2. Wife/ Husband <br> 3. Son / Daughter <br> 4.Son-in-law / daughter-in-law <br> 5. Grandchild <br> 6. Parent <br> 7. Parent- in- law <br> 8. Brother/ Sister <br> 9. Other relative <br> 10. Adopted/Foster/Stepchild <br> 11. Not related <br> 98. Don't know <br> 96. Other (specify). | 1. Married <br> 2. Currently Living Together <br> 3.Separated or Divorced <br> 4. Widowed <br> 5.Single/Never Married | 1. Pre-Primary <br> 2.Primary <br> 3.Secondary <br> 4.Tertiary <br> 5. None <br> 96. Other (Specify). |


| 1.0 |  | HOUSEHOLD DEMOGRAPHICS | SKIP |
| :---: | :---: | :---: | :---: |
| 1.1 | Which religion do you belong to $(\mathrm{HH}$ head)? | 1. Christian <br> 2. Muslim <br> 3. Traditional <br> 96. Other (Specify) |  |


| 1.2 | What is your ethnicity (HH head)? | 1. Turkana <br> 2. Samburu <br> 3. Pokot <br> 4. Somali <br> 96. Other (Specify). |  |
| :---: | :---: | :---: | :---: |
| 1.3 | What is your main occupation (HH head)? <br> If the household head is not the respondent, frame the question as follows: What is the main occupation of the household head? | 1. Livestock Herding <br> 2. Crop Farming/Own Farm Labour <br> 3. Employed (Salaried) <br> 4. Waged Labour (Casual) <br> 5. Petty Trade/Hawking (Handicraft I.E. Beading, Sale of Firewood, Charcoal) <br> 6. Merchant/Trader <br> 7. Self-employment (boda, boda) <br> 7. Fishing <br> 8. Domestic Work/House Manager <br> 9. Unemployed/None <br> 96. Other (Specify)......... |  |
| 1.4 | What is the main current source of income for the household? | 1. No Income <br> 2. Sale of Livestock <br> 3. Sale of Livestock Products <br> 4. Sale of Crops <br> 5. Petty Trading E.g. Sale of Firewood <br> 6. Casual Labour <br> 7. Permanent Job |  |

$\square$
8. Sale of Personal Assets
9. Remittance
10. Own Business (Merchant/Trader)
96. Other (Specify)


|  |  | M | Bed | 1 | 2 |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | N | Cupboard | 1 | 2 |  |
|  |  | O | Wall Clock | 1 | 2 |  |
|  |  | P | Microwave | 1 | 2 |  |
|  |  | Q | DVD Player | 1 | 2 |  |
|  |  | R | Cassette or CD Player | 1 | 2 |  |
|  |  | S | Other (Specify) | 96 | 96 |  |
| 2.2 | Does any of your household members own the following assets? | Items |  |  |  | No |
|  |  | A | Watch |  | 1 | 2 |
|  |  | B | Bicycle |  | 1 | 2 |
|  |  | C | Motorcycle |  | 1 | 2 |
|  |  | D | An Animal Drawn Cart |  | 1 | 2 |
|  |  | E | A Car Or A Truck |  | 1 | 2 |
|  |  | F | Agricultural Equipment |  | 1 | 2 |
|  |  | G | Fishing Equipment |  | 1 | 2 |
|  |  | F | Other Specify |  | 96 | 96 |
| 2.3 | Does your household receive a cash transfer or any social assistance from the government? | 1. Yes |  |  |  | If No skip to Q2.5 |
| 2.4 | For what reason does the household receive the cash transfer or social assistance? <br> Any other reasons? | 1. Orphaned Children 18 Years Or Younger <br> 2. Elderly Person <br> 3. Persons With Severe Disability <br> 4. Urban Food Subsidy |  |  |  |  |


