

Research Terms of Reference

COVID-19 KAP Survey, April – July 2020

SYR2009

Syria

April 2020
Version 1

REACH Informing
more effective
humanitarian action

1. Executive Summary

Country of intervention	Syria		
Type of Emergency	<input type="checkbox"/> Natural disaster	<input checked="" type="checkbox"/> Conflict	
Type of Crisis	<input type="checkbox"/> Sudden onset	<input type="checkbox"/> Slow onset	<input checked="" type="checkbox"/> Protracted
Mandating Body/ Agency	Risk Communication and Community Engagement Covid-19 Task Force for NES		
Project Code	16DVV – 16DSQ – 16DSO		
Overall Research Timeframe (from research design to final outputs / M&E)	09/04/2012 to 31/07/2020		
Research Timeframe Add planned deadlines (for first cycle if more than 1)	1. Start collect data: 16/04/2020	4. Data sent for validation: 28/04/2020	
	2. Data collected: 23/04/2020	5. Outputs sent for validation: 4/05/2020	
	3. Data analysed: 27/04/2020	6. Outputs published: 6/05/2020	
Number of assessments	<input type="checkbox"/> Single assessment (one cycle) <input checked="" type="checkbox"/> Multi assessment (more than one cycle) <i>Approximately once every three weeks for a total of three cycles</i>		
Humanitarian milestones Specify what will the assessment inform and when e.g. The shelter cluster will use this data to draft its Revised Flash Appeal;	Milestone	Deadline	
	<input type="checkbox"/> Donor plan/strategy	__/__/__	
	<input type="checkbox"/> Inter-cluster plan/strategy	__/__/__	
	<input type="checkbox"/> Cluster plan/strategy	__/__/__	
	<input type="checkbox"/> NGO platform plan/strategy	__/__/__	
	<input checked="" type="checkbox"/> Other (Specify): Ongoing work of RCCE Covid-19 TF in NES	Ongoing Commencing end of March; untl date TBD	
Audience Type & Dissemination Specify who will the assessment inform and how you will disseminate to inform the audience	Audience type	Dissemination	
	<input type="checkbox"/> Strategic	<input checked="" type="checkbox"/> General Product Mailing (e.g. mail to NGO consortium; HCT participants; Donors)	
	<input checked="" type="checkbox"/> Programmatic	<input type="checkbox"/> Cluster Mailing (Education, Shelter and WASH) and presentation of findings at next cluster meeting	
	<input checked="" type="checkbox"/> Operational	<input checked="" type="checkbox"/> Presentation of findings (e.g. at HCT meeting; Cluster meeting)	
	<input type="checkbox"/> [Other, Specify]	<input checked="" type="checkbox"/> Website Dissemination (Relief Web & REACH Resource Centre)	
		<input type="checkbox"/> [Other, Specify]	

Detailed dissemination plan required	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No
General Objective	To inform COVID-19 risk communication and community engagement in Northeast and Northwest Syria by providing relevant information on public knowledge, attitudes, and practices surrounding the virus.			
Specific Objective(s)	To reach this general objective, the assessment aims to: <ol style="list-style-type: none"> 1. Provide humanitarian actors with a better understanding of public knowledge about COVID-19 symptoms, preventative measures, and susceptibility. 2. Provide humanitarian actors with a better understanding of public attitudes toward COVID-19 including perceptions about the likelihood of contracting COVID-19 and attitudes toward preventative measures. 3. Provide humanitarian actors with a better understanding of practices in relation to COVID-19 such as social distancing and avoiding physical contact with others. 			
Research Questions	<ol style="list-style-type: none"> 1. What do people know about COVID-19? <ol style="list-style-type: none"> a. What are the main information sources? b. Which of these sources are most trusted? 2. How do people perceive COVID-19 risks and associated risk reduction measures and to what extent do people practice these measures? 3. How do age, gender, number of recorded cases of COVID-19, and health impact the likelihood that people will practice social distancing? 			
Geographic Coverage	Areas under self-administration of Hasakeh, Deir-ez-Zor, Ar-Raqqah, and Aleppo governorates and opposition held areas of Idleb and Aleppo governorates.			
Secondary data sources	Main sources include: UNHCR covid-19 specific KAP survey in several camps in NES conducted in April 2020 and Population Task Force numbers on populations as well as media, open source reports, humanitarian reports from UN agencies and other humanitarian bodies.			
Population(s) <i>Select all that apply</i>	<input checked="" type="checkbox"/>	IDPs in camp	<input checked="" type="checkbox"/>	IDPs in informal sites
	<input checked="" type="checkbox"/>	IDPs in host communities	<input type="checkbox"/>	IDPs [Other, Specify]
	<input type="checkbox"/>	Refugees in camp	<input type="checkbox"/>	Refugees in informal sites
	<input type="checkbox"/>	Refugees in host communities	<input type="checkbox"/>	Refugees [Other, Specify]
	<input checked="" type="checkbox"/>	Host communities	<input type="checkbox"/>	[Other, Specify]
Stratification <i>Select type(s) and enter number of strata</i>	<input checked="" type="checkbox"/>	Geographical: 2 groups NWS and NES Population size per strata is known? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	Group #: _ _ _ Population size per strata is known? <input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	[Other Specify] #: _ _ Population size per strata is known? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Data collection tool(s)	<input checked="" type="checkbox"/>	Structured (Quantitative)	<input type="checkbox"/>	Semi-structured (Qualitative)
	Sampling method		Data collection method	
Structured data collection tool # 1	<input checked="" type="checkbox"/> Purposive <input type="checkbox"/> Probability / Simple random		<input type="checkbox"/> Key informant interview (Target #): _ _ _ _ _ <input type="checkbox"/> Group discussion (Target #): _ _ _ _ _	