|  | MULTIPLE RESPONSES ALLOWED. | 5. Food Aid <br> 6. Health Voucher <br> 7. Food/Cash For Work <br> 8. School Feeding <br> 9. Hunger Safety Net Programme <br> 10. Household has a child in supplementary feeding program <br> 96. Other (Specify)........ |  |
| :---: | :---: | :---: | :---: |
| 2.5 | What is the MAIN type of fuel your household uses for cooking? | 1. Firewood <br> 2. Charcoal <br> 3. Electricity <br> 4. LPG/Natural Gas <br> 5. Biogas <br> 6. Paraffin /Kerosene <br> 7. Coal/Lignite <br> 8. Straw/Shrubs/Grass <br> 9. Agricultural Crop(Dried Maize Stocks/Maize Cobs) <br> 10. Animal Dung <br> 96. Other (Specify) ....... |  |
| 2.6 | Where does your/this household do most of its cooking? | 1. In The House <br> 2. In A Separate Building <br> 3. Outdoors/Open Air <br> 96. Other (Specify). |  |
| 2.7 | What is the MAIN source of lighting for this household? | 1. Electricity KPLC <br> 2. Kerosene/Paraffin |  |



|  |  | b) Thatch/Grass/Makuti <br> c) Dung/Mud/Sod <br> 2. Rudimentary Roofing <br> a) Iron Sheets <br> b) Tin Cans <br> 3. Finished Roofing Asbestos Sheet <br> a) Concrete <br> b) Tiles <br> 96. Other (Specify) |  |
| :---: | :---: | :---: | :---: |
| 2.10 | Main material of the external walls (RECORD OBSERVATION) | 1. Natural Walls <br> a) No Walls <br> b) Cane/Palm/Trunks <br> c) Dung/Mud/Sod <br> 2. Rudimentary Walls <br> a) Bamboo With Mud <br> b) Stone With Mud <br> c) Plywood <br> d) Cardboard <br> e) Reused Wood <br> f) Iron Sheets |  |


|  |  | 3. Finished Walls <br> a) Cement <br> b) Stone With Lime/Cement <br> c) Bricks <br> d) Cement Blocks <br> e) Wood Planks/Shingles <br> 96.Other(Specify) |  |
| :---: | :---: | :---: | :---: |
| 2.11 | How many rooms are in this house? | ............Rooms |  |
| 2.12 | How many rooms in this house are used for sleeping? | .............Rooms |  |
| 2.13 | Does your household own this structure, do you pay rent or live here without paying rent? | 1.Owns <br> 2.Pays Rent/ Lease <br> 3.No Rent/Consent From Owner <br> 4.No Rent /Squatters |  |
| 2.14 | Does any member of this household own any agricultural/grazing land? | $\begin{aligned} & \hline \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ | $\begin{aligned} & \text { If No skip } \\ & \text { to Q2.16 } \end{aligned}$ |
| 2.15 | a) How many acres or hectares of agricultural /grazing land? <br> Acres / hectares: if $\mathbf{9 9 5}$ or more, record '995.0' in appropriate box. | Acres. $\qquad$ <br> Hectares. $\qquad$ <br> Don’t Know $\qquad$ |  |


| 2.16 | Does this household currently own any livestock, herds, other farm animals or poultry? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ |  |  | $\begin{array}{\|l} \hline \text { If No skip } \\ \text { to Q3.0 } \end{array}$ |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 2.17 | How many of the following animals does this household currently own? <br> If None', Enter 00 <br> If 95 Or More Enter 95 <br> If Unknown Enter 98 |  | LIST | Number |  |
|  |  | A | Local Cattle/Indigenous |  |  |
|  |  | B | Grade Cattle |  |  |
|  |  | C | Donkeys |  |  |
|  |  | D | Camels |  |  |
|  |  | E | Goats |  |  |
|  |  | F | Sheep |  |  |
|  |  | G | Chickens |  |  |
|  |  | H | Other (Specify) $\qquad$ |  |  |
| 3.0 | SOCIO-ECONOMIC CHARACTERISTICS |  |  |  | SKIP |
| 3.1 | What is the MAIN source of income for the household in the last 4 months? | 1.N 2.S 3.S 4.S 5.P 6.C 7.P | Income <br> of Livestock <br> of Livestock Products <br> of Crops <br> ty Trading e.g. Sale Of Firewood/Beading <br> ual Labour <br> manent Job |  |  |



| 3.2.5 | Over the past 7 days, did the household either purchase/consume/acquire any meat or fish? | $\begin{array}{ll} \text { 1. Yes } \\ \text { 2. No } \end{array}$ |  |
| :---: | :---: | :---: | :---: |
| 3.2.6 | Over the past 7 days, did the household either purchase/consume/acquire any ripe bananas? | $\begin{array}{ll} \hline \text { 1. Yes } \\ \text { 2. } & \text { No } \end{array}$ |  |
| 3.2.7 | Does your household own any towels? | $\begin{array}{ll} \text { 1. Yes } \\ \text { 2. No } \end{array}$ |  |
| 3.2.8 | Does your household own any thermos flasks? | $\begin{array}{ll} \text { 1. Yes } \\ \text { 2. No } \end{array}$ |  |
| 3.2.9 | What is the predominant wall material of the main dwelling unit? | 1. Finished walls (cement, stone with lime/cement, bricks, cement blocks, covered adobe, or wood planks/shingles) <br> 2. Uncovered adobe, plywood, cardboard, reused wood, or corrugated iron sheets <br> 3. Natural walls (cane/palm/trunks, grass/reeds, or mud/cow dung), no walls, bamboo with mud, stone with mud, or other |  |
| 3.2.10 | What is the predominant floor material of the main dwelling unit? | 1. Natural floor (earth/sand or dung) or palm/bamboo <br> 2. Other (including wood planks/shingles, parquet or polished wood, vinyl or asphalt strips, ceramic tiles, cement, or carpet) |  |


|  | HOUSEHOLD WEALTH RANKING (PERCEPTION) |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 3.3 | According to the community wealth ranking system, how do you or other people classify your household? |  |  | 1. Rich <br> 2. Middle/Average <br> 3. Poor |  |  |
| 3.4 | How many people in your household earn some income that directly benefits the household? |  |  |  | $\ldots$ |  |
| 4.0 | FOOD CONSUMPTION |  |  |  |  | SKIP |
| 4.1 | Now I am going to read several statements about your household food situation. |  |  |  |  |  |
|  | Behaviours: In the past $\mathbf{7}$ days, if there have been times when you did not have enough food or money to buy food, how many days has your household had to: |  |  |  |  |  |
|  | A | A | Rely on less preferred and les foods? |  |  |  |
|  | B | B | Borrow food, or rely on help relative? | friend or |  |  |
|  | C | C | Purchase food on credit? |  |  |  |
|  | D | D | Gather wild food, hunt, or har crops? | mature |  |  |



|  |  | a) Protected Spring <br> b) Unprotected Spring |  |
| :---: | :--- | :--- | :--- |
|  |  |  | 5. Rainwater <br> 6. Tanker Truck <br> 7. Cart With Small Tank <br> 8. Water Kiosk <br> 9. Surface Water (River/Dam/Lake/Pond/Stream/Canal/Irrigation <br> Channel) |
|  |  | 10. Packaged Water <br> a) Bottled Water <br> b) Sachet Water |  |
| 5.2 | 96. Other (Specify).......... |  |  |


| 5.5 | How do you TYPICALLY/USUALLY treat your drinking water? <br> MULTIPLE RESPONSES ALLOWED | 1. Filter Water <br> 2. Boil <br> 3. Water Guard/Aqua Tabs/Other Chemical (Chlorine <br> 4. Sitting To Settle/ Sedimentation <br> 5. Use Water Filter (Ceramic, Sand, Composite) <br> 6. Pot Filter <br> 7. Uv Rays From The Sun/ Solar <br> 8. Sieve Through Cloth <br> 9. Traditional Herb <br> 96. Other (Specify)........ |  |
| :---: | :---: | :---: | :---: |
| 5.6 | When was the last time your household treated water for drinking? | 1. Today <br> 2.Yesterday <br> 3. Within The Last One Week <br> 4. Within The Last Two Weeks <br> 5. Within The Last One Month <br> 6. More Than One Month Ago <br> 98. Do Not Remember |  |
| 5.7 | Where does your household store water for drinking? | 1. Open Container/Jerrican <br> 2. Closed Container/Jerrican <br> 96. Other (Specify)...... |  |
| 5.8 | How many 20 litre jerrican of water does your household NORMALLY use per day? | ___ Number of 20 Litre Jerrican |  |