Select sampling and data collection method and specify target # interviews	<input type="checkbox"/> Probability / Stratified simple random <input type="checkbox"/> Probability / Cluster sampling <input type="checkbox"/> Probability / Stratified cluster sampling <input type="checkbox"/> Other 2-stage random sampling		<input type="checkbox"/> Household interview (Target #): _____ X Individual interview (Target #): 1,400 ¹ <input type="checkbox"/> Direct observations (Target #): _____ <input type="checkbox"/> [Other, Specify] (Target #): _____	
Target level of precision if probability sampling	N/A – Non-probability sample implemented in this assessment		N/A	
Data management platform(s)	X	IMPACT	<input type="checkbox"/>	UNHCR
	<input type="checkbox"/>	[Other, Specify]		
Expected output type(s)	<input type="checkbox"/>	Situation overview #: __	<input type="checkbox"/>	Report #: __
	<input type="checkbox"/>	Presentation (Preliminary findings) #: __	<input type="checkbox"/>	Presentation (Final) #: __
	<input type="checkbox"/>	Interactive dashboard #: __	<input type="checkbox"/>	Webmap #: __
	<input type="checkbox"/>	[Other, Specify] #: __		
Access	X	Public (available on REACH resource center and other humanitarian platforms)		
	<input type="checkbox"/>	Restricted (bilateral dissemination only upon agreed dissemination list, no publication on REACH or other platforms)		
Visibility Specify which logos should be on outputs	REACH			

2. Rationale

2.1. Rationale

While the extent to which the COVID-19 pandemic affected Syria is not known precisely due to limited testing and identification capacities across the country and while the number of confirmed cases is relatively low², the risk of outbreak is considered to be high. The damage to the infrastructure as well as other effects of the conflict resulted in significant strain on public services, including health, which constitutes additional challenges to implementation of preventive and response measures on the part of communities and local administrative bodies alike³. While various measures, including awareness raising campaigns, are being implemented across the country by different country⁴, the extent to which these are effective in impacting practices and ensuring that communities are aware of the nature of the risks posed by COVID-19 and how to mitigate them remains largely unknown. Therefore, there is a need to monitor the impact of COVID-19 related interventions over time in order to identify intervention gaps and inform targeting of humanitarian action.

At the request of the Risk Communication and Community Engagement (RCCE) COVID-19 Task Force for NES, REACH is undertaking a survey to gauge knowledge, attitudes, and practices toward COVID-19 in Northeast Syria. The survey will also be implemented in Northwest Syria. The survey will be conducted in three cycles so that trends in knowledge, attitudes, and practices can be tracked over time and the efforts of operational actors engaged in risk communication and community engagement can be calibrated to the evolving context. The principal means of communicating the findings will be series of

¹ This number provides 800 respondents for NES and 600 for NWS. There are two primary reasons for determining the sample size as such. First, to calibrate across selected variables, large sample is needed to ensure sufficient number of respondents for each level of each variable. Second, as three independent variables in each model for the vignette experiment will be included, it is necessary to ensure sufficient statistical power.

² As of April 15, 2020 <https://www.worldometers.info/coronavirus/>

³ https://www.impact-repository.org/document/reach/d10d2fdd/REACH_SYR_Factsheet_SYR2007_16APR20.pdf

⁴ <https://www.humanitarianaccesssteam.org/reports/weekly/weekly-report-1-7-april-2020>

factsheets accompanying each round of the assessment which will be made publically accessible and shared with relevant clusters to inform their programming. The findings will be further shared by the through presentations to NGO fora, working groups, and clusters in cases this is deemed appropriate to ensure the widest dissemination and usage of the results of the assessment.

3. Methodology

3.1. Methodology overview

Operational actors need to understand the knowledge, attitudes, and practices of the population in NES and NWS so that they can design appropriate risk communication campaigns and adapt these campaigns as needed. Such information is most appropriately collected at the individual level. However, restrictions on movement imposed to prevent the spread of COVID-19 preclude the preferred methodology of area based sampling. Random digit dialling (RDD) is also unfeasible. Therefore, respondents for the survey will have to be selected through a purposive, non-probability sampling approach.

Enumerators will be instructed to seek respondents for the panel from a wide range of ages, socioeconomic backgrounds, educational backgrounds and to include rural as well as urban respondents, IDPs as well as host community respondents, and respondents from camp. Enumerators will identify at least 1,400 respondents through their own existing networks as well as on the reference of other respondents (snowballing), with the first cycle interviews taking place between April 16 and 25. Enumerators will contact respondents and potential respondents by phone. The conduct of this assessment as a panel study will allow for tracking developments in knowledge, attitudes, and practices related to COVID-19 across different population groups over time. This is an important feature and the added value that the present assessment has as it will allow for better understanding of the effectiveness of the measures and response to COVID-19.

To ensure that this approach will still yield the best possible information, three design elements have been included. First, the survey will be conducted as a panel so that results can be compared across cycles. Second, efforts will be made to include a diverse group of respondents, and responses will be calibrated. Third, a randomized vignette experiment will provide key information on the interaction of age, gender, health, and confirmed COVID-19 cases on social distancing.

2.2. Population of interest

All adults in NWS and NES constitute the population of interest for this survey. The population in these areas comprises of host community members, IDPs and returnees. While members of all these population groups will be included in the sample, the primary groups of interest are male and female adults living in different geographical areas with primary focus on the regions level (i.e. NES and NWS).

2.3. Secondary data review

UNHCR has recently conducted a KAP survey in several camps and sites in NES. The findings and tool have been considered in the design of this tool and any relevant comparisons between the UNHCR findings and the findings from this KAP survey will be noted in the output. Data from the Population Task Force will be used to set soft quotas for data collection. Other relevant from REACH, UN agencies, and other humanitarian bodies, and media and open source reports will also be reviewed.

2.4. Primary Data Collection

Respondents for this survey will be selected through a purposive sampling methodology in which field teams will attempt to achieve the following quotas.⁵

⁵ The indicated quota are indicative and dependent on the ability of the field team to access sufficient number of respondents belonging to different population groups. The level of disaggregation will be ultimately determined by the data collected. Disaggregation by gender thus might be possible only for larger geographical areas.

Region	Governorate	Quota/Sample size	Male	Female
NES	Al-Hasakeh	300	400	400
NES	Ar-Raqqa	200		
NES	Deir-ez-Zor	100		
NES	Aleppo (NES)	200		
NWS	Aleppo (NWS)	300	300	300
NWS	Idleb	300		

Data collection for the first cycle will begin on April 16, 2020 and is expected to continue through April 23, 2020. Data will be collected via telephone calls. Enumerators will record respondents answers on a Kobo form.

The survey itself is modeled on the template developed by WHO, UNICEF, and IFRC in the RCCE Action Plan Guidance⁶ and has been adapted to the Syrian context in line with input from the RCCE Covid-19 Task Force for NES and other relevant actors.

2.5. Data Processing & Analysis

Incoming data will be checked and follow-up will be done with field teams for any anomalies. Submitted raw data will be cleaned based on follow up responses and all changes to the data will be logged. The cleaning process will take place on ongoing basis as the raw data become available on daily basis and data collection progresses using Microsoft Excel. These steps will be guided by “IMPACT Data Cleaning Minimum Standards Checklist” to ensure that data is reliable.

For statistical analysis of the clean dataset, an R script will be developed. While every variable will be utilized in the statistical analysis, particular focus will be centered on variables specifically related knowledge, awareness and practices of different population groups. Precise parameters of disaggregation of the findings cannot be pre-determined until the data is collected. However, the principle that will guide the disaggregation will be reliability of the findings for given population group (which will be in turn dependent on number of cases falling into different categories/population groups).

In the analysis process, the data will be calibrated against representative data collected in January on the variables of gender, age, geography (most likely at the district level), status (IDP, host community, etc.), household size, household employment status, shelter type and status, and water used for agricultural/husbandry by using a generalized regression estimator (GREG). While calibration cannot assure representative results for a nonprobability survey, calibration and similar techniques (namely raking) have been demonstrated to reduce bias and improve estimation for nonprobability samples.⁷ Two additional variables, from the January dataset, source of water and sufficiency of water, will also be included in the KAP survey in order to benchmark the results of calibration and if appropriate adjustments will be made to the variables used in calibration.