| 5.9 | How much water did your household use YESTERDAY (excluding for animals)? | $\ldots$ Number of 20 Litre Jerrican |  |
| :---: | :---: | :---: | :---: |
| 5.10 | In the last 2 weeks, has the water from your main source been unavailable for at least one day? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2. No } \end{aligned}$ | $\begin{aligned} & \text { If No, skip } \\ & \text { to Q5.12 } \end{aligned}$ |
| 5.11 | How would you rate the quality of water from your main source in the last one week? | 1. Very Clean <br> 2. Satisfactory <br> 3. A Bit Dirty <br> 4. Very Dirty |  |
| 5.12 | Do you USUALLY pay for this water? | $\begin{aligned} & \text { 1. Yes } \\ & \text { 2. No } \end{aligned}$ | If No, skip to Q5. 14 |
| 5.13 | How much per 20 litre jerrican? | _Ksh/201trs |  |
| 5.14 | How much is paid/spent per month? | __Ksh |  |
| 5.15 | Are there seasonal variations in access to water? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2. No } \end{aligned}$ | If No, skip to Q5.17 |
| 5.16 | If YES, which season is short of access to water? | 1. Rainy Season (April to June) <br> 2. Dry Season (October to December) <br> 96. Other (Specify) ...... |  |
|  | SECTION 2: HOUSEHOLD WATER INSECURITY EXPERIENCES (HWISE) SCALE [ASK THE FOLLOWING QUESTIONS FOR THE LAST FOUR WEEKS] |  |  |


| 5.17 | How frequently did you or anyone in your household worry you would not have enough water for all of your household needs? | 0. Never (0 Times) <br> 1. Rarely ( $1-2$ Times) <br> 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) <br> 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don’t Have This |  |
| :---: | :---: | :---: | :---: |
| 5.18 | How frequently has your main water source been interrupted or limited (e.g., low water pressure, less water than expected, river dried up)? | 0 . Never (0 Times) <br> 1. Rarely (1-2 Times) <br> 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) <br> 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don’t Have This |  |
| 5.19 | How frequently does your household have problems with water that clothes could not be washed? | 0 . Never (0 Times) <br> 1. Rarely (1-2 Times) <br> 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) <br> 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don’t Have This |  |
| 5.20 | How frequently have you or anyone in your household had to change schedules or plans due to problems with your water situation? (Activities that may have been interrupted | 0 . Never (0 Times) <br> 1. Rarely (1-2 Times) |  |


|  | include caring for others, doing household <br> chores, agricultural work, income-generating <br> activities, etc.) | 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) |  |
| :---: | :--- | :--- | :--- |
| 5.21 | 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don't Have This |  |  |


|  |  | 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don’t Have This |  |
| :---: | :---: | :---: | :---: |
| 5.24 | How frequently has there not been as much water to drink as you would like for you or anyone in your household? | 0. Never (0 Times) <br> 1. Rarely (1-2 Times) <br> 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) <br> 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don't Have This |  |
| 5.25 | How frequently did you or anyone in your household feel angry about your water situation? | 0. Never (0 Times) <br> 1. Rarely (1-2 Times) <br> 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) <br> 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don't Have This |  |
| 5.26 | How frequently have you or anyone in your household gone to sleep thirsty because there wasn't any water to drink? | 0. Never (0 Times) <br> 1. Rarely (1-2 Times) <br> 2. Sometimes (3-10 Times) <br> 3. Often (11-20 Times) <br> 4. Always (More Than 20 Times) <br> 98. Don't Know and not Applicable/Don't Have This |  |



| 5.31 | How far is the toilet facility from the house? | 1. Within The Compound <br> 2. Outside The Compound, < 5 Minutes <br> 3. Outside The Compound, 5-10 Minute <br> 4. Outside The Compound, >10 Minutes |  |
| :---: | :---: | :---: | :---: |
| 5.32 | Does your household pay to use the toilet facility? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ |  |
| 5.33 | Do you or your household wash hands with clean water? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ | $\begin{aligned} & \text { If No skip } \\ & \text { to Q5.35 } \end{aligned}$ |
| 5.33a | If yes, do you or members of your household wash hands with soap? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ |  |
| 5.34 | When do you or members of your household wash their hands? | 1. After Visiting Toilet <br> 2. Before Eating <br> 3. Before Preparing Food <br> 4. After Handling Child's Waste <br> 5. Before Feeding A Child <br> 96. Other (Specify) ........ |  |
| 5.35 | Where has your household MAINLY disposed of garbage/waste in the last 4 weeks? <br> MULTIPLE RESPONSES ALLOWED | 1. Garbage Dump <br> 2. In The River <br> 3. On The Road/In Drainage Or Trench <br> 4. In Private Pit <br> 5. In Public Pit <br> 6. Garbage Disposal Services <br> 7. Burning |  |


|  | 8. No Designated Place/All Over <br> 96. Other (Specify) |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 6.0 | HOUSEHOLD SHOCKS EXPERIENCED |  |  |  |  |  | SKIP |
|  |  | Q 6.1 | Q6.2 | Q6.3 | Q6.4 | Q6.5 |  |
|  | SHOCKS/STRESS <br> EXPERIENCED | Did your household experience any shock within the 4 months? <br> 1.Yes <br> 2. No <br> If No skip <br> to Q6.11 | How many times over the last 4 months has your household experienced the shock ( s )? <br> >>Next shock | How severe was the impact on your household's income over the last 4 months? <br> (See Code) <br> Only ask if Q 6.1=1 | How severe was the impact on your household’ s food consumptio n over the last 4 months? <br> Only ask if Q6.1 =1 | To what extent has your household been able to recover from [the shock] you experienced over the last 4 months? <br> (See Code) <br> Only ask if Q6.1 =1 |  |
|  | CLIMATIC SHOCKS |  |  |  |  |  |  |
|  | a) Excessive rains /flooding |  |  |  |  |  |  |
|  | b) Variable rain/drought |  |  |  |  |  |  |
|  | BIOLOGICAL SHOCKS |  |  |  |  |  |  |
|  | c) Livestock disease outbreak |  |  |  |  |  |  |


| d) Crop pests' invasion <br> (locust) |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| e) Crop disease outbreak |  |  |  |  |
| f) Weeds outbreak |  |  |  |  |
| g) Human disease outbreak <br> (cholera etc.) |  |  |  |  |
| h) Severe illness |  |  |  |  |
| i) COVID 19 |  |  |  |  |
| CONFLICT SHOCKS |  |  |  |  |
| j) Theft/destruction of assets |  |  |  |  |
| k) Theft of livestock |  |  |  |  |
| l) Domestic violence |  |  |  |  |
| m) Community conflict |  |  |  |  |
| ECONOMIC SHOCK |  |  |  |  |
| n) Loss of livelihood/laying |  |  |  |  |
| off |  |  |  |  |
| o) Increased food prices |  |  |  |  |
| p) Decreased prices for |  |  |  |  |
| agricultural or livestock |  |  |  |  |
| products |  |  |  |  |
| q) Increased prices of <br> agricultural or livestock |  |  |  |  |


|  | inputs |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  | r) Loss of land/rental property (evictions/demolitions) |  |  |  |
|  | s) Unemployment for youths |  |  |  |
|  | t) Loss/death of household member |  |  |  |
|  | u) Delay in food assistance |  |  |  |
|  | v) Delay in other safety net programs or remittances from family members |  |  |  |
|  | w) Fire |  |  |  |
|  | zz). Other Shocks (Specify) |  |  |  |
|  | Codes | Q6.4 <br> 1. No impact <br> 2. Slight decrease <br> 3. Severe decrease <br> 4. Worst ever happened <br> 97.Refused <br> 98. Don't know | Q6.5 <br> 1.Did not recover <br> 2. Fully recovered, same as before the shock <br> 3. Fully recovered and better than before the shock <br> 4. Partially recovered <br> 5. Not affected by [event] <br> 97.Refused <br> 98. Don't know |  |


|  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 6.5a | Did you or your household use any of the following strategies to cope with any shock/stress over the last 4 months? <br> Read list; MULTIPLE RESPONSES ALLOWED |  |  |  |  |
|  | LIVESTOCK, AGRICULTURE, AND LAND HOLDINGS | $\begin{aligned} & \text { 1.YES } \\ & \text { 2.NO } \end{aligned}$ | COPING STRATEGIES TO GET MORE FOOD OR MONEY | $\begin{aligned} & \text { 1.YES } \\ & \text { 2.NO } \end{aligned}$ |  |
|  | a. Sent livestock in search of pasture |  | m. Took up new/additional work (casual labour, wage labour) |  |  |
|  | b. Sold livestock |  | n. Sold household items (e.g., radio, bed) |  |  |
|  | c. Slaughtered livestock |  | o. Sold productive assets (e.g., plough, water pump) |  |  |
|  | d. Leased out land |  | p. Took out a loan (with interest) from a (formal) bank |  |  |
|  | MIGRATION |  | q. Took out a loan (with interest) from a Sacco/cooperative or village savings group |  |  |
|  | e) HH member migrated for work |  | r. Took out a loan (with interest) from a money-lender/mobile money |  |  |
|  | f. Migrate (the whole family) |  | s. Took out a loan (no interest) from friends |  |  |