For the first cycle, descriptive analysis will be conducted for relevant variables and in subsequent cycles additional analysis will be conducted to explore any relevant trends in changes over time. If appropriate, such changes will be analyzed to

⁶[https://www.unicef.org/media/65936/file/Preparedness%20for%20and%20response%20to%20coronavirus%202019%20\(COVID-19\).pdf](https://www.unicef.org/media/65936/file/Preparedness%20for%20and%20response%20to%20coronavirus%202019%20(COVID-19).pdf)

⁷ See Richard Valliant and Jill A. Dever. “Estimating Propensity Adjustments for Volunteer Web Surveys,” *Sociological Methods & Research*, 2011 and associated literature.

provide relevant information to operational actors about difference in changes over time between groups (as defined by gender, age, urban/rural, etc.).

The survey also includes a vignette experiment that consists of two vignettes. The first vignette consists of twelve versions and the second of eight versions. Respondents will be randomly assigned to a version of each vignette. Logistic or linear probability regressions will be used to estimate the impact of several variables on the likelihood of a hypothetical person leaving the house. The responses “very likely” and “likely” will be binned and compared against “neutral,” “unlikely,” and “very unlikely.”

The key variable in the first vignette is the number of confirmed cases of COVID-19 in NES/NWS. The key variable in the second vignette is whether the person in question feels well or feels like s/he might be getting a cold. Both vignettes also include variables for age and gender that will be randomized. The regression models will help operational actors understand what demographics are most likely (and most unlikely) to practice social distancing under different circumstance so that operational actors are able to efficiently allocate resources.

The complexity of the analysis outlined above and the requirements it makes on quality of data collection in the challenging context Syria make alternative analysis strategies necessary. In case that data collection and data quality do not allow for application of the original analysis plan, the data collected will be analysed in line with one of the following scenarios:

- 1) Descriptive statics on the raw data are calculated and it is sufficiently clarified that the sample is unbalanced in many ways.
- 2) The data is calibrated so that it's more balanced and more closely reflects the demographics, etc. of our populations of interest. Subsequently, descriptive statics for this calibrated data are calculated.
- 3) The vignette experiment is undertaken while proper randomization of all the vignettes versions is verified. If randomization cannot be verified, the vignette experiment will be dropped. Logistic regression is then applied with results being published only if the analysis yields coherent, explicable and credible outcome.

In order to achieve the best possible results in terms of reception and use of the assessment results, the findings will be published in a factsheet where graphic exposition of the findings will be complemented by substantial explanatory and complementary text. Given the complex methodology and analysis involved in producing the findings, increased care will have to be made to present findings in accessible and comprehensible manner to non-specialist audience. While the specific content of the factsheet will be only determined once the findings are available, it will be informed by information gaps and needs identified by partners (especially those represented at RCCE). For the reasons mentioned above, presentations on findings accompanying the distribution of the factsheet through various fora will be important part of dissemination.

4. Roles and responsibilities

Table 2: Description of roles and responsibilities

Task Description	Responsible	Accountable	Consulted	Informed
<i>Research design</i>	Senior Assessment Manager	Senior Assessment Manager	Technical Advisor GIS Officer HQ Research Design Unit	Country Coordinator
<i>Supervising data collection</i>	Assessment Officer	Assessment Officer	Technical Advisor GIS Officer	Country Coordinator

			HQ Research Design Unit	
<i>Data processing (checking, cleaning)</i>	Assessment Officer	Assessment Officer	Technical Advisor HQ Data Analysis Unit	Country Coordinator
<i>Data analysis</i>	Assessment Officer	Senior Assessment Manager	Technical Advisor HQ Data Analysis Unit	Country Coordinator
<i>Output production</i>	Assessment Officer	Senior Assessment Manager	Technical Advisor HQ Reporting Unit HQ Assessment Unit	Country Coordinator
<i>Dissemination</i>	Assessment Officer	Assessment Officer	Technical Advisor HQ Communication Unit Country Coordinator	Clusters Coordinator
<i>Monitoring & Evaluation</i>	Assessment Officer	Assessment Officer	Technical Advisor HQ Research Design Unit	Country Coordinator
<i>Lessons learned</i>	Assessment Officer	Assessment Officer	Technical Advisor HQ Research Design Unit	Country Coordinator

Responsible: the person(s) who executes the task

Accountable: the person who validates the completion of the task and is accountable of the final output or milestone

Consulted: the person(s) who must be consulted when the task is implemented

Informed: the person(s) who need to be informed when the task is completed

5. Data Analysis Plan

Research questions	IN #	Data collection method	Indicator / Variable	Questionnaire Question	Questionnaire Responses	Data collection level
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Basic Information and Biodata	A.1. 1	Individual interview	Enumerator code	1.1 Enter enumerator name / code:	enter text	Individual
	A.1. 2	Individual interview	Consent	1.1.1 This assessment is to collect information about coronavirus (COVID-19) in Northeast Syria. The information will be used to inform the humanitarian response effort, although the survey is not part of any specific assistance programme. Any information that you provide will be kept strictly confidential and anonymous. This information will help humanitarian organisations understand the current situation in North-East Syria and how to better respond to the threat of coronavirus (COVID-19). If you are willing to participate in this survey, we'd like to contact you every few weeks as the situation evolves. However, this survey is voluntary and you can choose not to answer any or all of the questions if you want. Do you consent to participate in the survey?	NA	Individual
	A.1. 3	Individual interview	Location-Governorate	1.2 Select governorate	select from itemset	Individual
	A.1. 4	Individual interview	Location-District	1.3 Select district	select from itemset	Individual
	A.1. 5	Individual interview	Location-Subdistrict	1.4 Select sub-district	select from itemset	Individual
	A.1. 6	Individual interview	Location-Community	1.5 Select community	select from itemset	Individual
	A.1. 7	Individual interview	Name of respondent	1.6 Name of the respondent	enter text	Individual
	A.1. 8	Individual interview	Gender of respondent	1.7 Gender of the respondent	Male/Female	Individual
	A.1. 9	Individual interview	Age of respondent	1.8 Age of the respondent	enter number	Individual
	A.1. 10	Individual interview	Marital status of respondent	1.9 What is your marital status?	Single/Divorced/Married/Widow/Separated	Individual
	A.1. 11	Individual interview	Health status of respondent	1.10 Do you have any chronic disease?	Yes/No/Don't know	Individual
	A.1. 12	Individual interview	Health status of respondent	1.11 Do you have difficult seeing even when you wear glasses?	Yes/No/Don't know	Individual
	A.1. 13	Individual interview	Health status of respondent	1.12 Do you have difficulting hearing even when you use a hearing aid?	Yes/No/Don't know	Individual
	A.1. 14	Individual interview	Health status of respondent	1.13 Do you have difficulty moving or walking up stairs?	Yes/No/Don't know	Individual

A.1.15	Individual interview	Health status of respondent	1.14 Do you have difficulty communicating? Do you have difficulty understanding people or do they have difficulty understanding you?	Yes/No/Don't know	Individual
A.1.16	Individual interview	Health status of respondent	1.15 Do you have difficulty remembering or focusing?	Yes/No/Don't know	Individual
A.1.17	Individual interview	Health status of respondent	1.16 Do you have difficulty caring for yourself? For example dressing or showering?	Yes/No/Don't know	Individual
A.1.18	Individual interview	Status of respondent	1.17 Is the responder from the host community or are they an IDP?	Host community/IDP	Individual
A.1.19	Individual interview	HH size	1.18 Number of household members including respondent	enter number	Individual
A.1.20	Individual interview	Income of HH	1.19 Did you or anyone in your household work (most of the time) in the last three months?	Yes/No/Don't know	Individual
A.1.21	Individual interview	Income of HH	1.20 How many persons from your household worked (most of the time) during the last three months?	enter number	Individual
A.1.22	Individual interview	Income of HH	1.15 Which of the following best describes the work of person?	Own business/Employee (worker with regular income)/Daily wage (some days)	Individual
A.1.23	Individual interview	Shelter of HH	1.16 What type of shelter do you and your family live in?	Tents_in_an_IDP_camp_ Tents_out_of_an_IDP_camp_ Makeshift_shelter_(made_with_found_bought_materials) School /Mosque_or_other_religious_building_ /Municipal_building_ /Warehouse/Factory /Container/Other_non-residential_building_(garage_shop_etc) /Other/No_answer	Individual
A.1.24	Individual interview	Shelter of HH	1.17 Other	enter text	Individual

	A.1. 25	Individual interview	Shelter of HH	1.18 What is your household's occupancy situation?	Owner occupier/ Renting with formal agreement/ Co-renting with other household(s)/ Hosted for free/ Squatting (informal occupancy without permission from owner)/ Not applicable / Other	Individual
	A.1. 26	Individual interview	Shelter of HH	1.18.1 Other	enter text	Individual
	A.1. 27	Individual interview	Water access of HH	1.19What water source did yourhousehold use the most in the last 30 days?	Network (in the house/shelter unit)/Water trucking/Open well/Closed well/Bottle/Springs/ River/lake/Other	Individual
	A.1. 28	Individual interview	Water access of HH	1.20 Other	enter text	Individual
	A.1. 29	Individual interview	Water access of HH	1.21Do you use water from these sources for agricultural purposes (farming, animal watering)?	Yes/No/Don't know	Individual
	A.1. 30	Individual interview	Water access of HH	1,22 did you have enough water in the last 30 days to meet your household needs?	Yes/No/Don't know	Individual
1. What do people know about COVID-19? a. What	B.1. 1	Individual interview	Knowledge of COVID-19	1.23 Have you heard about COVID-19?	Yes/No/Don't know	Individual

are the main information sources ? b. Which of these sources are most trusted?	B.1. 2	Individual interview	Information source on Covid-19	2.1 Where / from whom do you currently get most of your information about COVID-19?	From people (family, friends, neighbours, colleagues)/ Social media/messaging apps (Whatsapp, Telegram, Facebook, Instagram, etc/ Radio / television/ Newspapers/ Health worker at health facility/ Health worker via door-to-door campaign/ Community/religious leader / Other/ Don't know/	Individual
	B.1. 3	Individual interview	Information source on Covid-19	2.2 Specify other	enter text	Individual
	B.1. 4	Individual interview	Trusted information source on Covid-19	2.3 Which source channel do you most trust to give you reliable information on COVID-19?	Word of mouth (family, friends, neighbours, colleagues)Social media/messaging apps (Whatsapp, Telegram, Facebook, Instagram, etc/Radio / television/Newspapers/Health worker at health facility/Health worker via door-to-door campaign/Community/religious leader /Other/Don't know/None	Individual
	B.1. 5	Individual interview	Trusted information source on Covid-19	2.4 Specify other	enter text	Individual

B.1.6	Individual interview	Knowledge of COVID-19	2.5 Who do you think is most likely to get seriously ill from the coronavirus?	Everyone (cannot select with other options)/ Elderly (60+)/ Adults (19-59)/ Children (0-18)/ Pregnant / lactating women/ Health workers/ People with pre-existing conditions i.e. people with asthma, heart trouble, etc./ Other/ Don't know	Individual
B.1.7	Individual interview	Knowledge of COVID-19	2.6 Specify other	enter text	Individual
B.1.8	Individual interview	Knowledge of COVID-19	2.7 How can a person get COVID-19?	Drinking/washing in infected water/ Eating certain foods/ Air borne (other people coughing / sneezing)/ Physical contact with infected people/ Physical contact with contaminated object/surface/ breastmilk/breastfeeding/ Other/ Don't know	Individual
B.1.9	Individual interview	Knowledge of COVID-19	2.8 Specify other	enter text	Individual
B.1.10	Individual interview	Knowledge of COVID-19	2.9 Does everyone who has COVID-19 show signs and symptoms?	Yes/No/Don't know	Individual
B.1.11	Individual interview	Knowledge of COVID-19	2.10 What are the signs and symptoms of someone with COVID-19?	Fever Coughing/ Diarrhoea/ Sneezing/ Headache/ Rash/ Joint / muscle pain/ Vomiting/ Other/ Don't know	Individual
B.1.12	Individual interview	Knowledge of COVID-19	2.11 Specify other	enter text	Individual
B.1.13	Individual interview	Knowledge of mitigation measures	2.12 Do you think you can take measures to reduce the chance of getting COVID-19?	Yes/No/Don't know	Individual

	B.1.14	Individual interview	Knowledge of mitigation measures	2.13 How can you reduce the chance of getting COVID-19?	Reduce contact with other people by avoiding crowds, staying home, increasing physical distance between oneself and others, etc. / Stop shaking hands/kissing/ Wearing a face mask / Wearing gloves/ Washing hands/ Disinfecting/cleaning objects and surfaces/ Praying/ Other/ Don't know	Individual
	B.1.15	Individual interview	Knowledge of mitigation measures	2.14 Specify other	enter text	Individual
1. How do people perceive COVID-19 risks and associated risk reduction measures and to what extent do people practice these measures?	C.1.1	Individual interview	Practices of social distancing	4.1 In the past week, did you greet anyone with a handshake or kiss?	Yes/No/Don't know	Individual
	C.1.2	Individual interview	Practices of social distancing	4.2.0 Have you left the house during the past week?	Yes/No/Don't know	Individual
	C.1.3	Individual interview	Practices of social distancing	4.2 In the past week, did you visit friends and family outside of your home?	Yes/No/Don't know	Individual
	C.1.4	Individual interview	Practices of social distancing	4.3 In the past week, did you leave your home to go to work?	Yes/No/Don't know	Individual
	C.1.5	Individual interview	Practices of social distancing	4.4 In the past week, did you attend any large gatherings like public prayers, a funeral, or a wedding?	Yes/No/Don't know	Individual
	C.1.6	Individual interview	Practices of social distancing	4.5 In the past week when you were outside of your home did you try to keep a distance of two meters between yourself and everyone else?	Yes/No/Don't know	Individual
	C.1.7	Individual interview	Practices of social distancing	4.6 In the past week, did you wash your hands more than normal?	Yes/No/Don't know	Individual
	C.1.8	Individual interview	Practices of social distancing	4.7 In the past week, did you stay at home more than normal?	Yes/No/Don't know	Individual

	C.1.9	Individual interview	Response to Covid-19	4.8 What would you do if you think you or someone in your household might have coronavirus ?	Nothing, continue life as normal/ Stay home/ Stay home and isolate from other family members/ Call a doctor/medical professional/ Go to a doctor's office/clinic / Go to a hospital/ Other / Don't know	Individual
	C.1.10	Individual interview	Response to Covid-19	4.9 specify other	enter text	Individual
	C.1.11	Individual interview	Response to Covid-19	4.10 Since you heard about COVID 19 have you taken any action to prevent yourself or your household from getting COVID 19	Yes/No/Don't know	Individual
	C.1.12	Individual interview	Barriers to preventative measures	4.11 What barriers (if any) have inhibited you from taking preventative action?	don't have any barriers/Lack_of_knowledge/_don't_know_what_to_do/_Lack_of_money/_have_to_keep_working_to_provide/Lack_of_money/can't_buy_items_like_soap,_hand_sanitizer,_masks,_etc./Lack_of_time/_don't_have_time_to_take_preventative_measures_/Other/Not_sure	Individual
3. How do age, gender, number of recorded cases of COVID	D.1.1	Individual interview	Barriers to preventative measures	4.11 specify other	enter text	Individual
	D.1.2	Individual interview		G3_Randomized vignette experiment	NA	Individual
	D.1.3	Individual interview	Attitudes to COVID-19	5.1 Reem is 36. Imagine there are 0 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Reem to leave her house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual

-19, and health impact the likelihood that people will practice social distancing?	D.1. 4	Individual interview	Attitudes to COVID-19	5.2 Reem is 36. Imagine there are 10 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Reem to leave her house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1. 5	Individual interview	Attitudes to COVID-19	5.3 Reem is 36. Imagine there are 100 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Reem to leave her house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1. 6	Individual interview	Attitudes to COVID-19	5.4 A woman is 64 years old. Imagine there are 0 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Reem to leave her house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1. 7	Individual interview	Attitudes to COVID-19	5.5 A woman is 64 years old. Imagine there are 10 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Reem to leave her house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1. 8	Individual interview	Attitudes to COVID-19	5.6 A woman is 64 years old. Imagine there are 100 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Reem to leave her house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1. 9	Individual interview	Attitudes to COVID-19	5.7 Mohammad is 36. Imagine there are 0 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Mohammad to leave his house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual

	D.1.10	Individual interview	Attitudes to COVID-19	5.8 Mohammad is 36. Imagine there are 10 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Mohammad to leave his house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1.11	Individual interview	Attitudes to COVID-19	5.9 Mohammad is 36. Imagine there are 100 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Mohammad to leave his house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1.12	Individual interview	Attitudes to COVID-19	5.18 Mohammad is 64. Imagine there are 0 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Mohammad to leave his house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1.13	Individual interview	Attitudes to COVID-19	5.19 Mohammad is 64. Imagine there are 10 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Mohammad to leave his house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1.14	Individual interview	Attitudes to COVID-19	5.20 Mohammad is 64. Imagine there are 100 confirmed cases of COVID-19 in northeast Syria. Within the space of a week, how likely is Mohammad to leave his house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
	D.1.15	Individual interview	Attitudes to COVID-19	4.2.1 Ahmad is 22. He feels like he is in perfect health. Within the space of a week, how likely is he to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual

D.1.16	Individual interview	Attitudes to COVID-19	4.2.2 Ahmad is 22. He feels like he might be getting a cold. Within the space of a week, how likely is he to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.17	Individual interview	Attitudes to COVID-19	4.2.3 Ahmad is 47. He feels like he is in perfect health. Within the space of a week, how likely is he to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.18	Individual interview	Attitudes to COVID-19	4.2.4 Ahmad is 47. He feels like he might be getting a cold. Within the space of a week, how likely is he to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.19	Individual interview	Attitudes to COVID-19	4.2.5 Zainub is 22. She feels like she is in perfect health. Within the space of a week, how likely is she to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.20	Individual interview	Attitudes to COVID-19	4.2.6 Zainub is 22. She feels like she might be getting a cold. Within the space of a week, how likely is she to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.21	Individual interview	Attitudes to COVID-19	4.2.7 Zainub is 47. She feels like she is in perfect health. Within the space of a week, how likely is she to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.22	Individual interview	Attitudes to COVID-19	4.2.8 Zainub is 47. She feels like she might be getting a cold. Within the space of a week, how likely is she to leave the house to visit family or friends?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1.23	Individual interview		G3_Randomized vignette experiment	NA	Individual
D.1.24	Individual interview		5. COVID19 - Attitudes	NA	Individual

D.1. 25	Individual interview	Risk and danger perceptions	5.1 In regards to coronavirus, how would you describe yourself?	Very worried/ Somewhat worried/ A little worried/ Not worried/ Don't know	Individual
D.1. 26	Individual interview	Risk and danger perceptions	5.2 In regards to coronavirus, how would you describe your family and friends?	Very worried/ Somewhat worried/ A little worried/ Not worried/ Don't know	Individual
D.1. 27	Individual interview	Risk and danger perceptions	5.3 In the next month, how likely do you think it is that you will get COVID-19 in the next month?	Very likely/Likely/Neutral/ Unlikely/Very unlikely/Don't know	Individual
D.1. 28	Individual interview	Risk and danger perceptions	5.4 In the next month, how likely do you think it is that someone in your household will get COVID-19 in the next month?	Very likely/ Likely/ Neutral/ Unlikely/ Very unlikely/ Don't know	Individual
D.1. 29	Individual interview	Risk and danger perceptions	5.5 How dangerous is COVID-19 compared to a cold?	Less dangerous / About the same / More dangerous/ Don't know	Individual
D.1. 30	Individual interview	Risk and danger perceptions	5.6 How dangerous is COVID-19 compared to the common typhoid?	Less dangerous / About the same / More dangerous/ Don't know	Individual
D.1. 31	Individual interview	Risk and danger perceptions	5.7 How dangerous is COVID-19 compared to cancer?	Less dangerous / About the same / More dangerous/ Don't know	Individual
D.1. 32	Individual interview	Risk and danger perceptions	5.8 What do you think: should people in your community still shakehands and kiss?	Yes/No/Don't know	Individual
D.1. 33	Individual interview	Risk and danger perceptions	5.9 What do you think: should people in your community still participate in social gatherings?	Yes/No/Don't know	Individual

	D.1. 34	Individual interview	Risk and danger perceptions	5.10 What do you think: should all shops in your community, including unimportant ones, such as barbers and clothing stores, be open?	Yes/No/Don't know	Individual
	D.1. 35	Individual interview	Risk and danger perceptions	5.11 Do you think the COVID-19 is generating discrimination against specific people?	Yes/No/Don't know	Individual
	D.1. 36	Individual interview	Risk and danger perceptions	5.11.1 Who are the people who face discrimination?	someone with COVID19 and his family/someone people have doubt he has COVID19/Health worker(because they might get the Virus)/someone work outside the community and might get the virus/Other/I don't know	Individual
	D.1. 37	Individual interview	Risk and danger perceptions	Other	enter text	Individual

6. Monitoring & Evaluation Plan

IMPACT Objective	External M&E Indicator	Internal M&E Indicator	Focal point	Tool	Will indicator be tracked?
Humanitarian stakeholders are accessing IMPACT products	Number of humanitarian organisations accessing IMPACT services/products	# of downloads of x product from Resource Centre	Country request to HQ	User_log	X Yes
		# of downloads of x product from Relief Web	Country request to HQ		X Yes
		# of downloads of x product from Country level platforms	Country team		<input type="checkbox"/> Yes
	Number of individuals accessing IMPACT services/products	# of page clicks on x product from REACH global newsletter	Country request to HQ		X Yes
		# of page clicks on x product from country newsletter, sendingBlue, bit.ly	Country team		X Yes
		# of visits to x webmap/x dashboard	Country request to HQ		<input type="checkbox"/> Yes
IMPACT activities contribute to better program implementation and coordination of the humanitarian response	Number of humanitarian organisations utilizing IMPACT services/products	# references in HPC documents (HNO, SRP, Flash appeals, Cluster/sector strategies)	Country team	Reference_log	X Yes
		# references in single agency documents			X Yes
Humanitarian stakeholders are using IMPACT products	Humanitarian actors use IMPACT evidence/products as a basis for decision making, aid planning and delivery	Perceived relevance of IMPACT country-programs	Country team	Usage_Feedback and Usage_Survey template	<i>All to be included in annual usage survey.</i>
		Perceived usefulness and influence of IMPACT outputs			
		Recommendations to strengthen IMPACT programs			
	Number of humanitarian documents (HNO, HRP, cluster/agency strategic plans, etc.) directly informed by IMPACT products	Perceived capacity of IMPACT staff			
		Perceived quality of outputs/programs			
		Recommendations to strengthen IMPACT programs			
Humanitarian	Number and/or percentage of	# of organisations providing resources (i.e. staff, vehicles,	Country team		X Yes

stakeholders are engaged in IMPACT programs throughout the research cycle	humanitarian organizations directly contributing to IMPACT programs (providing resources, participating to presentations, etc.)	meeting space, budget, etc.) for activity implementation		Engagement_log	X Yes X Yes
		# of organisations/clusters inputting in research design and joint analysis			
		# of organisations/clusters attending briefings on findings;			