|  | zz .other (specify)... |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
| 6.7 | If YES for 6.2 a) flooding, how did it affect <br> your household? | 1.Destruction of Property Including Residential House <br> 2. Destruction of School/Road Infrastructure <br> 3. Disease Outbreak <br> 4. Loss of Lives <br> 5. Livestock Loss <br> 7. Crop Loss |  |


|  |  | k) Less Crop Production/Decreased Food Stocks |  |  |
| :---: | :---: | :---: | :---: | :---: |
|  |  | 1) Increase In Food Prices |  |  |
|  |  | zz) Other (Specify) [___ ] |  |  |
| 6.9 | If YES, for 6.2 d ) crops pests' invasion, how did it affect the environment? <br> MULTIPLE RESPONSES ALLOWED | 1. Destroyed Crop <br> 2. Destroyed Grazing Grass <br> 96. Other (Specify).... |  |  |
| 6.10 | How did any of the above SHOCKS/events pose a challenge to your household? <br> Instruction: (Probe for all challenges experienced) <br> MULTIPLE RESPONSES ALLOWED | 1. The Shocks Did Not Challenge The Household <br> 2. Difficulty/Reduced Earnings/Income <br> 3. Difficulty in Meeting Survival Threshold for Food <br> 4. Difficulty in Meeting Survival Threshold for Grazing Land <br> 5. Decrease Access to Market/Goods/Foods <br> 6. Decreased in Market Value of Livestock/Farm Products <br> 7. Increased Debt in The Household <br> 8. Reduction in Coping Strategies <br> 96. Other (Specify) ....... |  |  |
| 6.11 | What have you done to protect your household from the impact of shocks in the future? <br> [Read list; MULTIPLE RESPONSES ALLOWED | 1. Nothing <br> 2. Increased Savings <br> 3. Put Aside Grains (For HH or Animals) <br> 4. Switched to Different Crop(s) <br> 5. Switched to Different Livestock |  |  |


|  |  | 6. Added Additional Agricultural Activity <br> 7. Added Additional Non-Agricultural Activity <br> 8. Diversified into Agricultural Livelihood <br> 9. Diversified into Non-Agricultural Activity <br> 10. Changed from Agriculture to Non Agriculture Livelihood <br> 11. Changed from Non-Agriculture to Agriculture Livelihood <br> 12. Acquired Crop Insurance <br> 13. Acquired Livestock Insurance <br> 14. Acquired Other Insurance (e.g., Health) <br> 15. Relocated Temporarily <br> 16. Relocated Permanently <br> 96. Other (Specify)...... <br> 98. Don't Know |  |  |
| :---: | :---: | :---: | :---: | :---: |
| 6.11 | In the last one week, was there COVID-19 infection in your area/village? | 1. Yes <br> 2. No <br> 98. Don't know |  | $\begin{aligned} & \text { If No, skip } \\ & \text { to Q7.1 } \end{aligned}$ |
| 6.12 | How do you rate your feeling towards/about COVID-19 | a) I am nervous when I think about current circumstances | 1.Most or All of the Time <br> 2.Occasionally <br> 3.Some or a Little of the Time <br> 4.Rarely |  |


|  |  | b) I am calm and relaxed |
| :---: | :---: | :---: |
|  |  | c) I am worried about my health |
|  |  | d) I am worried about the health of my family members |
|  |  | e) I feel stressed about leaving my house |
| 6.13 | In the last one week, have you or your household missed a meal due to COVID-19 related disruptions? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2. No } \end{aligned}$ |
| 6.14 | In the last one week, did COVID-19 affect your household livelihood? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2. No } \end{aligned}$ |
| 6.14a | If yes, how was your household affected? | 1. Reduced income due to limit livestock products/petty trade <br> 2. Loss of employment <br> 3. Inaccessibility to casual labo <br> 4. Affected boda, boda busines <br> 5. Sale of productive assets to $m$ <br> 6. Movement restriction impact <br> 96. Other (specify) |
| 7.0 | SOCIAL SAFETY N | AND ECONOMIC SAFET |
| 7.1 | Do you or any other household member regularly save cash? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2. No } \end{aligned}$ |
| 7.2 | Where are the savings primarily held? | 1. At Home |


|  |  | 2. Mobile Phone Banking <br> 3. Sacco/Cooperative/Village Savings Group <br> 4. Bank <br> 5. NGO <br> 6. Microfinance Institution <br> 96. Other (Specify) $\qquad$ <br> 98. Don't Know |  |
| :---: | :---: | :---: | :---: |
| 7.3 | Who primarily decides how savings are used in the household? | 1. Yourself <br> 2. Your Spouse/Partner <br> 3. You and Your Spouse /Partner Jointly <br> 4. Yourself and Other HH Jointly <br> 5. Yourself or Your Partner and Other HH Member Jointly <br> 96. Other (Specify)...... <br> 98 Don’t Know |  |
| 7.4 | Have you or anyone in the household borrowed money from someone else in the last 4 months? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ | If No, skip to Q7.5 |
| 7.4a | If NO, why not? | 1. Didn't Need <br> 2. Couldn't Find a Loan That Met My Needs" (i.e. "Is Appropriate" In Terms of Size, Terms, Etc.) <br> 3. Afraid I Couldn't Pay Back | All <br> responses <br> should <br> skip to <br> Q7.7 |


|  |  | 4. No Loan Providers in My Area <br> 5. Do Not Like to Be in Debt <br> 6. Cannot Qualify (E.G., No Collateral) <br> 7. Process Is Too Long <br> 96. Other (Specify) <br> 97. Refused <br> 98. Don’t Know |  |
| :---: | :---: | :---: | :---: |
| 7.5 | What was the source of the loan? | 1. Bank <br> 2. Cooperatives Sacco <br> 3. Table Banking <br> 4. Chama/Village Savings Group <br> 5. Mobile Apps <br> 6. Friends <br> 7. Family <br> 8. Money Lender/Shylock <br> 9. Religious Group <br> 10. Local Merchant/Trader <br> 96. Other (Specify)...... |  |
| 7.6 | If Yes, what was the reason for borrowing the money? | 1. Purchase Food <br> 2. Purchase Other Household Items |  |


|  |  | 3. Health Care Expenses <br> 4. School Fees <br> 5. Invest in Business <br> 6. Purchase of Livestock <br> 7. Purchase of Farm Inputs <br> 8. Personal Needs <br> 96. Other (Specify) $\qquad$ |  |
| :---: | :---: | :---: | :---: |
| 7.7 | Has any of your household members received any financial support i.e. cash transfer in the last 4 months? | $\begin{aligned} & \hline \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ | $\begin{aligned} & \text { If No skip } \\ & \text { to Q8.0 } \end{aligned}$ |
| 7.8 | If YES, what is the source? | 1. Government Programs (Elderly, OVC) <br> 2. County Government <br> 3. Non-Governmental Organisations <br> 4. Faith Based Organisation/Church <br> 5. Remittance <br> 6. Gift <br> 96. Other (Specify) .... |  |
| 7.9 | What was the mode of transfer used for the financial support? | 1. Bank <br> 2. Mobile Networks <br> 3. Cash |  |


|  |  | 4. Vouchers <br> 5. Food Aid <br> 96. Others (Specify)...... |  |
| :---: | :---: | :---: | :---: |
| 7.10 | If from the Government or NGO, how were you selected to get the support? | 1. Attended A Meeting Organized by The Organization <br> 2. Filled Forms for Support <br> 96. Other (Specify) |  |
| 7.11 | Did the financial support, you received, come at the time indicated? | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2.No } \end{aligned}$ | If No skip to Q7.14 |
| 7.12 | How long did it take for you to receive the financial support? | .........................$D a y s ~$ .........................Months |  |
| 7.13 | If there were delays in receiving the financial support what are the reasons? | 1. Delay in The Organization /Government Financial Transfer <br> 2. Network Challenges <br> 3. Lack of Transport to Go Pick the Cash Transfer <br> 4. Lack of Phone to Know When the Cash Transfer Comes In <br> 5. Was Away When the Cash Transfer Came Through <br> 96. Other (Specify) ....... <br> 98. Don't Know |  |
| 7.14 | Are there any government or NGO programmes or activities in this village that | $\begin{aligned} & \text { 1.Yes } \\ & \text { 2. No } \end{aligned}$ | If No skip to Q7.15 |



|  |  | C. Health | 1 | 98 |
| :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |

