The Impact of Emergency Cash Assistance in a Pandemic: Experimental Evidence from Colombia

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November 2020

Abstract

We study the impact of money on households during the COVID-19 pandemic. In March 2020, Colombia rolled out a new unconditional cash transfer (UCT) to one million households in poverty worth $19 (PPP $55.6) and paid every 5-8 weeks. Using an RCT and linked administrative and survey data, we find the UCT had positive (albeit modest) effects on measures of household well-being (e.g., financial health, food access). Moreover, the UCT boosted support for emergency assistance to households and firms during the crisis and promoted social cooperation. Finally, we explore the bottlenecks in expanding mobile money during a pandemic. (**JEL:** H43, H84, O23)

The COVID-19 pandemic has profoundly affected millions of citizens across the world. The welfare impacts are predicted to be particularly devastating in the developing world, where informality is pervasive and governments face tight budgetary constraints and a limited capacity to reach their most vulnerable citizens. For instance, up to 22 million Latin Americans may be pushed into extreme poverty by the end of 2020 (ECLAC, 2020). Governments around the world have responded to the crisis by providing emergency assistance to households, with cash transfers representing most social assistance interventions (Cejudo et al., 2020; Gentilini et al., 2020).

Understanding the effects of money on household welfare in the context of a pandemic is critical as they may differ from normal times. Theoretically, even small amounts of money may have a sizable impact on households in extreme poverty (diminishing marginal utility of income). In a pandemic, however, disruptions in markets and supply chains may dampen the effectiveness of money on households' consumption and food security (Hanna and Olken, 2020). Moreover, given the urgency to reach and provide relief to households, many countries have sought to improve the delivery of government-to-people (G2P) transfers by turning to digital cash, which may have differential welfare impacts during a pandemic by, for instance, influencing households' compliance with social distancing.

This paper studies the impact that emergency cash assistance has on poor households during the COVID-19 pandemic. We leverage an unconditional cash transfer (UCT) program for one million households in poverty in Colombia, which was rolled out a week after the government declared a national quarantine to contain the spread of the disease. The lump-sum transfer, paid roughly every five to eight weeks, is relatively small: it is worth US$ 19 per household—US$ 55.6 at purchasing power parity (PPP) in 2019 or 8% of the monthly minimum wage—which represents less than US$ 0.18 per adult per day. A subset of beneficiaries from Colombia's main conditional cash transfer (CCT) program living in extreme poverty was randomly selected to be part of a randomized control trial (RCT), which we use to identify the causal effects. We use linked administrative and household survey data collected by phone in June 2020, soon after the second payment was made.

We find that the coronavirus pandemic had devastating effects on these households, who were already living in precarious conditions prior to the crisis. In our context of widespread informality, 57% of individuals who worked before the pandemic no longer had paid work by the time we surveyed them and 58% reported having to eat less during the quarantine. Moreover, we find that the UCT—despite its small size—had positive though economically modest effects on households' well-being during this period: it improved their financial health (0.055σ), parents' investment in children's education (0.032σ), and had positive but noisily-estimated effects on psychological well-being. Over 90% of households reported spending the UCT on food and the money raised the likelihood of purchasing food in the past week by 6.1%, although we are not able to detect impacts on food security.

In addition, we document widespread support for the government's measures to cope with the coronavirus crisis among these extremely poor households, who are clearly suffering from the pandemic. We find that the UCT boosted support for emergency assistance and promoted social cooperation. Moreover, we report a high level of trust in the government and strong support for the quarantine and, unlike support for government aid, neither of these measures is influenced by money received during the national quarantine.

To quickly distribute cash in a manner compliant with social distancing, Colombia achieved a record-time expansion of mobile money. Unfortunately, Colombia's relatively less-developed digital payments ecosystem in which very few merchants accept mobile money, coupled with technology adoption costs, resulted in many people being induced to leave their home despite the quarantine to cash out at a mobile money agent. We discuss the bottlenecks in quickly delivering mobile money in the context of a pandemic and in a setting with low levels of digital financial platforms and incomplete coverage of the cell phone network.

Our findings contribute to the literature on the impacts of cash transfers (Bastagli et al., 2016; Handa et al., 2018; Hanna and Olken, forthcoming) and, more specifically, the effects of cash programs in emergency settings in the developing world (Aggarwal et al., 2020; Banerjee et al., 2020; Doocy and Tappis, 2017). We offer one of the first estimates on the effects of

cash transfers during the coronavirus pandemic.[1] Recently, Banerjee et al. (2020) showed that Kenya's Universal Basic Income (UBI) had positive (albeit economically modest) impacts on household well-being. We complement their findings in two ways. First, we present evidence on the effects of a transfer worth *less* than one-fourth the size of Kenya's UBI. Insofar as our results inform about the returns to an additional dollar spent during the pandemic, they may be particularly relevant to tightly budget-constrained governments in the developing world dealing with the crisis. Second, we explore the implications of putting in place quickly-deployable programs of social assistance during a pandemic. Unlike Kenya's UBI, which had been running for several years and paid via a widely-used technology (Suri and Jack, 2016), Colombia boosted the use of mobile money in the middle of the crisis. We discuss the implication of Colombia's record-time introduction of the new payment technology on households' experience accessing the transfer and their subsequent behavior.

1 Context

1.1 The Coronavirus Pandemic in Colombia and Emergency Cash Transfers

The first case of COVID-19 in Colombia was detected on March 6, 2020. The first death associated with COVID-19 followed on March 16 (see Figure 1). On March 17, Bogotá announced a quarantine starting March 20. The entire country went into quarantine on March 24, which lasted until September 1.[2] The lockdown was augmented with additional restrictions on mobility, including the closing of all schools and shifting to online instruction, as well as the closing of national and international airports.

To help low-income households cope with the economic consequences of the coronavirus pandemic and the national quarantine, the government distributed additional cash payments of *Familias en Acción*, the main CCT program benefiting roughly 2.7 million households, and

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[1]By mid-October 2020, we found five RCTs aiming to study the effect of cash transfers during the COVID-19 pandemic in different contexts: Brooks et al. (2020) and Egger et al. (2020) in Kenya, Karlan et al. (2020) in Ghana, Jacob et al. (2020) in the United States, and Bjorvatn et al. (2020) in Uganda.
[2]Relative to the United States as well as other Latin American countries, Colombia reacted quickly to the pandemic both in terms of its containment and economic support, as illustrated in Figure A.1.

Colombia Mayor, the non-contributory pension scheme benefiting 1.7 million low-income senior citizens.[3] Every "extraordinary" payment was made at the same time as the programs' recurrent payments—which, during our period of study, took place in April, May, and July—and was of the same amount as the household's ordinary payment (e.g., on average 145,000 pesos or US$ 35.1 for *Familias en Acción*). Recipients were notified of this through an SMS. These extraordinary transfers are expected to last until at least the end of 2020.

In April, both (ordinary and extraordinary) payments of *Familias en Acción* were deposited in recipients' bank accounts from Banco Agrario, Colombia's state bank, where virtually all households already had a bank account. In a public procurement decision that preceded the coronavirus crisis, in May the government switched its contractor to Davivienda, the third-largest bank in Colombia. For all but five of Colombia's 32 departments, CCT beneficiaries received the transfer via Davivienda's mobile money service, Daviplata, if they had an account associated with their cellphone number or SIM card. Recipients withdraw the mobile money by generating a code through the app (which requires cellular connection) and presenting it at a Davivienda bank or one of its correspondents within the hour. Recipients that do *not* have an account with Daviplata are sent physical cash to a local bank or money transfer agency, which they can withdraw by presenting their national identification card shortly after receiving a notification that the deposit has been made, usually through an SMS. Unlike the mobile money transfer, which in theory gives recipients more flexibility to visit the mobile money agent since the UCT remains in their account, physical cash reverts to the government until the next transfer cycle if it is not collected after a certain period of time. Otherwise, the infrastructure available for mobile money and cash recipients to withdraw their money is remarkably similar.

In addition, the government rolled out two new UCT programs in late March and early April for households in poverty. First, *Devolución del IVA*, a value-added tax (VAT) compensation, benefited one million poor households already enrolled in *Familias en Acción* and/or *Colombia Mayor*. Second, *Ingreso Solidario* was created for poor households *not* enrolled in either *Familias en Acción*, *Colombia Mayor*, nor *Jóvenes en Acción*. We focus on the *Devolucion de IVA* program,

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[3]Colombia also provided an additional cash payment to more than 200,000 youth from *Jóvenes en Acción*, Colombia's CCT for low-income youth attending postsecondary institutions.

described below.[4]

1.2 Colombia's VAT Compensation

To "promote equality in the VAT system," Colombia's most recent tax reform, approved by Congress in December 2019, created a VAT compensation program for households living under poverty (Article 21 of Law 2010/2019).[5] Unlike VAT *refunds*, which reimburse the amount households pay in VAT, Colombia's *compensation* program does not take into account the VAT paid by households—inter alia, VAT refunds require higher digitalization of payments, banking penetration, and better control capacity (OECD, 2020). Instead, Colombia's program was designed as a recurring UCT of a fixed amount paid to households living in poverty and extreme poverty. As such, it can simply be thought of as an expansion of cash transfers and income support for the poor.

The government had originally proposed piloting the VAT Compensation in 2020 using the transfer schemes in place for *Familias en Acción* and *Colombia Mayor*, and subsequently expanding the program to households off welfare in 2021 (Documento CONPES 3986, 2020). The 2020 pilot would prioritize municipalities with a high poverty incidence—based on the Multidimensional Poverty Index (MPI) using Colombia's 2018 census—and benefit recipients of *Familias en Acción* and/or *Colombia Mayor* living in extreme poverty. To determine poverty levels, the program uses SISBEN, Colombia's main proxy-means testing instrument. The eligibility cutoff was defined as having either a "Level A" score from Colombia's freshly minted SISBEN IV or a score below 10

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[4]Note, therefore, that we do not evaluate the impact of Colombia's entire assistance package during COVID-19.

[5]The motivation for Colombia's VAT compensation program was that low-income households pay more VAT as a share of their income than high-income households and the VAT exemption on basic consumption goods (i.e., 0% rate in lieu of the standard 19% rate), the discounted VAT rate (5% rate), and the VAT exclusion disproportionately favor high-income households; since they consume more of these goods, the rich end up capturing a large share of the implicit subsidy. This, coupled with the weak redistributive effect of the tax and transfer system in Colombia more generally, motivated the need for a VAT compensation (Documento CONPES 3986, 2020). Politically, the full implementation of the VAT compensation might allow Colombia to abolish or limit the large range of preferential VAT regimes in future tax reforms (OECD, 2020).

from its older version, SISBEN III.[6] Therefore, this program aimed to reach roughly the poorest 6% of households.

The coronavirus crisis forced the government to expedite the VAT Compensation to assist the extremely poor.[7] Starting March 31, 2020, VAT compensations were sent to 700,000 household recipients of *Familias en Acción* over the following two weeks. Starting April 6, 300,000 additional transfers were sent to individuals in *Colombia Mayor*'s prioritization list.[8] The second payment was made starting May 8, 2020. A third payment started July 17, and these transfers are expected to last until at least the end of 2020. Each transfer is worth 75,000 pesos (US$ 19 or PPP US$ 55.6) and sent using the technology of the existing *Familias en Acción* and *Colombia Mayor* programs, but payments are made at separate times to enhance the salience of the VAT Compensation. The fiscal cost of the VAT Compensation is estimated at 2 trillion pesos or PPP US$ 1.5 billion between 2020 and 2022. We henceforth interchangeably refer to the VAT Compensation as "the UCT."

Eligible households received an SMS text message informing them they would be receiving the VAT Compensation. Households could also verify their eligibility online in the government website, https://devolucioniva.dnp.gov.co/, using their national identification number. To distribute cash to citizens as soon as possible, the government contracted Davivienda to distribute the payment. As described above for the CCT, beneficiaries with a Daviplata account received their transfer through this mobile money service, while those that did not received physical cash.

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[6]SISBEN III was based on government census enumerators who conducted door-to-door visits between 2009 and 2011 and generated a score ranging from 0 (poorest) to 100 (wealthiest). To update and improve the scoring methodology, the government re-conducted door-to-door visits between December 2017 and December 2019 to generate a new version of the proxy-means test, called SISBEN IV. The new methodology re-generated scores and categorized households into groups ranging from A (poorest) to D (wealthiest). It also established the procedure for calculating the MPI (Documento CONPES 3877, 2016).

[7]Decree #419 of March 18, 2020; Decree #458 of March 22, 2020; Resolution #1058 of March 27, 2020. See also The Economist "Colombia tries to fix a messy and unfair tax" (October 17, 2020).

[8]Households who were beneficiaries of both programs (e.g., poor households with both children and elderly individuals) may only claim one VAT compensation.

2   Methodology, Data, and RCT Validity

The experiment on which we build is an RCT originally designed to evaluate the medium- and long-term impacts of the VAT Compensation. The RCT sample, described in Appendix B, is composed of households who receive *Familias en Acción* and whose SISBEN score places them under the extreme poverty threshold (roughly the poorest quartile of this CCT's recipients). A subset of 3,642 eligible households in 53 randomly-selected municipalities was assigned to be part of the RCT: 1,730 households were randomly assigned to receive the UCT (treated), while 1,732 households were randomly assigned to not receive the UCT (control).

The RCT allows us to compare treated and control households to establish a causal relationship between the UCT and the outcomes we measure. We estimate the impacts of the UCT using the following OLS specification:

$$y_i = \alpha + \beta T_i + \boldsymbol{X}'_i \Gamma + \epsilon_i \tag{1}$$

where y is the outcome for household i, T is the treatment dummy that equals 1 if the household was randomly selected to receive a VAT Compensation, $\boldsymbol{X}$ is a vector of baseline controls (e.g., municipality fixed effects), and ϵ is an idiosyncratic error term. Standard errors are clustered at the household level (the unit of randomization). Our analyses were specified in a pre-analysis plan.[9]

Our data comes from three main sources. First, we use administrative data from the Department of National Planning (DNP)'s *Sistema de Identificación de Potenciales Beneficiarios de Programas Sociales*, SISBEN. SISBEN has detailed baseline sociodemographic information about individuals and households and includes the information about the geographic location of the household. Our data includes information from the two most recent versions of SISBEN, SISBEN III (2010) and SISBEN IV (2018), which contain information for 43.5 million individuals or 85% of the entire population in Colombia.

Second, we use administrative data from Colombia's Department of Social Prosperity (DPS) on the VAT Compensation. This includes household-level information of treatment assignment, indicators for whether a household is a beneficiary of *Familias en Acción* and/or *Colombia Mayor*

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[9]See https://www.socialscienceregistry.org/trials/5970/.

and/or waitlisted to receive *Colombia Mayor*, the date and location of the VAT Compensation, the type of transfer (mobile money or cash), as well as the date of the last transfer from *Colombia Mayor* and/or *Familias en Acción*. We also have municipality-level information on MPI.

Third, we use data from household surveys collected specifically for this research project by staff at IPA–Colombia. The data was collected by phone in the first two weeks of June 2020, shortly after households received the second VAT Compensation (see Figure 1) and when Colombians were under a strict quarantine. We sought to interview the head of household or, if unavailable, then another adult family member competent to answer questions about all aspects of household decision-making. The survey covered nine core topics: financial well-being, consumption and food security, health (both mental and physical symptoms associated with COVID-19), behaviors to mitigate the spread of coronavirus, education, employment, intimate partner violence (IPV), trust in the state, and the receipt of government emergency cash assistance during the national quarantine (the survey instrument is available in Appendix D).

We complement this information with 35 qualitative interviews conducted via phone by IPA–Colombia and IPA Financial Inclusion Program specifically for this research project. The interviews were conducted in October 2020 among female recipients of the VAT Compensation who completed the phone survey described above, as well as DPS employees and local government workers in charge of implementing and executing *Familias en Acción* and the VAT Compensation (called *enlaces municipales*).[10]

We attempted to survey all 3,462 households in the RCT sample as part of our survey. Table A.1 shows that we completed interviews with 2,052 households, i.e., a survey completion rate of 59.3%, evenly distributed between treatment and control groups. Baseline covariates were balanced across the treatment arms. In addition, Table A.1 offers summary statistics on the RCT sample and our survey respondents. On average, the RCT sample lives in municipalities where 35.4% of residents are poor and 56% of households live in an urban area. Given that the RCT sample is based on *Familias en Acción*, which gives cash to mothers, the RCT sample is predominantly female and unmarried. The population is remarkably vulnerable: in addition to

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[10]By the time the interviews were conducted, the VAT Compensation had disbursed four transfers.

living in extreme poverty, 43% of households are registered victims of the Colombian internal armed conflict. 70% of survey respondents worked in February 2020, i.e., before the onset of the coronavirus pandemic. Consistent with pervasive informality among this population, 87.3% of such individuals worked *without* a written contract. Among pre-pandemic workers, 22% worked in agriculture, 21% in domestic service, 12% in hotel and restaurants, 11% in retail, 11% were street vendors, and 9% worked in other low-skill occupations. On average, respondents have four other household members, two of which are minors.[11]

3   Poor Households and The Impact of Money during a Pandemic

We begin by describing households' conditions during the quarantine. By June, only 43% of individuals who worked before the crisis reported working for pay in the past week, meaning 57% of those who worked before the pandemic no longer had a job or work activity for pay by the time we surveyed them. As a result, when asked to list their main source of concern regarding the effects of the coronavirus crisis in Colombia, most households responded "economic needs"—far beyond any other category (see Figure 2, Panel (a)). This highlights the devastating economic effects of the pandemic has had among our population of study.

Since most respondents are parents, we asked them to list the difficulties they faced regarding their children's education during the quarantine, when schools were closed. 46% of reported lacking access to the internet (see Figure 2, Panel (b)). Only 35% reported having access to the internet for the most part of the month of May 2020, which points to the digital divide as a critical driver of disparities emerging during COVID-19. The second most common challenge regarding children's education was not understanding the child's homework, cited by one-fifth of households. This was followed by a lack of or insufficient access to a tablet or laptop, mentioned by 15.2%.

We next examine households' knowledge about the VAT Compensation. Survey participants

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[11]Table A.2 compares baseline differences by survey completion. The likelihood of completing the phone survey is higher among urban households living in wealthier municipalities, where as cellphone connection is better. Women and victims of conflict are also more likely to complete the survey. Importantly, the survey completion rate is not affected by the level of poverty (SISBEN score), meaning we can capture impacts on the poorest citizens.

were asked whether, since the national quarantine, they had received any government cash transfers among a list that included *Familias en Acción*, *Jóvenes en Acción*, *Colombia Mayor*, and the VAT Compensation. The VAT Compensation was highly salient, which is especially noteworthy given how recently the program had been implemented. By June—roughly two months after its rollout—almost 91% of treated households reported having received a VAT Compensation, relative to 8% of control households (see Table A.3).[12] In addition, households accurately reported the amount of money they received from the VAT Compensation: 86.3% of households reported receiving the exact value of the VAT Compensation and more than 94% of households were within PPP US$ 10 of the actual value (see Figure 3, Panel (a)). Consistent with the government's implementation of the program, most households reported having learned about their eligibility for the VAT Compensation through an SMS text message sent to their phone, while one in five did so through the government website (see Figure A.2).

More than 90% of households report spending the VAT Compensation on food (see Figure 3, Panel (b)). This is consistent with the evidence from qualitative interviews conducted among the UCT beneficiaries as well as the *enlaces municipales* in charge of implementing and executing the CCT and UCT programs. Indeed, food insecurity is high among our population of study: 57.7% of control households reported having to limit the portion size at mealtimes at least once in May, 12.5% lasted an entire day without food at least once that month, 22.6% ate at a relative's or friend's because the food was insufficient at home, and 11.6% begged for food in the street (see Figure A.3).

3.1 Impacts on Household Well-Being

We first examine impacts on measures of household well-being during the pandemic: financial health, food access and security, mental well-being, and parental investment in children's education.

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[12]Note that, first, the fact that 8% of control households report receiving a VAT Compensation reflects some confusion, which is also present for *Familias en Acción*: although all households receive this CCT, only 94% report it. Second, more than 97% of households assigned to treatment had effectively received the UCT by the time we surveyed them, suggesting non-compliance is negligible in our setting. Our intent-to-treat estimates can therefore be viewed as the average treatment effect.

Table 1 shows the effects of the UCT on household measures of financial health during the quarantine. Column (1) shows that the money reduced the likelihood of selling belongings by 3.3 percentage points or 15.5% from a control mean of 21.3%. Columns (2) through (6) show similar negative effects on the probability of depleting savings, borrowing money, skipping loan payments, stopping other mandatory payments, and pawning belongings, although the coefficients are sometimes less precisely estimated. Column (7) computes a standardized weighted average of these six (negatively coded) indicators of financial health following the methodology described in Anderson (2008).[13] The UCT improved household financial health during the pandemic by 0.055σ and this effect is significant at the 5% level. This economically modest impact is concomitant with the modest value of the UCT, as small cash transfers are associated with small impacts (Bastagli et al., 2016).

Regarding food access and food security during the pandemic, recall from Figure 3 that over 90% of treated households reportedly used the UCT to purchase food, a result strongly supported by the qualitative interviews. Consistent with improved access to food, Table A.4 shows that the money boosted the probability of purchasing food in the last week by 4.4 percentage points or 6.1%. Turning to food security, Table A.5 investigates impacts on different measures of hunger experienced during the pandemic. Despite widespread food insecurity, we cannot reject the null hypothesis of no effect; such is the case both when using an index outcome based on the six (negatively coded) indicators (Column 7) and an index based on continuous measures to capture the intensity of food insecurity (Column 8). We reconcile this result by noting that the positive effect on food *access*, coupled with the lack of a detectable impact on food *security*, suggests the UCT might have been spent on improving the quality and diversity of diet, e.g., increasing items rich in protein, such as milk, meat, and eggs, which unfortunately our (short phone) survey did not capture.[14]

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[13]As pre-specified in our pre-analysis plan, for each set of outcomes we examine effects on a summary measure of the outcomes, following Anderson (2008). We switch the signs of all items so that the positive direction indicates a "better" outcome and standardize using the mean and standard deviation of that outcome among the control group. We then create a weighted average using all of the outcomes in the domain, using the inverse of the covariance matrix of the transformed outcomes in the domain.

[14]For instance, the qualitative interviews revealed that some treated households used the UCT to purchase milk and meat. Moreover, past evidence on Colombia's CCT *Familias en Acción* has shown that cash transfers raise the share of food expenditures precisely by improving *quality* (Fiszbein et al., 2009).

Table A.6 shows the impact of the program on household measures of psychological well-being during the pandemic. One-third of control households reported having experienced at least one disorder (difficulty sleeping, anxiety, aggressive behavior, or sadness) during the quarantine. The transfer appears to have improved mental health under the quarantine: it decreased the likelihood of experiencing difficulty sleeping by 1.2 percentage points (10.9% on a base of 11%) and anxiety by 2.1 percentage points (10.3% on a base of 20.4%), although the large standard errors do not allow rejecting the null of no effect.

Lastly, recall that both control and treated households receive *Familias en Acción*, which provides cash transfers conditioned to school attendance and health controls. While these conditions do not apply to the UCT we study, treated households might react to the transfer by changing their investment in children's education. Table A.7 suggests the UCT had a positive but economically modest effect on parental investment in children's education (0.032σ). For instance, it more than doubled the likelihood of paying for tutoring, albeit from a very low base of less than 1%. Qualitative interviews suggest parents used the UCT to purchase schooling materials (e.g., photocopies) and mobile internet service for their kids' remote learning, and the coefficients on these outcomes are positive though not statistically significant. Table A.8, which reports the heterogeneous treatment effects we prespecified, suggests these gains tend to be driven by urban households. This is consistent with evidence emerging from other countries that rural areas have been less likely to expect teachers to provide instruction during the COVID-19 pandemic, partly due to the above-discussed digital divide.[15]

3.2 Impacts on Political Attitudes

In the context of a pandemic, governments require citizens' compliance with restrictive measures to prevent the spread of the virus. This section assesses whether social assistance translates into greater trust and/or support for government policies addressing the coronavirus crisis.

Columns (1)–(3) of Table 2 show there is widespread trust in the government and support for COVID-related policies even among extremely poor households who are clearly suffering

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[15]We do not find evidence of statistically significant impacts on the three remaining prespecified outcomes: IPV, expenditures, nor most physical symptoms associated with COVID-19 (see Appendix C).

from the impacts of the pandemic. 82.1% of control households support emergency aid programs in response to the coronavirus pandemic, 77.6% trust the government to promote citizens' well-being, and 88.3% support the national quarantine.[16] Further, Column (1) shows that treated households were 6.1 percentage points (7.4%) more likely to support emergency assistance for households and firms rolled out by the government. This suggests UCTs have changed people's tastes for these safety-net programs, much like COVID-19 did in the U.S. (Rees-Jones et al., 2020). Unlike support for government assistance, Columns (2) and (3) show that neither trust in the government to look after its citizens nor support for the government's lockdown to flatten the curve for COVID-19 are influenced by money received during the pandemic.

Lastly, the qualitative interviews revealed a deep sense of community among our population of study. For instance, people asked their neighbors for help to verify their eligibility for the VAT Compensation and learn how to use the Daviplata mobile wallet app. The treatment appears to have further heightened reciprocity during the pandemic: Columns (4) and (5) of Table 2 show that treated households are 3 percentage points (3.4%) more likely to contribute with work—though not money—to support their community. This suggests that social assistance programs may also have *indirect* welfare impacts by promoting other forms of social cooperation (see, for example, Caprettini et al., 2018).[17]

4 Expanding Access to Mobile Money During a Pandemic

In the midst of the pandemic, Colombia achieved a record-time expansion of mobile money to improve the speed of secure cash transfers in a manner that would foster compliance with social distancing. While 32.8% of households in the RCT sample received the first VAT Compensation

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[16]The fact that control households receive social assistance (e.g., *Familias en Acción*) might contribute to this high baseline mean.

[17]Recall that Colombia introduced the VAT Compensation as a first step to encourage support in paying the VAT among poor households before potentially lengthening the list of VAT-liable products. Column (6) suggests that, contrary to the VAT Compensation's intended objectives, treated households do not report being less willing to evade VAT tax payments. Instead, and as in Fergusson et al. (2019), Colombians display little social desirability bias and are in fact largely willing to be complicit in VAT evasion by not requesting a purchase receipt, with the VAT Compensation having little impact on tax morale.

through Daviplata in April, this share almost doubled to 58.6% for the second transfer in May, and reached roughly 75% by November. This section discusses the implications of expanding mobile money during COVID-19 and its impact on households' behaviors to mitigate the spread of the virus.

Despite the benefits of mobile money (reviewed in Aron, 2018; Suri, 2017), we find that introducing the new payment technology during a national quarantine inflicted a cost on households. Roughly one-fifth of respondents reported having experienced delays or difficulties receiving the VAT Compensation and this share doubles for mobile money versus physical cash (see Figure A.4). The use of the mobile money app, Daviplata, was the most frequently cited problem. Using the app was more difficult in remote areas with a weak or unstable cellular connection, which is consistent with mobile money being disproportionately used in urban and wealthier municipalities and in urban areas (see Table A.9). Even if located in an area with a cellular connection, virtually all households in our study have prepaid cellphone plans (and buy air time when they can afford to), and many reported having a poor device. Further, rural beneficiaries complained about the burden of cashing out in terms of time and travel costs.[18] Technology adoption issues played an additional role, with frequent complaints of blocked Daviplata accounts when attempting to update phone numbers—a common occurrence as at least 56% of survey respondents share their phone with other people. Critically, the benefits of mobile money are not always perceived by households and none of the interviewed individuals reported purchasing goods or services with mobile money (with the exception of call credit). On the contrary, they reported cashing out as soon as they could to purchase goods with hard cash.

The urgency to cash out to consume might affect people's compliance with strict quarantine. To investigate this issue, we asked participants whether they had left their home in May 2020 for a particular reason, including having to go to the bank or ATM. Column (3) of Table A.10 reveals that the cash transfer had a significant and sizable impact on leaving home to visit a bank or an ATM of 11.4 percentage points or 24.2% from a base of 47.2%. This effect does

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[18]These anecdotes from the qualitative interviews help explain the otherwise puzzling result from Column (2) of Table C.14 that the UCT literally appears to have given recipients a headache.

not vary by whether the UCT was paid in physical cash or mobile money (see Table A.11), which clashes with the notion that digital payments can offer the opportunity to distribute cash transfers in a manner compliant with social distancing. Instead, Colombia's relatively less-developed digital payments ecosystem, in which few merchants accept digital payments and mobile commerce is still in its infancy, coupled with mobile money being a new technology for most recipients, induced people to leave their home during the pandemic to collect the money.[19] Qualitative interviews confirm reports of agglomerations of people queuing outside banks, ATMs, and mobile money agents. As a result, the transfer had a small *negative* impact (-0.047σ) on individuals' behavior to mitigate the spread of COVID-19.[20]

Colombia's experience with this UCT contrasts with Kenya's experience with UBI paid via M-PESA during the pandemic. First, Kenyans were ex-ante familiar with the program's operation, as the UBI had been in place since 2018. Second, Kenya already had a well-developed digital payments ecosystem: 96% of Kenyan households had a mobile money account before the pandemic (Suri and Jack, 2016). In contrast, Colombia's VAT Compensation was launched in the middle of the pandemic, using a little-known mobile payment technology solely used by recipients to cash out. As a result, while Kenya's UBI transfer encouraged households to stay home during the pandemic (and make payments electronically), Colombia's UCT induced households to leave their homes. Although introducing new payment technologies during COVID-19 may facilitate the rapid disbursement of money to vulnerable households, our results suggest it may also undermine their effectiveness in contexts with under-developed digital payments ecosystems. This highlights the importance of developing digital payments ecosystems to facilitate the easy deployment and efficacy of cash assistance during crises.

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[19]Moreover, Column (1) of Table A.10 suggests that the transfer raised the likelihood of leaving home in May for work by 2.9 percentage points, or 16.5% relative to a control mean of 17.6%. However, this effect is only significant at the 10% level. In fact, Table A.4, which reports the effects on the outcomes where the period of reference is the "last week" rather than May 2020, shows that the treatment had no impact neither on labor supply nor on the likelihood of leaving home for work in the past week. Lastly, Column (12) suggests the transfer might have raised the likelihood of having a guest at home; specifically, of having someone over to ask for help, which increased by 1.6 percentage points or 59% (see Table A.12). While this effect is only marginally significant, it would be consistent with previous work documenting social pressure to share economic gains with friends, relatives and neighbors in developing countries (see, for example, Jakiela and Ozier, 2015).

[20]The effect on the index measure becomes smaller and less significant when excluding visits to the bank or ATM in May (see Table A.13), suggesting the former is partly driven by impacts on the latter.

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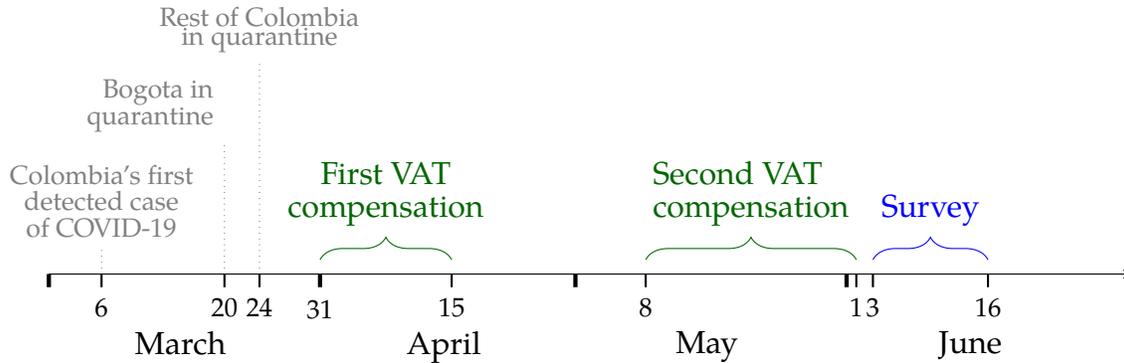
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Figures and Tables

Figure 1: Timeline: COVID-19, Quarantine, Cash Transfer Payouts, and Survey Data Collection

Notes: This figure plots a timeline of events taking place between March 1, 2020, and June 30, 2020. The first case of COVID-19 was detected in Colombia on March 6. On March 20, Bogota went into quarantine, and the rest of the country followed on March 24. The first VAT Compensation was paid out starting March 31. The second transfer was paid out starting May 8. The survey data collection began on June 3 and ended June 16.

Figure 2: The Most Common Concerns and Challenges During the Pandemic

(a) Sources of Concern Vis-à-Vis the COVID Crisis   (b) Difficulties Faced since Schools Closed
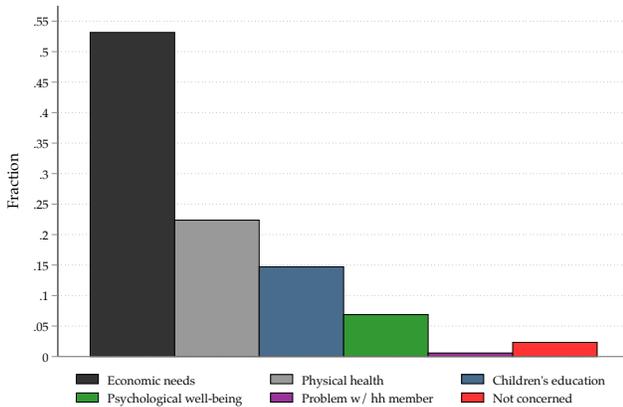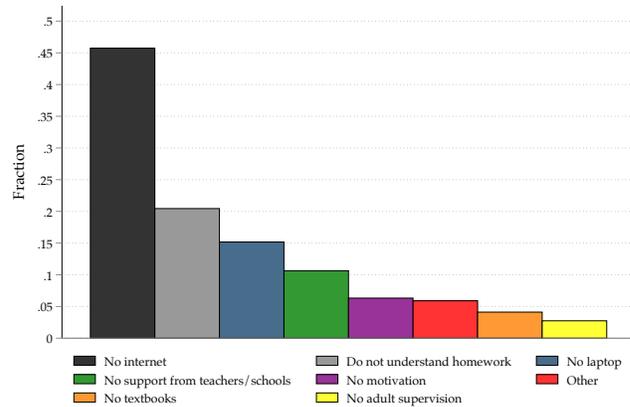
Notes: Panel (a) plots the most common sources of concern vis-à-vis the effects of the coronavirus crisis in Colombia. Panel (b) plots the most common difficulties households have faced since schools closed. The sample is composed of 989 control households.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Figure 3: The VAT Compensation

(a) Accurate Perception of the Transfer Value

(b) Most Common Spending Items for VAT Comp.

Notes: Panel (a) plots the distance between the VAT Compensation values from individuals who reported to have received the transfer and the actual value of their transfer. 86.3 percent of individuals reported the transfer accurately. Panel (b) plots the most common difficulties items in which households reported to have spent the VAT Compensation. The sample is composed of 992 households who reported to have received the VAT Compensation.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.
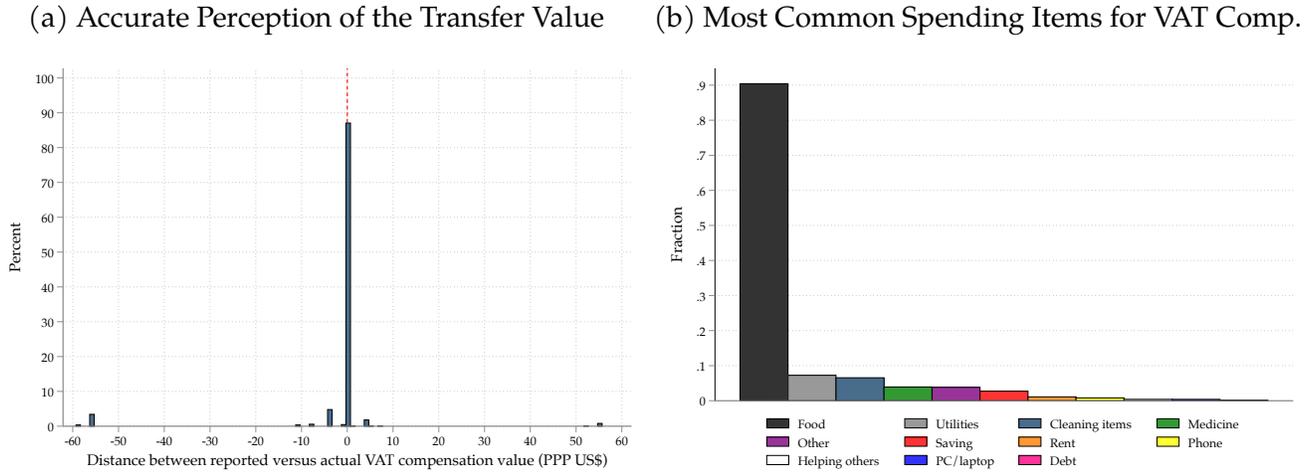
Table 1: Treatment Effects on Household Financial Health

	Sell belongings (1)	Deplete Savings (2)	Borrow Money (3)	Skip Loan Payment (4)	Stop Other Payments (5)	Pawn Belongings (6)	Index (7)
Treatment	-0.033*	-0.027	-0.011	-0.023	-0.019	-0.024*	0.055**
	(0.018)	(0.020)	(0.021)	(0.016)	(0.019)	(0.014)	(0.024)
Municipality FE	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X
N	2052	2052	2052	2052	2052	2052	2052
R2	0.061	0.061	0.067	0.045	0.082	0.061	0.091
Control Mean	0.213	0.31	0.347	0.169	0.279	0.121	0

Notes: This table presents the treatment effects of the UCT on household financial health, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table 2: Treatment Effects on Political Attitudes

	Supports programs to hhs and firms (1)	Trust in gov. (2)	Supports quarantine (3)	Would contribute money to community (4)	Would contribute work to community (5)	Supports evading VAT (6)	Index (7)
Treatment	0.061***	-0.001	0.011	0.01	0.030**	0.009	0.053**
	(0.016)	(0.019)	(0.014)	(0.018)	(0.014)	(0.015)	(0.022)
Municipality FE	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X
N	2028	1942	2014	1969	2020	1976	2052
R2	0.071	0.067	0.059	0.069	0.058	0.043	0.075
Control Mean	0.821	0.776	0.883	0.78	0.879	0.866	0

Notes: This table presents the treatment effects of the UCT on household food security, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$.

Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Appendices

A Figures and Tables

Figure A.1: Government Response Index

(a) Containment and Health Index

(b) Economic Support Index
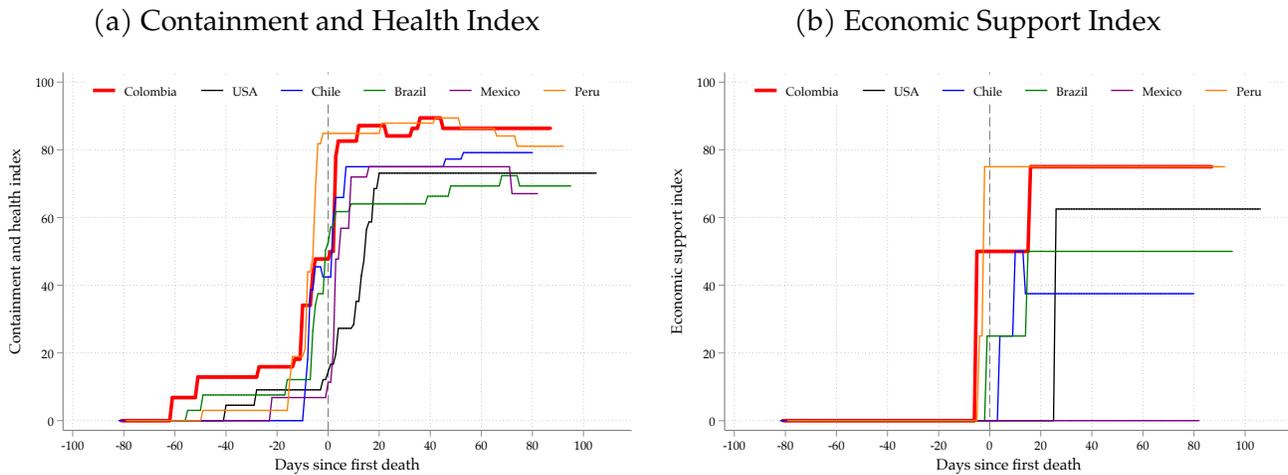
Notes: Panel (a) plots the evolution of a containment and health index in the days before and after the first detected death due to COVID-19. This index combines "lockdown" restrictions and closures with measures such as testing policy and contact tracing, short term investment in healthcare, and investments in vaccine. Panel (b) plots an economic support index, which records measures such as income support and debt relief.
Source: The Oxford COVID-19 Government Response Tracker (last accessed on June 24, 2020).

Figure A.2: The Most Common Ways Households Learned about the VAT Compensation
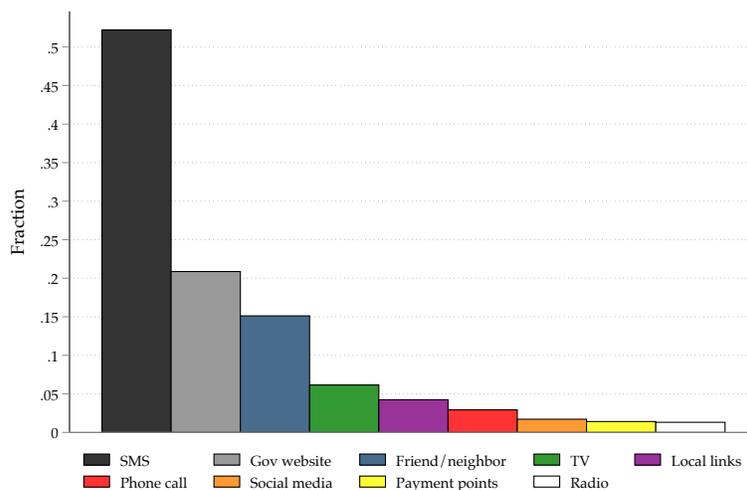
Notes: This figure plots the most common ways in which households reported to have learned about the UCT. The sample is composed of 992 households who reported to have received the UCT.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Figure A.3: Food Insecurity during the Coronavirus pandemic in May

(a)

(b)
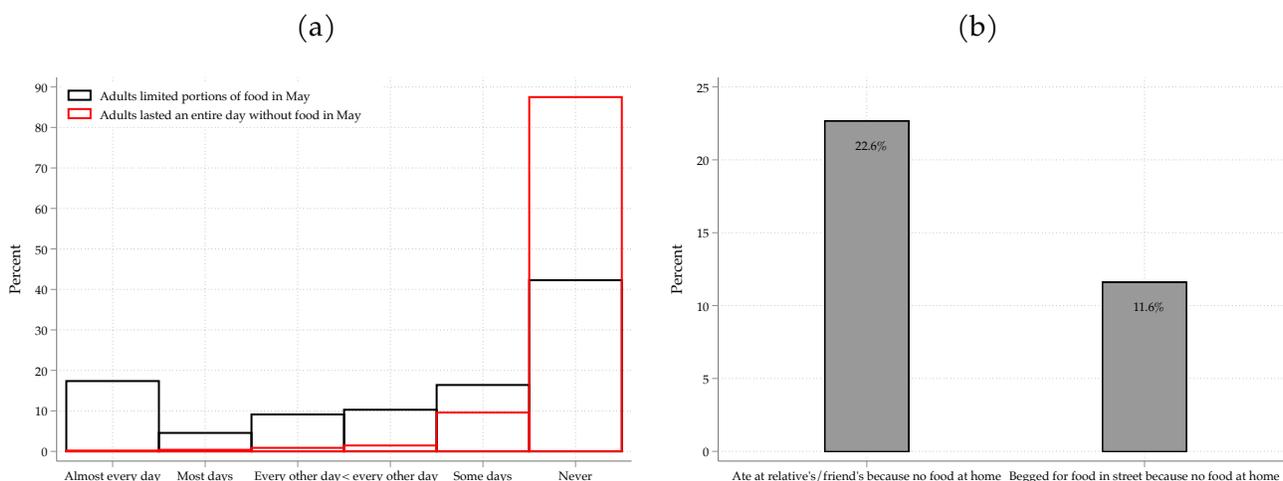
Notes: This figure presents summary statistics for food insecurity in May among control households. Panel (a) plots two histograms for the frequency with which control households reported having to limit the portion size at meal times and/or reduce the number of meals eaten in a given day in May (in black), or lasting an entire day without eating in May (in red). In all, 57.7 percent of control households reported having to limit the portion size at meal times at least once, while 12.5 percent reported having lasted an entire day without food at least once. Panel (b) shows that 22.6 percent of control households reported having to eat at a relative's or friend's in May because there was not enough food at home, while 11.6 percent begged for food in the street that month.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Figure A.4: The Most Common Difficulties Experienced when Receiving the VAT Compensation

(a) Mobile Money: 23.4% Reported Difficulties

(b) Physical Cash: 10.4% Reported Difficulties
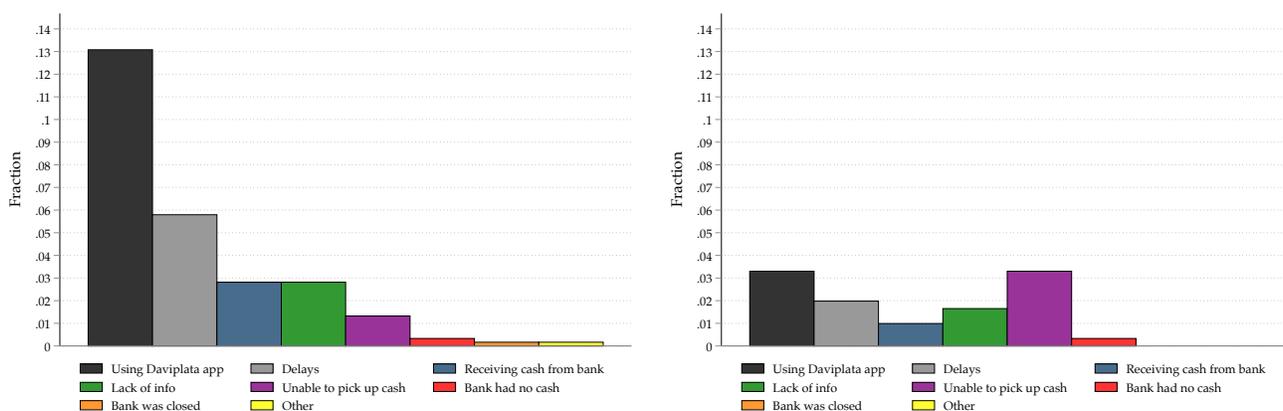
Notes: This figure plots the most common difficulties experienced when receiving the VAT Compensation, separately by type of transfer (mobile money versus cash). Panel (a) reports 23.4 percent of mobile money recipients experienced difficulties or delays with the payment, while Panel (b) reports that this share was only 10.4 percent for physical cash recipients. For mobile money recipients, the most common problem regarded the use of the mobile money app, *Daviplata*.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.1: Baseline Differences in the Survey Response Rate and Sociodemographic Variables

	Control (1)	Treatment (2)	p-value (3)	N (4)
Reached: Survey completed	0.599	0.586	0.43	3462
Reached: Survey not completed	0.003	0.003	0.999	3462
Reached: Survey declined	0.051	0.046	0.483	3462
Not reached	0.346	0.365	0.26	3462
Familias en Accion beneficiary	1	1		3462
Colombia Mayor beneficiary/priority list	0.136	0.124	0.319	3462
Municipality MPI	35.382	35.399	0.966	3462
Urban area	0.568	0.560	0.635	3462
SISBEN IV A level	3.104	3.069	0.529	2653
SISBEN III score (if no SISBEN IV)	6.653	6.528	0.424	809
Female respondent	0.847	0.865	0.137	3462
Age	40.69	40.005	0.06	3462
Civil status: Civil union	0.419	0.434	0.374	3462
Civil status: Single	0.326	0.273	0.001	3462
Civil status: Married	0.134	0.155	0.079	3462
Civil status: Separated or divorced	0.102	0.113	0.291	3462
Civil status: Widow/widower	0.02	0.025	0.25	3462
Victim of conflict	0.426	0.43	0.787	3462
Household size (survey-based)	5.105	5.038	0.437	2061
No. of children in household (survey-based)	1.992	1.994	0.975	2054
Worked in Feb 2020 (survey-based)	0.702	0.709	0.738	2058
Sector: Agriculture and fishing (survey-based)	0.227	0.215	0.56	1452
Sector: Household workers (survey-based)	0.214	0.215	0.964	1452
Sector: Hotel and restaurants (survey-based)	0.101	0.136	0.043	1452
Sector: Retail and vehicle repair (survey-based)	0.121	0.101	0.238	1452
Sector: Street vendor (survey-based)	0.101	0.112	0.505	1452
Sector: Other low-skilled (survey-based)	0.092	0.084	0.624	1452
Sector: Manufacting (survey-based)	0.047	0.042	0.641	1452
Sector: Education (survey-based)	0.027	0.025	0.769	1452
Sector: Construction (survey-based)	0.026	0.019	0.396	1452
Sector: Other professional (survey-based)	0.016	0.017	0.978	1452
Sector: Transportation (survey-based)	0.01	0.015	0.332	1452
Sector: Health (survey-based)	0.012	0.01	0.631	1452
Sector: Arts and entertainment (survey-based)	0.003	0.008	0.153	1452
Sector: Finance and insurance (survey-based)	0.003	0.001	0.569	1452
N	1732	1730		3462

Notes: This table presents the balance test results for the survey response rate and baseline covariates, which are listed on the left. Columns (1) and (2) report the mean of a given variable for the control and treatment groups, respectively. Column (3) reports the p-value of the difference between treatment and control means using OLS. Column (4) reports the number of observations.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.2: Baseline Differences in Survey Completion

	Did not complete (1)	Completed (2)	p-value (3)	Mun. FE p-value (4)
Treatment	0.508	0.494	0.43	0.404
Colombia Mayor beneficiary/priority list	0.117	0.139	0.057	0.099
Municipality MPI	35.915	35.03	0.031	1
Urban household	0.525	0.591	0	0.01
SISBEN IV A level	3.042	3.112	0.221	0.254
SISBEN III score (if no SISBEN IV)	6.62	6.557	0.69	0.918
Female respondent	0.796	0.894	0	0
Age	40.153	40.481	0.376	0.807
Civil status: Civil union	0.439	0.418	0.223	0.335
Civil status: Single	0.298	0.3	0.883	0.984
Civil status: Married	0.121	0.16	0.001	0.005
Civil status: Separated or divorced	0.118	0.1	0.1	0.28
Civil status: Widow/widower	0.024	0.021	0.607	0.398
Victim of conflict	0.414	0.437	0.179	0
N	1410	2052		

Notes: This table presents the balance test results on the likelihood of completing the survey using baseline covariates, which are listed on the left. Columns (1) and (2) report the mean of a given variable for households who did not complete the survey and completed the survey, respectively. Column (3) reports the *p*-value of the difference between the two group means using OLS. Column (4) reports the *p*-value when including municipality fixed effects. The last row reports the number of observations in each group. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.3: The Salience of the VAT Compensation is High

	Reported Receiving the VAT Compensation		
	(1)	(2)	(3)
Treatment	0.832***	0.834***	0.833***
	(0.012)	(0.012)	(0.012)
Municipality FE		X	X
Baseline controls			X
N	2035	2035	2035
R2	0.692	0.704	0.709
Control Mean	0.08	0.08	0.08

Notes: This table presents the salience of the VAT Compensation, that is, the effect of the VAT Compensation on the likelihood of reporting to have received it. The bottom row shows that 8 percent of controls reported to have received a VAT Compensation. Column (1) shows the treatment raised this share by 83.2 percentage points. Columns (2) and (3) show this coefficient is not significantly affected by the inclusion of municipality fixed effects nor baseline controls. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.4: Treatment Effects on Outcomes with Reference to the "Last Week"

	In the last week, did you...				
	Have a job or work activity? (1)	Leave home for any reason? (2)	Leave home for work? (3)	Leave home to buy food? (4)	Received a visit at home? (5)
Treatment	0.004	0.019	-0.01	0.044**	-0.011
	(0.020)	(0.019)	(0.018)	(0.019)	(0.019)
Municipality FE	X	X	X	X	X
Baseline controls	X	X	X	X	X
N	2050	2052	2052	2052	2052
R2	0.167	0.054	0.133	0.057	0.047
Control Mean	0.32	0.73	0.23	0.72	0.23

Notes: This table presents the treatment effects of the UCT on outcomes with time reference to "last week", estimated using equation (1). While Columns (2) and (3) refer to the survey respondent, Column (4) also includes any other household members leaving home to buy food. For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.5: Treatment Effects on Household Food Security

	Limited meals (adults) (1)	Limited meals (minors) (2)	0 meals/day (adults) (3)	0 meals/day (minors) (4)	Ate at friend's or relative's (5)	Begged for food in the street (6)	Index (dummy) (7)	Index (continuous) (8)
Treatment	0.015	0.003	0	-0.002	0.013	-0.007	-0.007	0.004
	(0.021)	(0.021)	(0.014)	(0.010)	(0.018)	(0.014)	(0.027)	(0.027)
Municipality FE	X	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X	X
N	2034	2033	2041	2035	2051	2051	2052	2052
R2	0.11	0.085	0.089	0.057	0.088	0.075	0.139	0.124
Control Mean	0.577	0.397	0.125	0.054	0.226	0.116	0	0

Notes: This table presents the treatment effects of the UCT on household food security, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.6: Treatment Effects on Household Mental Health

	Difficulty sleeping (1)	Anxiety (2)	Aggresive behavior (3)	Sadness (4)	Index (5)
Treatment	-0.012	-0.021	-0.003	0.001	0.026
	(0.014)	(0.017)	(0.009)	(0.018)	(0.030)
Municipality FE	X	X	X	X	X
Baseline controls	X	X	X	X	X
N	2052	2052	2052	2052	2052
R2	0.052	0.06	0.035	0.052	0.06
Control Mean	0.11	0.204	0.045	0.221	0

Notes: This table presents the treatment effects of the UCT on household mental health, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.7: Treatment Effects on Parental Investment in Children's Education

	Hours/day on education (1)	Talk about school (2)	Read to children (3)	Pay for tutoring (4)	Tell them to read (5)	Help with homework (6)	Talk w teacher (7)	Play-based activities (8)	Encourage distance- earning (9)	Provide internet (10)	Provide materials (11)	Index (12)
Treatment	0.022	-0.018*	-0.015	0.012**	-0.018	0.023	-0.006	0.016	0.011	0.025	0.023	0.032**
	(0.055)	(0.011)	(0.011)	(0.005)	(0.014)	(0.022)	(0.014)	(0.012)	(0.009)	(0.019)	(0.017)	(0.015)
Municipality FE	X	X	X	X	X	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X	X	X	X	X	X
N	1865	1874	1874	1874	1874	1874	1874	1874	1874	1874	1874	1874
R2	0.097	0.07	0.053	0.052	0.049	0.062	0.035	0.047	0.046	0.065	0.037	0.051
Control Mean	4.242	0.067	0.06	0.007	0.103	0.681	0.101	0.064	0.031	0.193	0.148	0

Notes: This table presents the treatment effects of the UCT on parental investment in their children's preschool, primary, and secondary education, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for the number of children, sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. The sample is restricted to households with at least one minor living in the household. $*p < 0.1, **p < 0.05, ***p < 0.01$.

Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.8: Pre-Registered Heterogeneous Treatment Effects on Index Outcomes

	Financial Health	Food Sec.	Mental Health	COVID 19 Symptoms	No IPV	Educ.	COVID 19. Mitigation	Political Attitudes
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Panel A: Heterogeneous Effects by Transfer Type								
Treatment	0.061	-0.020	0.061	0.036	-0.140*	0.052**	-0.028	0.042
	(0.041)	(0.046)	(0.054)	(0.049)	(0.084)	(0.022)	(0.025)	(0.034)
Treatment x Cash	0.037	0.031	-0.017	-0.045	0.181	-0.054	-0.023	0.021
	(0.057)	(0.065)	(0.072)	(0.061)	(0.116)	(0.037)	(0.039)	(0.052)
Observations	1,599	1,599	1,599	1,599	818	1,458	1,599	1,599
R-squared	0.097	0.127	0.059	0.067	0.066	0.057	0.082	0.068
Panel B: Heterogeneous Effects by Rural (Municipality)								
Treatment	0.024	0.019	0.003	-0.028	-0.129	0.059***	-0.044*	0.051
	(0.040)	(0.048)	(0.050)	(0.048)	(0.091)	(0.022)	(0.025)	(0.037)
Treatment x Rural (Mun)	0.052	-0.025	0.038	0.033	0.111	-0.045	-0.003	0.003
	(0.050)	(0.057)	(0.063)	(0.057)	(0.107)	(0.031)	(0.032)	(0.046)
Observations	2,052	2,052	2,052	2,052	1,073	1,874	2,052	2,052
R-squared	0.092	0.124	0.060	0.059	0.060	0.047	0.082	0.075
Panel C: Heterogeneous Effects by Rural (Household)								
Treatment	0.072**	0.020	0.028	-0.016	-0.084	0.040**	-0.033*	0.076***
	(0.030)	(0.034)	(0.037)	(0.031)	(0.067)	(0.018)	(0.019)	(0.026)
Treatment x Rural (HH)	-0.060	-0.061	-0.008	0.032	0.086	-0.029	-0.047	-0.084*
	(0.053)	(0.054)	(0.066)	(0.060)	(0.095)	(0.033)	(0.036)	(0.048)
Observations	2,052	2,052	2,052	2,052	1,073	1,874	2,052	2,052
R-squared	0.092	0.126	0.060	0.060	0.063	0.047	0.083	0.077
Panel D: Heterogeneous Effects by Working Status in Feb, 2020								
Treatment	0.068**	-0.019	0.019	-0.033	-0.167**	0.028	-0.043**	0.065**
	(0.030)	(0.031)	(0.037)	(0.031)	(0.072)	(0.018)	(0.019)	(0.026)
Treatment x Did not Work	-0.045	0.078	0.020	0.083	0.287***	0.016	-0.014	-0.041
	(0.050)	(0.063)	(0.066)	(0.059)	(0.111)	(0.035)	(0.035)	(0.051)
Observations	2,051	2,051	2,051	2,051	1,072	1,873	2,051	2,051
R-squared	0.092	0.125	0.060	0.060	0.066	0.046	0.082	0.075
Panel E: Heterogeneous Effects by Victim Status								
Treatment	0.051	0.022	-0.004	-0.006	0.014	0.003	-0.037*	0.068**
	(0.032)	(0.034)	(0.038)	(0.032)	(0.070)	(0.022)	(0.021)	(0.029)
Treatment x Victim	0.010	-0.040	0.067	-0.005	-0.183*	0.065**	-0.022	-0.034
	(0.050)	(0.056)	(0.064)	(0.055)	(0.104)	(0.031)	(0.033)	(0.045)
Observations	2,052	2,052	2,052	2,052	1,073	1,874	2,052	2,052
R-squared	0.091	0.124	0.060	0.059	0.062	0.048	0.082	0.075
Panel F: Heterogeneous Effects by Socio-Economic Status								
Treatment	0.071**	0.056	0.058	0.021	-0.025	0.044**	-0.017	0.065**
	(0.035)	(0.041)	(0.045)	(0.042)	(0.061)	(0.022)	(0.023)	(0.032)
Treatment x Poorest	-0.027	-0.094*	-0.059	-0.053	-0.060	-0.022	-0.053*	-0.021
	(0.049)	(0.054)	(0.062)	(0.055)	(0.101)	(0.031)	(0.031)	(0.044)
Observations	2,052	2,052	2,052	2,052	1,073	1,874	2,052	2,052
R-squared	0.094	0.125	0.060	0.059	0.063	0.046	0.083	0.075

Notes: This table presents heterogenous treatment effects of the UCT on indices of our different outcomes. In Panel A, we leverage information from *Familias en Acción* in May 2020 to build a cash indicator for control households. Because Davivienda did not deliver *Familias en Acción* transfers in five of Colombia's 32 departments, we exclude these five departments from our estimation sample. $*p < 0.1, **p < 0.05, ***p < 0.01$.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.9: Baseline Differences in the Survey Response Rate and Sociodemographic Variables by Mode of Transfer in May: Treated Households Only

	Mobile Money (1)	Cash (2)	Difference p-value (3)	Municipality FE p-value (4)	N (5)
Reached: Completed survey	0.662	0.48	0	0	1725
Reached: Survey not completed	0.004	0.001	0.291	0.077	1725
Reached: Survey declined	0.051	0.038	0.172	0.464	1725
Not reached	0.283	0.48	0	0	1725
No. of weeks between transfer and survey	3.991	2.723	0	0	1651
Familias en Accion beneficiary	1	1			1725
Colombia Mayor beneficiary/priority list	0.115	0.137	0.168	0.305	1725
Urban household	0.647	0.437	0	0	1725
Urban municipality	0.455	0.298	0	1	1725
Municipality MPI	34.063	37.311	0	1	1725
SISBEN IV A level	3.127	2.997	0.1	0.497	1323
SISBEN III score (if no SISBEN IV)	6.48	6.643	0.48	0.903	397
Female respondent	0.877	0.849	0.091	0.125	1725
Age	40.09	39.808	0.589	0.709	1725
Civil status: Civil union	0.417	0.459	0.084	0.026	1725
Civil status: Single	0.278	0.266	0.586	0.05	1725
Civil status: Married	0.143	0.169	0.145	0.533	1725
Civil status: Separated or divorced	0.136	0.08	0	0.169	1725
Civil status: Widow/widower	0.026	0.025	0.947	0.709	1725
Victim of conflict	0.472	0.373	0	0.004	1725
Household size (survey-based)	5.068	4.974	0.44	0.799	1015
No. of children in household (survey-based)	2.024	1.942	0.324	0.741	1012
Worked in Feb 2020 (survey-based)	0.738	0.653	0.006	0.007	1014
Sector: Agriculture and fishing (survey-based)	0.171	0.311	0	0.433	721
Sector: Household workers (survey-based)	0.214	0.218	0.902	0.558	721
Sector: Hotel and restaurants (survey-based)	0.145	0.116	0.266	0.453	721
Sector: Retail and vehicle repair (survey-based)	0.119	0.062	0.009	0.12	721
Sector: Street vendor (survey-based)	0.109	0.12	0.667	0.127	721
Sector: Other low-skilled (survey-based)	0.103	0.044	0.003	0.078	721
Sector: Manufacting (survey-based)	0.044	0.031	0.372	0.517	721
Sector: Education (survey-based)	0.022	0.031	0.504	0.722	721
Sector: Construction (survey-based)	0.014	0.031	0.183	0.1	721
Sector: Other professional (survey-based)	0.02	0.009	0.206	0.421	721
Sector: Transportation (survey-based)	0.016	0.013	0.769	0.752	721
Sector: Health (survey-based)	0.014	0	0.008	0.02	721
Sector: Arts and entertainment (survey-based)	0.006	0.013	0.387	0.252	721
Sector: Finance and insurance (survey-based)	0.002	0	0.318	0.379	721

Notes: This table presents the balance test results between treated households who received a mobile versus cash payment in May for the survey response rate and baseline covariates, which are listed on the left. Columns (1) and (2) report the mean of a given variable for treated households that received mobile and cash payment, respectively. Column (3) reports the p-value of the difference in means between the two groups using OLS. Column (4) reports the p-value when including municipality fixed effects. Column (5) reports the number of observations. Note that victims of Colombia's internal armed conflict were more prone to using mobile money: since 2015, victims were already encouraged to use Daviplata to receive humanitarian aid (Decree 2569/2014). *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.10: Treatment Effects on Behaviors to Mitigate the Spread of COVID-19

	Work	Buy food or medicine	Bank or ATM	Visit health center	Socialize	Exercise	Walk pet	Ask friend/ relative for help	Beg in street	Educational center	Other	Had a guest at home	Index
					Left home in May to...								
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
Treatment	0.029*	0.026	0.114***	0.001	-0.006	0.011	-0.014	0.022	0.012	0.002	0.003	0.024	-0.047***
	(0.017)	(0.019)	(0.022)	(0.018)	(0.016)	(0.015)	(0.012)	(0.017)	(0.010)	(0.005)	(0.005)	(0.016)	(0.016)
Municipality FE	X	X	X	X	X	X	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X	X	X	X	X	X	X
N	2049	2048	2043	2051	2052	2052	2051	2052	2049	2052	2049	2048	2052
R2	0.109	0.067	0.066	0.035	0.039	0.054	0.036	0.085	0.054	0.035	0.05	0.054	0.082
Control Mean	0.176	0.751	0.472	0.19	0.153	0.116	0.076	0.173	0.05	0.012	0.01	0.13	0

Notes: This table presents the treatment effects of the UCT on individual behaviors to mitigate the spread of the coronavirus, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. Table A.12 decomposes the estimate from Column (12) by the reason for the visit. $*p < 0.1, **p < 0.05, ***p < 0.01$.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.11: The Likelihood of Visiting a bank or ATM in May 2020 by Mode of Transfer

| | Visited a bank or ATM in May 2020 | | |
	(1)	(2)	(3)
Treatment	0.114***	0.109***	0.102***
	(0.022)	(0.025)	(0.035)
Treatment x Cash		0.016	0.006
		(0.034)	(0.052)
Municipality FE	X	X	X
Baseline controls	X	X	X
Mode of Transfer FE			X
N	2043	2041	1592
R2	0.066	0.066	0.066
Control Mean	0.472	0.472	0.472

Notes: This table presents the treatment effects of the UCT on the likelihood of visiting a bank or ATM in May 2020. In Column (3), we leverage information from *Familias en Acción* in May 2020 to build a cash indicator for control households. Because Davivienda did not deliver *Familias en Acción* transfers in five of Colombia's 32 departments, we exclude these five departments from our estimation sample. For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.12: The Impact of the Transfer on Visits Received at Home in May

| | *Reason for visit* | | | | |
| | Ask for food | Help w chores | Socialize | Ask for help | Other |
	(1)	(2)	(3)	(4)	(5)
Treatment	0.004	0.007	0.002	0.016*	0.002
	(0.005)	(0.006)	(0.013)	(0.008)	(0.003)
Municipality FE	X	X	X	X	X
Baseline controls	X	X	X	X	X
N	2052	2052	2052	2052	2052
R2	0.031	0.046	0.043	0.04	0.038
Control Mean	0.011	0.013	0.085	0.027	0.003

Notes: This table presents the treatment effects of the UCT on the type of visit received by the household during the month of May (including zeros for households that did not receive a visit), estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table A.13: Index Measure of Behaviors to Mitigate the Spread of COVID-19: Including vs. Excluding Visits to Bank or ATM

	Including (1)	Excluding (2)
Treatment	-0.047***	-0.032*
	(0.016)	(0.017)
Municipality FE	X	X
Baseline controls	X	X
N	2052	2052
R2	0.082	0.074
Control Mean	0	0

Notes: This table presents the treatment effects of the UCT on the index measure of behaviors to mitigate the spread of COVID-19, estimated using equation (1). Column (1) includes visits to the bank or ATM while Column (2) excludes it. For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$.
Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

B   RCT Sample

Recall that, to be eligible for the VAT Compensation, households must receive *Familias en Acción* and/or *Colombia* and who live in "extreme poverty," defined using SISBEN. The RCT was built on the sample of households who received *Familias en Acción*. The sample selection for the RCT proceeded in four steps:

(1) Starting from a total of 1,105 municipalities, rank these municipalities by quartiles of MPI and remove the poorest quartile from the RCT sample, i.e., 276 municipalities with a MPI above 51.6%.

(2) For the remaining municipalities, generate quartiles based on the number of households eligible to receive a VAT Compensation in each municipality.

(3) Randomly select municipalities in each quartile for a total of 53 municipalities. These 53 municipalities have a total population of 17 million individuals or 6 million households, of which 725,000 receive *Familias en Acción*. Among these, 156,000 live in extreme poverty, making them eligible to receive a VAT Compensation.

(4) From these 156,000 eligible households, randomly assign 1,500 (with an oversample) to treatment and 1,500 (with an oversample) to control. This results in 3,462 households, of which 1,730 households are assigned to treatment and 1,732 to control.

C   Impacts on Additional Outcomes

This section reports the treatment effects on additional outcomes included in the pre-analysis plan.

Table C.14 shows that the transfer did not affect an index measure of experiencing common symptoms associated with COVID-19, like fever or chills, cough or a sore throat, difficulty breathing, a loss of taste or smell, or fatigue. This is not particularly surprising, as it is unlikely that anyone in the experimental sample actually had the coronavirus; Colombia's detected infection rate remained relatively low in the 53 municipalities of the RCT sample by the time we surveyed households in June 2020. Indeed, data

from Colombia's *Instituto Nacional de Salud* show that by June 1, 2020, there had been 0 detected cases of COVID-19 in 15 of the 53 municipalities and less than 5 cases in 29 of the 53 municipalities. The number of detected cases was the highest in Cartagena, where it reached 0.3% of the population.

Lastly, the transfer had little detectable impact on two additional measures of household well-being during the pandemic: intimate partner violence reported by women co-habitating with their romantic partner during the quarantine (see Table C.15) and household expenditures (see Table C.16). The lack of overall effects on these outcomes may be due to the small transfer value, the low incidence of the outcome variable (e.g., IPV), the fact that some outcomes are noisily measured (e.g., household expenditures) or the relatively short-term nature of the follow-up in this study.

Table C.14: Treatment Effects on Household Physical Symptoms of COVID-19

	Fever or chills (1)	Headache (2)	Cough or sore throad (3)	Difficulty breathing (4)	Loss of taste/smell (5)	Fatigue (6)	Index (7)
Treatment	0.001	0.038**	-0.003	-0.006	-0.004	0.004	-0.008
	(0.010)	(0.018)	(0.010)	(0.005)	(0.007)	(0.010)	(0.027)
Municipality FE	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X
N	2052	2052	2052	2052	2052	2052	2052
R2	0.055	0.051	0.049	0.036	0.047	0.048	0.059
Control Mean	0.053	0.178	0.054	0.013	0.027	0.058	0

Notes: This table presents the treatment effects of the UCT on household physical health, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. $*p < 0.1, **p < 0.05, ***p < 0.01$. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table C.15: Treatment Effects on Intimate Partner Violence under the Quarantine

	Physical violence (1)	Emotional violence (2)	Economic violence (3)	Sexual violence (4)	No violence Index (5)
Treatment	0.009	0.005	-0.013	0.012	-0.058
	(0.010)	(0.014)	(0.016)	(0.008)	(0.057)
Municipality FE	X	X	X	X	X
Baseline controls	X	X	X	X	X
N	1021	1019	1021	1021	1022
R2	0.06	0.072	0.066	0.065	0.061
Control Mean	0.015	0.049	0.07	0.008	0

Notes: This table presents the treatment effects of the UCT on intimate partner violence under the national quarantine, estimated using equation (1). For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. The sample is restricted to females co-habitating with a romantic partner. $*p < 0.1, **p < 0.05, ***p < 0.01$. *Source:* Authors' calculations using administrative microdata from DNP, DPS, and survey data.

Table C.16: Treatment Effects on Monthly Household Expenditure

	Groceries (weekly) (1)	Cleaning products (2)	Rent or mortgage (3)	Utilities (4)	Clothing (5)	Medicine (6)	Transportation/ gasoline (7)	Debt (8)	Mobile phone/ internet (9)	Education (incl. materials) (10)
Treatment	0.127	-0.109	0.444	-0.08	0.008	-0.038	-0.019	0.037	0.304	0.146
	(0.118)	(0.102)	(0.350)	(0.186)	(0.139)	(0.225)	(0.221)	(0.218)	(0.206)	(0.218)
Municipality FE	X	X	X	X	X	X	X	X	X	X
Baseline controls	X	X	X	X	X	X	X	X	X	X
N	942	1908	1222	1981	2035	2032	2005	2016	2017	1844
R2	0.101	0.07	0.107	0.076	0.062	0.081	0.124	0.062	0.106	0.062

Notes: This table presents the treatment effects of the UCT on household expenses, estimated using equation (1). The outcome uses the inverse hyperbolic sine transformation of a given household expenditure, where said expenditure is expressed in the OECD-modified scale, which assigns a value of 1 to the household head, 0.5 to each additional adult member, and 0.3 to each child. For each outcome variable, we report the coefficients of interest and robust standard errors in parentheses. All regressions include municipality fixed effects as well as baseline controls for household size, number of children, sex, age, victim status, civil status, employment sector, living in an urban area, being a recipient of Colombia Mayor, and SISBEN score. In Column (1), the sample is restricted to households that report buying groceries at least once a week as refers to weekly groceries, excluding alcoholic beverages and cigarettes. $*p < 0.1, **p < 0.05, ***p < 0.01$.

Source: Authors' calculations using administrative microdata from DNP, DPS, and survey data.

D   Survey Instrument (English and Spanish Versions)

	Survey "*Familias en Acción* during COVID-19"	

0.   CALL FLOW

¡Good morning/afternoon/evening! My name is _____ and I work for IPA, a non-profit organization that does research in economic development. I hope you are doing well. ¿Am I speaking with _____ ?

1   Yes → *Go to 1. INTRODUCTION AND CONSENT and continue with question 2.1*

2   No

0.1 ¿May I please speak with _____ ? 1 Yes → *Read presentation again, then go to 1. INTRODUCTION AND CONSENT and continue with question 2.1* 2 No	**0.2** ¿Is this _____ 's number? 1 Yes → *Go to 0.5* 2 No	**0.3** ¿Do you know _____ 's number ? 1 Yes 2 No → *Total decline*
0.3.1 ¿Is this is a fixed or a mobile phone number? 1 Fixed 2 Mobile	**0.4** ¿What number should I call to speak with _____ ? *Surveyor: Please include area code.* Number: __ __ __ __ __ __ __ __ __ __	**0.4** *Surveyor: Please verify the number.* Number __ __ __ __ __ __ __ __ __ __ → *Rescheduled*
0.5 ¿Can _____ answer the survey sometime? 1 Yes → *Rescheduled* 2 No	**0.6** ¿Are you at least 18 years old? 1 Yes 2 No → *Go to 0.9*	**0.7** ¿Are you a member of the same household as _____ ? 1 Yes 2 No → *Go to 0.9*
0.8 ¿Do you know some basic information about this household like expenditures and access to government welfare programs? 1 Yes → *Go to 1. INTRODUCTION AND CONSENT and continue with questions 0.10, 0.11, 0.12* 2 No	**0.9** ¿May I please speak with an adult in the same household as _____ and who knows the basic household information such as expenditures and access to government programs ? 1 Yes → *Read the presentation again and go to 1. INTRODUCTION AND CONSENT* 2 No → *Total decline*	

1.   INTRODUCTION AND CONSENT

1.1   I few days ago we sent you an SMS informing you of this call. We are contatcing you for a survey that will last between 20 and 25 minutes for a research study about the impact of government policies in the last months. For your participation, you will receive 5000 pesos to charge your phone. Would you be willing to participate?

1   Yes

2   No → *Total decline*

1.2   Thank you! Now I will read you the rest of the informed consent.

We will use your ansers to inform the Departament of National Planning about the best way to protect Colombians. Your answers will be confidential and will only be used for analyzing the current situation in an aggregate way. We will ask you about food security, health, employment, COVID-19, and education, among others, but some topics may be sensitive. If you don't want to answer a question, you can refuse to answer or stop the survey at any time and doing so will not affect your benefits. I remind you that the call will be recorded for quality purposes, but you can request to not record if you feel uncomfortable. We may contact you in the future to see how your situation has changed.

If you have any questions, concerns or complaints about this interview, please contact Field coordinator Viviana Delgadillo at 3218669508. You can also send any comments to the following address in Bogotá: Cl. 98 # 22-64 office 307. You can also contact Patricia Moreno, Director of Evaluation of the Department of National Planning at 317 3633214 or email her at pmoreno@dnp.gov.co.

1.3   Do you agree to participate in this survey?

1

1   Yes
2   No → *Total decline*

1.4   Do you give consent to being audio recorded?
1   Yes
2   No → *Continue survey without recording*

2.   DEMOGRAPHICS AND HOUSEHOLD CHARACTERISTICS

Now I will ask you some questions about yourself and your household.

0.10 What is your first name? → *If NO to initial contact* Name: _____	**0.11** What is your last name? → *If NO to initial contact* Last name: _____	**0.12** What is your relationship with the head of household? → *If NO to initial contact* 1 I am the head of household 2 Spouse/partner 3 Father/Father-in-law 4 Grandparent/Partner's grandparent 5 Child/Adopted child/Child-in-law 6 Daughter-in-law/Father-in-law 7 Grandchild 8 Friend 9 Domestic worker -888 Refused
2.1 In what department do you currently live? _____	**2.2** In what municipality do you currently live? _____	**2.3** Were you living in the same house or apartment before the National Quarantine? 1 Yes 2 No -999 DNK -888 Refused
2.4 How many individuals does your household have? *Write -999 if DNK or -888 if refused* ☐☐	**2.5** Did you have internet access for the most part of the month of May? *Note: Access to internet can be via phone, tablet or computer* 1 Yes 2 No -999 DNK -888 Refused	**2.6** Does more than one person use this number? 1 Yes 2 No -999 DNK -888 Refused

3.   COVID-19 MITIGATION

Now I am going to ask you questions about what you did in the month of May.

3.1 In the month of May, did you leave your home …

		1	2	-999	-888
		Yes	No	DNK	Refused
3.1.1	For work?	Yes	No	DNK	Refused
3.1.2	To buy food or medicine?	Yes	No	DNK	Refused
3.1.3	To a bank/ATM?	Yes	No	DNK	Refused
3.1.4	To visit a health center?	Yes	No	DNK	Refused
3.1.5	To socialize with friends or relatives?	Yes	No	DNK	Refused
3.1.6	To exercise?	Yes	No	DNK	Refused
3.1.7	To take your pet for a walk?	Yes	No	DNK	Refused
3.1.8	To ask friends and relatives for help?	Yes	No	DNK	Refused
3.1.9	To beg for help in the street?	Yes	No	DNK	Refused
3.1.10	To go to an educational center	Yes	No	DNK	Refused
3.1.11	For any other reason? → *Go to 3.1.11.1*	Yes	No	DNK	Refused

3.1.11.1 What? _____

3.2 In the month of May, did you receive any visit at your home? 1 Yes 2 No → *Go to 3.3* -999 DNK -888 Refused	**3.2.1** What were the reasons for this visit? *Surveyor: Select all that apply* 1 Ask for food 2 Help with household chores 3 Socialize 4 Ask for help from your household -666 Other → *Go to 3.2.1.1* -999 DNK -888 Refused **3.2.1.1** What? _____

Next, we will ask you a few questions about what you have done in the last sevn days, that is, since *[read current day]* last week until yesterday.

3.3 How many days did you leave your home at any moment? 1 7 days 2 5 or 6 days 3 3 or 4 days 4 1 or 2 days 5 0 days → *Go to 3.5* -999 DNK -888 Refused	**3.4** How many days did you leave your home for work? 1 7 days 2 5 or 6 days 3 3 or 4 days 4 1 or 2 days 5 0 days -999 DNK -888 Refused	**3.5** How many days did members of your household including yourself go to a market or food store? 1 7 days 2 5 or 6 days 3 3 or 4 days 4 1 or 2 days 5 0 days -999 DNK -888 Refused

3.6 Did you wear a face mask or other nose/mouth covering when going out in public? → *If 3.3 not 0 days*

    1   Yes→ *Go to 3.8*
    2   No
  -999   DNK
  -888   Refused

3.7 Why did you not wear a face mask or other nose/mouth covering when going out in public?

Surveyor: Do not read, multiple answers

    1   Not necessary
    2   Too expensive
    3   Not available locally
    4   Afraid to be stigmatized
    5   Don´t have one
    6   Uncomfortable
    7   Employer does not provide one
    8   Employer does not allow
  -666   Other → *Go to 3.7.1*
  -999   DNK
  -888   Refused

3.7.1 What?
_____

3.8 How many days did you receive a visit from a family member or friend at home?

    1   7 days
    2   5 or 6 days
    3   3 or 4 days
    4   1 or 2 days
    5   0 days
  -999   DNK
  -888   Refused

3.9 Taken together, how many people outside this household have you interacted with in-person? By interact, we mean talk, touch, hug, etc. Do not count people you only crossed on the street and had no interaction with.

Write -999 if DNK or -888 if Refused

☐☐

3.10 Did you wash your hands with soap and water more often, less often, or about the same as you did before the National Quarantine?

    1   More
    2   Less
    3   Same
  -999   DNK
  -888   Refused

3.11 What is your main source of concern related to the effects of the Coronavirus crisis in Colombia?
Select one

    1   Physical health
    2   Mental health
    3   Economic needs
    4   Problems with other household members
    5   Not being able to educate children
    6   Not concerned
  -666   Other, specify -> *go to 3.11.1*
  -999   DNK
  -888   Refused

3.11.1 Specify:
_____

---

4. EDUCATION

Now I'm going to ask some questions about the preschool, primary and secondary school-aged children living in your household.

4.1 How many children and adolescents who had been attending school, before government closed down the schools, live in your current household?

Note: Children in preschool or attending CDIs and community homes must also be registered

Write -999 if DNK or -888 if Refused

☐☐

→ If no children attending school, Go to 5. EMPLOYMENT

4.2 On average over the past week, how many hours a day do minors in the household spend on education?
Surveyor: please state the appropriate dates and code to fit.

    1   0 hours
    2   Less than 1 hour/day (< 5 hours/week)
    3   1-2 hours/day (~ 10 hours/week)
    4   2 to 4 hours/day (~ 20 hours/week)
    5   4 to 6 hours/day (~ 30 hours/week)
    6   More than 6 horas (> 30 hours/week)
  -999   DNK
  -888   Refused

4.3 ¿What difficulties have you faced regarding children's education during this time while schools are closed?
Surveyor: Do not read, mark 3 options max.

    1   Lack of access to television
    2   Lack of access to radio
    3   Lack of access to internet
    4   Lack of access to a computer
    5   Lack of access to educational programs
    6   Lack of access to textbooks or learning materials
    7   Lack of motivation
    8   Lack of support from teachers and schools
    9   Children are working to earn money
   10   Children are taking care of their siblings
   11   Children are doing household chores
   12   Lack of supervision from adults in the household
   13   There is no good/quiet place to study
   14   Children need to spend time doing other things
   15   Illness – children
   16   Illness- parents or guardians
   17   Lack of understanding about homeworks or tasks
  -666   Other → *Go to 4.3.1*
  -999   DNK
  -888   Refused

4.3.1 What? _____

4.4 What are the main actions you have taken to support children's education while schools are closed?
Surveyor: Multiple answers. Do not read answers. Select all that apply.

    1   Nothing
    2   Talk to children about school
    3   Read to children
    4   Pay a tutor
    5   Tell children to read their books
    6   Help with homework
    7   Communicate with children's teacher/headteacher/school (vía WhatsApp, videocall or other means)
    8   Play-based learning activities
    9   Encourage children to do distance learning (radio, TV, telephone, etc.)
   10   Provide access to the internet
   11   Provide materials (guides, prints, books, etc)
  -666   Other → *Go to 4.4.1*
  -999   DNK
  -888   Refused

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4.4.1 What? _____

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5. EMPLOYMENT

Now I am going to ask some questions about your employment situation before the national quarantine began, in the month of February 2020.

5.1 During February 2020, did you work for someone else for pay?	**5.2** During February 2020, did you run or do any kind of business, farming or other activity to generate income?	**5.3** During February 2020, did you help in a family business or farm?
1 Yes→ *Go to 5.4* 2 No -999 DNK -888 Refused	1 Yes→ *Go to 5.5* 2 No -999 DNK -888 Refused	1 Yes 2 No → *Go to 5.6* -999 DNK -888 Refused

5.4 Did this job have a written contract?
1   Yes
2   No
-999 DNK
-888 Refused

5.5 Which sector best describes your main job/activity as of the end of February 2020?
Do not read, mark to fit

1	Artistic and entertainment activities
2	Finance and insurance activities
3	Agricultural or fishing activities
4	Retail trade and vehicle reparation
5	Construction
6	Education
7	Manufacturing Industry
8	Mining
9	Health
10	Household workers
11	Lodging (e.g., hotels), food services
12	Transport services
13	Street vendor
14	Other professional, scientific and technical activities (not education or health)
15	Other low-skilled occupations
-666	Other → *Go to 5.5.1*
-999	DNK
-888	Refuses

5.5.1 What? _____

5.6 In the past week, did you have a job or work activity for pay?
1   Yes
2   No
-999 DNK
-888 Refused

---

6. CONSUMPTION AND FOOD SECURITY

Now I will ask you some questions about your household consumption.

6.1 How often does your household buys groceries/ go to a supermarket? *Code to fit* 1 Daily 2 Weekly 3 Every two weeks 4 Monthly 5 Never -999 DNK -888 Refused	**6.2** In the last week, how much did your household spend on groceries, excluding alcoholic beverages and cigarettes? *Surveyor: Write amount in pesos, -999 if DNK or -888 if refused. If did not spend, 0.* [_____] pesos	**6.3** In the last week, how much did your household spend on cigarettes? *Surveyor: Write amount in pesos, -999 if DNK or -888 if refused. If did not spend, 0.* [_____] pesos
6.4 In the last week, how much did your household spend on alcoholic beverages (beer, aguardiente)? *Surveyor: Write amount in pesos, -999 if DNK or -888 if refused. If did not spend, 0.* [_____] pesos	**6.5** In May, how much did your household spend on cleaning products and protection to reduce the risks of COVID infection (alcohol, face masks, hand soap, antibacterial gel, etc.)? *Surveyor: Write amount in pesos, -999 if DNK or -888 if refused. If did not spend, 0.* [_____] pesos	

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6.6 In the month of May, how much did the household spend on…
Surveyor: Write amount in pesos, -999 if DNK or -888 if refused. If did not spend, 0.

6.6.1 Home rent or mortgage payments?

[_____] pesos

    a.   Homeowner and no HOA fee

6.6.2 Utilities (water, electricity, gas)?

[_____] pesos

    a.   Utilities are included in rent

6.6.3 Clothing and personal accessories?

[_____] pesos

6.6.4 Medicine?

[_____] pesos

6.6.5 Transportation/gasoline?

[_____] pesos

6.6.6 Debt and financial expenses?

[_____] pesos

6.6.7 Mobile phone and access to internet?

[_____] pesos

6.6.8 Education / schooling materials?

[_____] pesos

6.7 In May, how many days did **adults in your household** have to limit the portion size at meal-times and/or reduce the number of meals eaten in a given day? *Surveyor please state the month*	**6.8** In May, how many days did **children in your household** have to limit the portion size at meal-times and/or reduce the number of meals eaten in a given day? *Surveyor please state the month*	**6.9** In May, how many days did **adults in your household** last an entire day without eating? *Surveyor please state the month*
1 Almost every day (25-30 days) 2 Most days (18-24 days) 3 Every other day (13-17) 4 Less than every other day (7-12) 5 Some days (1-6 6 Never (0 days) -999 DNK -888 Refused	1 Almost every day (25-30 days) 2 Most days (18-24 days) 3 Every other day (13-17) 4 Less than every other day (7-12) 5 Some days (1-6 6 Never (0 days) -999 DNK -888 Refused	1 Almost every day (25-30 days) 2 Most days (18-24 days) 3 Every other day (13-17) 4 Less than every other day (7-12) 5 Some days (1-6 6 Never (0 days) -999 DNK -888 Refused
6.10 In May, how many days did **children in your household** last an entire day without eating? *Surveyor please state the month*	**6.11** In May, did you or any member of your household have to eat at a relative's or a friend's because there is not enough food in your home? *Surveyor please state the month*	**6.12** In May, did you or any member of your household have to beg food in the street because there is not enough food in your home? *Surveyor please state the month*
1 Almost every day (25-30 days) 2 Most days (18-24 days) 3 Every other day (13-17) 4 Less than every other day (7-12) 5 Some days (1-6 6 Never (0 days) -999 DNK -888 Refused	1 Yes 2 No -999 DNK -888 Refused	1 Yes 2 No -999 DNK -888 Refused

7. HEALTH

Thank you so much for your responses. Now I'm going to ask a few questions about health and health care for your household.

7.1 Have you or anyone in your household developed any of the following symptoms since the National Quarantine began on March 24?
Read each option and mark all that apply

    1   Difficulty sleeping
    2   Anxiety
    3   Aggressive behavior
    4   Sadness
    5   Fever / chills
    6   Headache
    7   Cough / Sore throat
    8   Loss of taste / smell
    9   Difficulty breathing
    10   Fatigue
    11   None of the above → *8. TRUST IN THE STATE*
    -999   DNK
    -888   Refused

I'm sorry to hear that. You can call lines 192/195 to get help at any moment. It is free and available 24/7.

8. TRUST IN THE STATE

8.1 How much do you trust the government of Colombia to promote the well-being of its citizens? *Read out loud:*	**8.2** Do you agree or disagree with the quarantine measure implemented by the national government on March 24? *Read out loud*	**8.3** Do you agree or disagree with the national government's support programs given to households and firms in response to the Coronavirus pandemic? *Por instance, Devolución del IVA, Ingreso Solidario. Read out loud*
1 Totally trust 2 Somewhat trust 3 Somewhat distrust 4 Totally distrust -999 DNK -888 Refused	1 Totally agree 2 Somewhat agree 3 Somewhat disagree 4 Totally disagree -999 DNK -888 Refused	1 Totally agree 2 Somewhat agree 3 Somewhat disagree 4 Totally disagree -999 DNK -888 Refused

8.4 Do you agree or disagree with purchasing without a receipt to evade paying taxes like the value-added tax? *Read out loud*	**8.5** Do you agree or disagree with voluntarily contributing with **money** to support your community? *Read out loud*	**8.6** Do you agree or disagree with voluntarily contributing with **work** to support your community? *Read out loud*
1 Totally agree 2 Somewhat agree 3 Somewhat disagree 4 Totally disagree -999 DNK -888 Refused	1 Totally agree 2 Somewhat agree 3 Somewhat disagree 4 Totally disagree -999 DNK -888 Refused	1 Totally agree 2 Somewhat agree 3 Somewhat disagree 4 Totally disagree -999 DNK -888 Refused

9. VAT COMPENSATION AND OTHER GOVERNMENT TRANSFERS

9.1 Since the national quarantine began on March 24, have you or any member of your household received a transfer from...
Note: Devolución/Compensación del IVA is the same program

		1	2	-999	-888
9.1.1	*Familias en Acción?*	Yes→ Go to 9.6	No	DNK	Refused
9.1.2	*Jóvenes en Acción?*	Yes→ Go to 9.6	No	DNK	Refused
9.1.3	*Colombia Mayor?*	Yes→ Go to 9.6	No	DNK	Refused
9.1.4	*Devolución del IVA?*	Yes→ Go to 9.2	No	DNK	Refused
9.1.5	*Ingreso Solidario?*	Yes→ Go to 9.6	No	DNK	Refused
9.1.6	Another transfer but DNK what program?	Yes→ Go to 9.1.6.1	No	DNK	Refused

9.1.6.1 What was the amount of the last transfer you received from the government for which you do not identify the program?

[_____] pesos

9.2 How did you find out you would benefit Devolución del IVA? *Surveyor: Select all that apply*	**9.3** How much money did you receive from Devolución del IVA? *Surveyor: write the amount in pesos without period nor commas*	**9.4** Have you experienced any delays or difficulties in receiving payments from Devolución del IVA?
1 Text message 2 Government website 3 Municipality links 4 Radio 5 TV 6 Social media (Facebook, Twitter, Instagram, etc.) 7 Newspaper or magazine 8 Friends, relatives, neighbors 9 Call -666 Other → Go to 9.2.1 -999 DNK -888 Refused **9.2.1** Other: _____	[_____] pesos	1 Yes→ Go to 9.5 2 No -999 DNK -888 Refused **9.5** What are they? *Surveyor: Marque todas las que apliquen.* 1 Delays 2 Difficulty registering/using Daviplata 3 Difficulty receiving cash from banks 4 Unable to travel to pick up cash 5 Location/bank I pick up cash is closed 6 Location/bank I pick up cash has no cash 7 Lack of information -666 Other → Go to 9.5.1 -999 *DNK* -888 Refused **9.5.1** Other: _____
9.6 How did you invest the payment Devolución del IVA? *Select all that apply* 1 Food 2 Utilities bill 3 Rent 4 Medicine 5 Debt 6 Helping friends/relatives 7 Computer/laptop 8 Phone 9 Saving 10 Cleaning items -666 Other → Go to 9.4.1.1 -999 DNK -888 Refused **9.6.1** Other: _____	**9.7** Did you or any household member receive food, cash or any other assistance from the local government? 1 Yes 2 No -999 DNK -888 Refused	

10. FINANCIAL HEALTH

10.1 Since the national quarantine began on March 24, have you or someone in your household been forced to do any of the following to pay for food, healthcare, or other expenses? *Read out loud and select all that apply*	**10.2** Since the national quarantine began, have you or any of your household members lent money to friends or relatives?
1 Sell off assets (including livestock) 2 Deplete your savings 3 Borrow money 4 Unable to make a payment on a loan 5 Pawn belonging 6 Stop mandatory payments 7 None of the above	1 Yes 2 No -999 DNK -888 Refused

xx

11.	INTIMATE PARTNER VIOLENCE

11.1 Do you have a romantic partner?	**11.2** Do you live with your romantic partner?
1 Yes 2 No → *Go to 12. END OF SURVEY* -999 DNK -888 Refused	1 Yes 2 No -999 DNK -888 Refused

Thank you very much for the responses you have shared so far. Now we are going to move on to the last section of the survey where we want to ask you about living together with your partner during the National Quarantine. A lot of people experience violence from their partners, so we respectfully want to ask you a few questions on this topic. Your answers will be completely confidential. A simple "yes" or "no" to these questions will suffice. If you have experienced any form of abuse, you can use the 155-emergency line where counsel, advice and attention is provided by the authorities.

11.3 Please make sure no one is listening to this conversation. Could you please confirm that no one is listening to this conversation?
    1   Yes: I confirm → *Go to 11.4*
    2   No: someone else is listening → *Go to 12. END OF SURVEY*
    -999   DNK
    -888   Refused

11.4 Since the National Quarantine began on March 24, have you experienced **physical violence** from your partner? *This includes, for example, if your partner has pushed you, shook you, slapped you, kicked you, dragged you, punched you, hit you with something that could hurt you, threw at object at you, twisted your arm, or threatened you with a knife, a firearm or any other type of weapon.* 1 Yes 2 No -999 DNK -888 Refused	**11.5** Since the National Quarantine began on March 24, have you experienced **emotional violence** from your partner? *This includes, for example, if your partner has humiliated or insulted you with phrases like "you never do anything" or "you are stupid", has humiliated or insulted you in front of other people, has ignored you or has been indifferent towards you, has threatened to leave you, has threatened to take your children, or has threatened to hurt you or hurt someone you care about.* 1 Yes 2 No -999 DNK -888 Refused
11.6 Since the National Quarantine began on March 24, have you experienced **economic violence** from your partner? *This includes, for instance, if your partner controls the money needed for household expenditures or has appropriated your money.* 1 Yes 2 No -999 DNK -888 Refused	**11.7** Since the National Quarantine began on March 24, has your partner forced you to have sex even if you did not want to? 1 Yes 2 No -999 DNK -888 Refused

12.	END OF SURVEY

Thank you for your participation. We would like to offer you COP 5000 in airtime for hour sharing your opinions with us.

12.1 Should I send the airtime to this number? 1 Yes→ *End of survey* 2 No	**12.2** What number should I send the airtime to? Number: __ __ __ __ __ __ __ __	**12.3** Which network do you use with that number so that we can send the correct airtime? 1 Claro 2 Movistar 3 Tigo 4 Virgin Mobile 5 ETB 6 Avantel -666 Other → *Go to 12.3.1* **12.3.1** What? _____

Thank you for your participation in our survey. Have a good day.

12.4 *Surveyor: Please write down ALL your comments regarding the survey. It is important that you provide details as your comments will be used by the IPA team to analyze the quality of the survey and go over potential inconsistencies.*

_____
_____
_____
_____
_____
_____
_____
_____

Encuesta Familias en Acción en tiempos de COVID-19

TABLA DE CONTENIDO

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0. FLUJO DE LLAMADA

¡Buenos días/tardes/noches! Mi nombre es _____ y trabajo para IPA, una organización sin ánimo de lucro que investiga temas relacionados con desarrollo socioeconómico. Espero se encuentre bien. ¿Hablo con _____?

1 Sí → *Vaya a 1. INTRODUCCIÓN Y CONSENTIMIENTO y continúe con la pregunta 2.1*
2 No

0.1 ¿Me puede comunicar con _____ por favor? 1 Sí → *Vuelva a leer la presentación, luego vaya a 1. INTRODUCCIÓN Y CONSENTIMIENTO continúe con la pregunta 2.1* 2 No	**0.2** ¿Este es el número de _____? 1 Sí → *Vaya a 0.5* 2 No	**0.3** ¿Sabe usted el número de _____? 1 Sí 2 No → *Rechazo total*
0.3.1 ¿Es un número fijo o celular? 1 Fijo 2 Celular	**0.4** ¿Cuál es el número al que me puedo contactar para hablar con _____? *Encuestador: Por favor incluya el indicativo antes del número.* Número: __ __ __ __ __ __ __ __ __	**0.4** *Encuestador: Por favor verifique el número que digitó anteriormente* Número: __ __ __ __ __ __ __ __ __ → *Reagendamiento*
0.5 ¿_____ puede contestar la encuesta en algún momento? 1 Sí → *Reagendamiento* 2 No	**0.6** ¿Es usted mayor de edad? 1 Sí 2 No → *Vaya a 0.9*	**0.7** ¿Es usted parte del mismo hogar que _____? 1 Sí 2 No → *Vaya a 0.9*
0.8 ¿Conoce usted la información básica de este hogar como gastos y acceso a subsidios por parte del gobierno? 1 Sí → *Vaya a 1. INTRODUCCIÓN Y CONSENTIMIENTO y continúe con las preguntas 0.10, 0.11, 0.12* 2 No	**0.9** ¿Puede pasarme a alguien que sea mayor de edad, sea parte del hogar de _____ y conozca la información básica de este hogar como gastos y acceso a subsidios por parte del gobierno? 1 Sí → *Vuelva a leer la presentación y luego vaya a 1. INTRODUCCIÓN Y CONSENTIMIENTO* 2 No → *Rechazo total*	

---

1. INTRODUCCIÓN Y CONSENTIMIENTO

1.1 Hace unos días le enviamos un mensaje de texto para informarle sobre esta llamada. Nos estamos comunicando con usted para hacer una encuesta que tomará entre 20 y 25 minutos para participar en un estudio de investigación sobre el impacto de las políticas del gobierno durante los últimos meses. Por su participación, usted recibiría 5000 pesos de recarga a su celular. ¿Le gustaría participar?

1 Sí
2 No → *Rechazo total*

1.2 ¡ Muchas gracias! Ahora le voy a leer el resto del consentimiento del informado

Utilizaremos sus respuestas para informar al Departamento Nacional de Planeación sobre la mejor manera de proteger a los colombianos. Sus respuestas van a ser confidenciales y solo se usarán para realizar análisis de la situación actual de forma agregada. Vamos a preguntar sobre seguridad alimentaria, salud, empleo, COVID-19 y educación, entre otros, pero hay temas que pueden ser sensibles. Si no desea responder alguna pregunta, puede negarse a responder o detener la encuesta en cualquier momento y aquello no afectará sus beneficios. Le recuerdo que la llamada será grabada con fines de calidad, pero puede solicitar que no lo sea si se siente incómodo. Puede que lo contactemos en el futuro para conocer más sobre cómo ha cambiado su situación.

Si tiene alguna pregunta o inquietud sobre la investigación o sus derechos como participante, o tiene una queja o reclamo, puede llamar a la Coordinadora de Campo Viviana Delgadillo al 3218669508. Igualmente, podrá enviar cualquier comentario a la siguiente dirección en Bogotá: Cl. 98 # 22-64 oficina 307. Igualmente puede contactarse con Patricia Moreno, líder de evaluación del Departamento Nacional de Planeación al 317 3633214 o envíe un correo a pmoreno@dnp.gov.co.

1.3 ¿Está de acuerdo con contestar esta encuesta?
1 Sí
2 No → *Rechazo total*

1.4 ¿Está de acuerdo con que la llamada sea grabada?
1 Sí → *Continuar la encuesta sin grabar*
2 No → *Continuar encuesta sin grabar*

2.	**DEMOGRAFÍA Y CARACTERÍSTICAS DEL HOGAR**

Ahora le haré unas preguntas sobre usted y su hogar

0.10 ¿Cuál es su nombre? → *Sí NO a contacto inicial* Nombre: _____	**0.11** ¿Cuál es su apellido? → *Sí NO a contacto inicial* Apellido: _____	**0.12** ¿Cuál es su relación con el jefe del hogar? → *Sí NO a contacto inicial* 1 Soy el jefe del hogar 2 Conyugué/Pareja 3 Padre/Suegro 4 Abuelo/Conyugue abuelo 5 Hijo/Hijo adoptado/Hijastro 6 Yerno o nuera 7 Nieto 8 Amigo 9 Trabajador doméstico -888 No responde
2.1 ¿En qué departamento vive actualmente? _____	**2.2** ¿En qué municipio vive actualmente? _____	**2.3** ¿Vive en la misma casa o apartamento que antes de empezar la Cuarentena Nacional del 24 de marzo? 1 Sí 2 No -999 No sabe -888 No responde
2.4 ¿Cuántas personas conforman su hogar? *Escribir -999 si no sabe o -888 si no responde* ☐☐	**2.5** ¿Tuvo usted internet la mayor parte del mes de mayo? *Nota: El acceso a internet puede ser por computador, celular o tablet.* 1 Sí 2 No -999 No sabe -888 No responde	**2.6** ¿Varias personas utilizan este número telefónico como número de contacto? 1 Sí 2 No -999 No sabe -888 No responde

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3.	**MITIGACIÓN DEL COVID**

Ahora vamos a hacerle preguntas sobre lo que hizo el mes pasado, es decir, en mayo.

3.1 En el mes de mayo, ¿salió usted de su casa…

		1	2	-999	-888
3.1.1	a trabajar?	Sí	No	No sabe	No responde
3.1.2	a comprar comida o medicamentos?	Sí	No	No sabe	No responde
3.1.3	a un banco, cajero o sucursal bancaria?	Sí	No	No sabe	No responde
3.1.4	a visitar un centro de salud?	Sí	No	No sabe	No responde
3.1.5	a socializar con familiares o amigos?	Sí	No	No sabe	No responde
3.1.6	a hacer ejercicio?	Sí	No	No sabe	No responde
3.1.7	a sacar la mascota?	Sí	No	No sabe	No responde
3.1.8	a pedir ayuda a familiares o amigos?	Sí	No	No sabe	No responde
3.1.9	a pedir ayuda en la calle?	Sí	No	No sabe	No responde
3.1.10	a un centro educativo?	Sí	No	No sabe	No responde
3.1.11	por otro motivo? → *Vaya a 3.1.11.1*	Sí	No	No sabe	No responde

3.1.11.1 ¿Cuál? _____

3.2 En el mes de mayo, ¿usted recibió alguna visita en su casa? 1 Sí 2 No → *Vaya a 3.3* -999 No sabe -888 No responde	**3.2.1** ¿Cuáles fueron los motivos de las visitas? *Encuestador: Seleccione todas las que apliquen* 1 Pedir comida 2 Trabajar/apoyar con labores en el hogar 3 Socializar 4 Recibir/ pedir ayuda de su hogar -666 Otra razón → *Vaya a 3.2.1.1* -999 No sabe -888 No responde **3.2.1.1** ¿Cuál? _____

A continuación, vamos a hacerle preguntas sobre lo que hizo en los últimos siete días, es decir del *[leer el nombre del día presente]* de la semana pasada hasta ayer.

3.3 ¿Cuántos días salió de su casa en algún momento? 1 7 días 2 5 o 6 días 3 3 o 4 días 4 1 o 2 días 5 Ningún día 0 días → *Vaya a 3.5* -999 No sabe	**3.4** ¿Cuántos días salió de su casa a trabajar? 1 7 días 2 5 o 6 días 3 3 o 4 días 4 1 o 2 días 5 0 días -999 No sabe	**3.5** ¿Cuántos días los miembros de su hogar, incluido usted, fueron a una tienda de alimentos, fuente de abastecimientos o a recoger alimentos? 1 7 días 2 5 o 6 días 3 3 o 4 días 4 1 o 2 días

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-888 No responde	-888 No responde	5 0 días -999 No sabe -888 No responde

| **3.6** ¿Usó un tapabocas o cualquier otra cobertura de nariz y boca cuando ha salido en público? → *si 3.3 diferente de ningún día*
1 Sí → *Vaya 3.8*
2 No
-999 No sabe
-888 No responde | **3.7** ¿Por qué no usó un tapabocas o cualquier otra cobertura de nariz y boca cuando salió en público?
Encuestador: No leer, múltiples respuestas
1 No es necesario
2 Muy costosa
3 No hay disponibilidad localmente
4 Miedo a que lo discriminen
5 No tengo uno
6 Es incómodo
7 Mi empleador no me ha dado uno
8 Mi empleador no me permite usar uno
-666 Otro → *Vaya a 3.7.1*
-999 No sabe
-888 No responde

3.7.1 ¿Cuál?
_____ | **3.8** ¿Cuántos días recibió en su casa una visita de algún familiar o amigo?
1 7 días
2 5 o 6 días
3 3 o 4 días
4 1 o 2 días
5 0 días
-999 No sabe
-888 No responde |
| **3.9** ¿Con cuántas personas, fuera de los miembros de su hogar, usted interactuó en persona? (No cuente las personas con que se ha cruzado en la calle y con las cuales no ha interactuado.)

Escribir -999 si no sabe o -888 si no responde
☐☐ | **3.10** ¿Se lavó las manos con agua y jabón con más frecuencia, con menos frecuencia o casi igual que antes de la Cuarentena Nacional del 24 de marzo?
1 Más
2 Menos
3 Igual
-999 No sabe
-888 No responde | **3.11** ¿Cuál es su principal preocupación relacionada con los efectos del Coronavirus en Colombia?
Seleccione una
1 Salud física
2 Salud mental
3 Necesidades económicas
4 Problemas con otros miembros del hogar
5 No poder educar a los niños
6 No le preocupa
-666 Otro → *Vaya a 3.11.1*
-999 No sabe
-888 No responde

3.11.1 ¿Cuál?
_____ |

4. EDUCACIÓN

Ahora voy a hacer algunas preguntas sobre los niños en edad escolar preescolar, primaria y secundaria que viven en su hogar.

4.1 ¿Cuántos niños/adolescentes que estaban asistiendo al colegio o jardín antes de que el gobierno cerrara los colegios, viven actualmente en su hogar? *Nota: Niños en nivel preescolar, jardín o que asistían a CDIs y hogares comunitarios también deben ser registrados* *Escribir -999 si no sabe o -888 si no responde* ☐☐ → *Si no hay menores de edad en edad escolar vaya a 5. EMPLEO*	**4.2** En promedio durante la semana pasada, ¿cuántas horas al día pasaron los menores de edad del hogar en actividades educativas? *Encuestador: por favor especifique de qué día a qué día y seleccione la respuesta más apropiada.* 1 0 horas 2 Menos de 1 hora diaria (< 5 horas semanales) 3 1-2 horas diarias (~ 10 horas semanales) 4 2 a 4 horas (~ 20 horas semanales) 5 4 a 6 horas (~ 30 horas semanales) 6 Más de 6 horas (> 30 horas semanales) -999 No sabe -888 No responde

4.3 ¿Qué dificultades ha tenido frente a la educación de los niños durante este tiempo mientras los colegios están cerrados?
Encuestador: No lea las opciones, seleccione máximo 3 respuestas.

1	Falta de acceso a la televisión	11	Los niños están haciendo las tareas domésticas
2	Falta de acceso a la radio	12	Falta de supervisión de los adultos en el hogar.
3	Falta de acceso a internet	13	No hay un lugar bueno / tranquilo para estudiar
4	Falta de acceso a un computador (restricción)	14	Los niños necesitan pasar su tiempo haciendo otras cosas
5	Falta de acceso a programas educativos.	15	Enfermedad – niños
6	Falta de acceso a libros para materiales de aprendizaje.	16	Enfermedad- padres u otros cuidadores
7	Falta de motivación	17	Falta de comprensión en guías o tareas
8	Falta de apoyo de los profesores y colegios	-666	Otro → *Vaya a 4.3.1*
9	Los niños están trabajando para ganar dinero	-999	No sabe
10	Los niños cuidan a sus hermanos	-888	No responde

4.3.1 ¿Cuál? _____

4.4 ¿Cuáles son las principales acciones que ha tomado para apoyar la educación de los niños en su hogar mientras los colegios están cerrados?
Encuestador: Respuesta múltiple. No lea las opciones de respuesta. Seleccione todas las opciones que apliquen.

1 Nada
2 Hablar con los niños acerca del colegio
3 Leerles a los niños
4 Pagar un tutor
5 Decirles a los niños que revisen sus libros
6 Ayudar con las tareas
7 Comunicarse con profesor del niño / director / colegio (vía whatsapp, videollamada u otro medio)
8 Actividades de aprendizaje basadas en el juego
9 Alentar a los niños a aprender a distancia (radio, televisión, teléfono, etc.)
10 Proporcionar el acceso a internet
11 Proporcionar materiales (guías, impresiones, libros, etc)

-666   Otra → *Vaya a 4.4.1*
-999   No sabe
-888   No responde

4.4.1 ¿Cuál? _____

---

5. EMPLEO

Ahora voy a hacer algunas preguntas sobre su situación laboral antes de que comenzara la cuarentena nacional, en el mes de febrero de 2020.

5.1 En febrero de este año, ¿usted trabajó y le pagaron por este trabajo?	**5.2** En febrero de este año, ¿realizó alguna otra actividad para generar ingresos o manejó su propio negocio?	**5.3** En febrero de este año, ¿ayudó en algún negocio o finca familiar?
1 Sí → *Vaya a 5.4* 2 No -999 No sabe -888 No responde	1 Sí → *Vaya a 5.5* 2 No -999 No sabe -888 No responde	1 Sí 2 No → *Vaya a 5.6* -999 No sabe -888 No responde
5.4 ¿Este trabajo remunerado tiene un contrato laboral escrito? 1 Sí 2 No -999 No sabe -888 No responde		

5.5 ¿A qué se dedica la empresa / negocio donde usted trabajaba en febrero de este año?
No leer, Seleccionar la más apropiada

1	Actividades artísticas y de entretenimiento
2	Actividades financieras y de seguros
3	Agricultura o pesca
4	Comercio minorista y reparación de vehículos
5	Construcción
6	Educación
7	Industria manufacturera
8	Minería
9	Salud
10	Servicio doméstico
11	Servicios de alojamiento (hoteles) y de comida (restaurantes)
12	Servicios de transporte
13	Ventas callejeras
14	Otras actividades profesionales, científicas o técnicas.
15	Otras actividades no técnicas
-666	Otro → *Vaya a 5.5.1*
-999	No sabe
-888	No responde

5.5.1 ¿Cuál? _____

5.6 En la última semana, ¿usted trabajó y le pagaron?
1   Sí
2   No
-999   No sabe
-888   No responde

---

6. CONSUMO Y SEGURIDAD ALIMENTARIA

Ahora voy a hacer algunas preguntas sobre el consumo de su hogar.

6.1 ¿Cada cuánto se hace mercado en su hogar? *Encuestador: No leer, única respuesta.*	**6.2** En la última semana, ¿cuánto gastó en mercado, sin incluir bebidas alcohólicas ni cigarrillos? *Encuestador: Escribir monto en pesos, -999 si no sabe o -888 si no responde. Si no gastó 0*	**6.3** En la última semana, ¿Cuánto gastó en cigarrillos? *Encuestador: Escribir monto en pesos, -999 si no sabe o -888 si no responde. Si no gastó 0*
1 Diariamente 2 Semanalmente 3 Quincenalmente 4 Mensualmente 5 Nunca -666 Otra -999 No sabe -888 No responde	[_____] pesos	[_____] pesos
6.4 En la última semana, ¿Cuánto gastó en bebidas alcohólicas? *Encuestador: Escribir monto en pesos, -999 si no sabe o -888 si no responde. Si no gastó 0* [_____] pesos	**6.5** En mayo, ¿Cuánto gastó en artículos de aseo y protección para disminuir los riesgos de contagio del COVID (alcohol, tapabocas, jabón de manos, gel antibacterial, etc.) *Encuestador: Escribir monto en pesos, -999 si no sabe o -888 si no responde. Si no gastó 0* [_____] pesos	

6.6 En mayo, ¿cuánto gastó aproximadamente el hogar en …
Encuestador: Escribir monto en pesos, -999 si no sabe o -888 si no responde. Si no gastó 0

6.6.1 Arriendo o crédito de vivienda y administración?   **6.6.5** Transporte / Gasolina?
[_____] pesos   [_____] pesos
     a.   La casa es propia y no paga administración

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6.6.2 Servicios públicos (agua, electricidad, gas)?

[   ] pesos

    a.   Los servicios públicos están incluidos en el arriendo

6.6.3 Prendas de vestir y accesorios personales?

[   ] pesos

6.6.4 Medicamentos?

[   ] pesos

6.6.6 Deudas y gastos financieros?

[   ] pesos

6.6.7 Telefonía celular y acceso a internet?

[   ] pesos

6.6.8 Educación / Útiles escolares?

[   ] pesos

6.7 En mayo ¿cuántos días tuvieron que comer menos por falta de comida **los mayores de edad** de su hogar? *Encuestador por favor diga el mes*	**6.8** En mayo ¿cuántos días tuvieron que comer menos por falta de comida **los menores de edad** de su hogar? *Encuestador por favor diga el mes*	**6.9** En mayo, ¿cuántos días pasaron **los adultos** de su hogar sin comer en todo el día? *Encuestador por favor diga el mes*
1 Casi todos los días (25-30 días) 2 La mayoría de días (18-24 días) 3 Casi la mitad de los días (13-17) 4 Menos de la mitad de los días (7-12) 5 Algunos días (1-6 6 Nunca (0 días) -999 No sabe -888 No responde	1 Casi todos los días (25-30 días) 2 La mayoría de días (18-24 días) 3 Casi la mitad de los días (13-17) 4 Menos de la mitad de los días (7-12) 5 Algunos días (1-6 6 Nunca (0 días) -999 No sabe -888 No responde	1 Casi todos los días (25-30 días) 2 La mayoría de días (18-24 días) 3 Casi la mitad de los días (13-17) 4 Menos de la mitad de los días (7-12) 5 Algunos días (1-6 6 Nunca (0 días) -999 No sabe -888 No responde
6.10 En mayo, ¿cuántos días pasaron **los menores de edad** de su hogar sin comer en todo el día? *Encuestador por favor diga el mes* 1 Casi todos los días (25-30 días) 2 La mayoría de días (18-24 días) 3 Casi la mitad de los días (13-17) 4 Menos de la mitad de los días (7-12) 5 Algunos días (1-6 6 Nunca (0 días) -999 No sabe -888 No responde	**6.11** En mayo, usted o algún miembro de su hogar tuvo que ir a comer a donde un familiar o conocido porque no había suficiente comida en su casa? *Encuestador por favor diga el mes* 1 Sí 2 No -999 No sabe -888 No responde	**6.12** En mayo, ¿usted o algún miembro de su hogar tuvo que salir a pedir comida a la calle porque no hay suficiente comida en casa? *Encuestador por favor diga el mes* 1 Sí 2 No -999 No sabe -888 No responde

7.   SALUD
Muchas gracias por las respuestas que me ha compartido hasta el momento, ahora voy a hacerle una pregunta sobre su salud.

7.1 ¿Usted o alguien de su hogar ha desarrollado alguno de los siguientes síntomas desde que empezó la Cuarentena Nacional del 24 de marzo?
Lea en voz alta las opciones y marque todas las que apliquen

    1   Dificultad para dormir
    2   Angustia
    3   Comportamientos agresivos
    4   Tristeza
    5   Fiebre / Escalofríos
    6   Dolor de cabeza
    7   Tos / Dolor de garganta
    8   Pérdida del olfato / Gusto
    9   Dificultad para respirar
    10   Cansancio / Fatiga
    11   Ninguna de las anteriores → *8. CONFIANZA EN EL ESTADO*
  -999   No sabe
  -888   No responde

Recuerde que el Ministerio de Salud tiene la línea telefónica 192/195 habilitada para atender síntomas como los descritos, a la que puede llamar para obtener ayuda en cualquier momento. Esta línea es gratuita y opera las 24 horas del día.

8.   CONFIANZA EN EL ESTADO

8.1 ¿Cuánto confía en el gobierno de Colombia para promover el bienestar de sus ciudadanos? *Lea las opciones de respuesta*	**8.2** ¿Qué tan de acuerdo o en desacuerdo está con la Cuarentena Nacional que implementó el gobierno nacional el 24 de marzo? *Lea las opciones de respuesta*	**8.3** ¿Qué tan de acuerdo o en desacuerdo está con los programas de ayuda que ha brindado el gobierno a los hogares y empresas en respuesta al Coronavirus? *Por ejemplo, Devolución del IVA, Ingreso Solidario.* *Lea las opciones de respuesta*
1 Confío totalmente 2 Confío algo 3 Desconfío algo 4 Desconfío totalmente -999 No sabe -888 No responde	1 Muy de acuerdo 2 De acuerdo 3 En desacuerdo 4 Muy en desacuerdo -999 No sabe -888 No responde	1 Muy de acuerdo 2 De acuerdo 3 En desacuerdo 4 Muy en desacuerdo -999 No sabe -888 No responde
8.4 ¿Qué tan de acuerdo o en desacuerdo estaría usted con realizar sus compras sin factura para no pagar impuestos como el IVA? *Lea las opciones de respuesta* 1 Muy de acuerdo 2 De acuerdo 3 En desacuerdo 4 Muy en desacuerdo -999 No sabe -888 No responde	**8.5** ¿Qué tan de acuerdo o en desacuerdo estaría usted con **dar dinero** para apoyar a su comunidad? *Lea las opciones de respuesta* 1 Muy de acuerdo 2 De acuerdo 3 En desacuerdo 4 Muy en desacuerdo -999 No sabe -888 No responde	**8.6** ¿Qué tan de acuerdo o en desacuerdo estaría usted con **trabajar** para apoyar a su comunidad? *Lea las opciones de respuesta* 1 Muy de acuerdo 2 De acuerdo 3 En desacuerdo 4 Muy en desacuerdo -999 No sabe -888 No responde

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9. DEVOLUCION DEL IVA Y OTRAS TRANSFERENCIAS DEL ESTADO

9.1 Desde que empezó la Cuarentena Nacional el 24 de marzo, ¿usted o algún miembro de su hogar ha recibido una transferencia por parte de...
Nota: Devolución/Compensación del IVA es el mismo programa

		1	2	-999	-888
9.1.1	Familias en Acción?	Sí → *Vaya a 9.6*	No	No sabe	No responde
9.1.2	Jóvenes en Acción?	Sí → *Vaya a 9.6*	No	No sabe	No responde
9.1.3	Colombia Mayor?	Sí → *Vaya a 9.6*	No	No sabe	No responde
9.1.4	Devolución del IVA?	Sí → *Vaya a 9.2*	No	No sabe	No responde
9.1.5	Ingreso Solidario?	Sí → *Vaya a 9.6*	No	No sabe	No responde
9.1.6	Otra transferencia pero no sabe de qué programa?	Sí → *Vaya a 9.1.6.1*	No	No sabe	No responde

9.1.6.1 ¿Cuál fue el monto de la última transferencia que recibió por parte del gobierno de la cual no identifica el programa?

[_____] pesos

9.2 ¿Cómo se enteró que sería beneficiario de la Devolución del IVA?
Encuestador: Seleccione todas las que apliquen

1. Mensaje al celular
2. Página internet del gobierno
3. Enlace municipal
4. Radio
5. Televisión
6. Redes sociales (Facebook, Twitter, Instagram, etc.)
7. Periódico o revista
8. Amigos, familiares, vecinos
9. Llamada
-666. Otro → *Vaya a 9.2.1*
-999. No sabe
-888. No responde

9.2.1 ¿Cómo se enteró que sería beneficiario de la Devolución del IVA?: Otra

_____

9.3 ¿Cuál fue el monto del último pago que recibió por el programa de Devolución del IVA?
Encuestador: escriba el monto exacto en pesos sin puntos ni comas.

[_____] pesos

9.4 ¿Ha experimentado retrasos o dificultades para recibir pagos de la devolución del IVA?

1. Sí → *Vaya a 9.5*
2. No
-999. No sabe
-888. No responde

9.5 ¿Qué dificultades ha experimentado en el pago de la devolución del IVA?
Encuestador: Marque todas las que apliquen.

1. Retrasos
2. Dificultad para inscribirse/utilizar DAVIPLATA
3. Dificultad para recibir efectivo de dinero móvil o agentes bancarios
4. Dificultad para ir a recoger efectivo
5. Ubicación / banco donde recojo el efectivo está cerrado
6. Ubicación / banco donde recojo el efectivo no tiene efectivo
7. Falta de información
-666. Otro → *Vaya a 9.4.1.1*
-999. No sabe
-888. No responde

9.5.1 ¿Qué otra dificultad ha experimentado en el pago de estos programas?:

_____

9.6 ¿En qué ha gastado el dinero de la Devolución del IVA?
Seleccione todas las que apliquen

1. Comida
2. Pago de servicios
3. Pago de arriendo
4. Pago de medicamentos
5. Pago de deudas
6. Ayuda a familiares/amigos
7. Computador
8. Celular
9. Ahorro
10. Artículos de aseo
-666. Otro → *Vaya a 9.4.1.1*
-999. No sabe
-888. No responde

9.6.6 ¿En qué invirtió el dinero de la Devolución del IVA?: Otro

_____

9.7 ¿Usted o algún miembro de su hogar recibió alimentos, dinero en efectivo u otro tipo de apoyo de la alcaldía o gobernación?

1. Sí
2. No
-999. No sabe
-888. No responde

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10. SALUD FINANCIERA

10.1 Desde que comenzó la Cuarentena Nacional el 24 de marzo, ¿usted o alguien de su hogar se ha visto obligado a hacer lo siguiente para pagar alimentos, atención médica u otros gastos?
Lea las opciones y seleccione todas las que apliquen

1. Vender sus pertenencias (electrodomésticos, ganado, gallinas, cerdos, etc.)
2. Agotar sus ahorros
3. Pedir prestado dinero
4. No poder pagar un préstamo
5. Empeñar sus pertenencias
6. Dejar de pagar obligaciones
7. Ninguna de las anteriores
-999. No sabe
-888. No responde

10.2 Desde que comenzó la Cuarentena Nacional, ¿usted o algún miembro de su hogar le ha prestado o regalado dinero a familiares?

1. Sí
2. No
-999. No sabe
-888. No responde

11. VIOLENCIA INTRAFAMILIAR	

11.1 ¿Tiene usted pareja sentimental? 1 Sí 2 No → *Vaya a 12. FINALIZAR LA ENCUESTA* -999 No sabe -888 No responde	**11.2** ¿Vive usted con su pareja sentimental? 1 Sí 2 No -999 No sabe -888 No responde

Muchas gracias por las respuestas que me ha compartido hasta el momento. Ahora vamos a pasar a la última sección de la encuesta donde queremos preguntarle sobre la convivencia en su relación de pareja durante la Cuarentena Nacional. Muchas personas experimentan violencia por parte de sus parejas, por eso queremos con todo respeto hacerle unas preguntas sobre este tema, sus respuestas serán completamente confidenciales. Con un simple "si" o "no" será suficiente. Si ha sufrido algún tipo de abuso, puede llamar a la línea 155 para obtener ayuda en cualquier momento.

11.3 Por favor asegúrese que nadie más esté escuchando esta conversación. ¿Puede confirmar que nadie más está escuchando esta conversación?
1   Sí: confirmo que nadie más está escuchando la conversación → *Vaya a 11.4*
2   No: alguien más está escuchando la conversación → *Vaya a 12. FINALIZAR LA ENCUESTA*
-999 No sabe
-888 No responde

11.4 Desde que empezó la Cuarentena Nacional del 24 de marzo, ¿ha experimentado **violencia física** por parte de su pareja? *Nota: Esto incluye, por ejemplo, si su pareja la/lo ha empujado, sacudido, cacheteado, pateado, arrastrado, golpeado con el puño, golpeado con algo que pudiese lastimarla, le ha lanzado algún objeto, torcido el brazo, o la/lo ha amenazado con un cuchillo, arma de fuego u otro tipo de arma.* 1 Sí 2 No -999 No sabe -888 No responde	**11.5** Desde que empezó la Cuarentena Nacional del 24 de marzo, ¿ha experimentado **violencia emocional** o psicológica por parte de su pareja? *Nota: Esto incluye, por ejemplo, si su pareja la/lo ha humillado o insultado con frases como "usted nunca hace nada" o "usted es una estúpida/o", la ha humillado o insultado en frente de otras personas, la/lo ha ignorado o ha sido indiferente hacia usted, ha amenazado con dejarla/lo, ha amenazado con llevarse a sus hijos, o ha amenazado con lastimarla/lo o lastimar a alguien que usted estima.* 1 Sí 2 No -999 No sabe -888 No responde
11.6 Desde que empezó la Cuarentena Nacional del 24 de marzo, ¿ha experimentado violencia económica? *Nota: Esto incluye, por ejemplo, si su pareja ha controlado la entrega del dinero necesario para los gastos del hogar o se ha apropiado de su dinero.* 1 Sí 2 No -999 No sabe -888 No responde	**11.7** Desde que empezó la Cuarentena Nacional del 24 de marzo, ¿su pareja la/lo ha obligado a tener relaciones sexuales aún si usted no lo quería? 1 Sí 2 No -999 No sabe -888 No responde

12. FINALIZAR ENCUESTA		

Gracias por su participación. Nos gustaría ofrecerle 5000 pesos de recarga por haber compartido con nosotros sus opiniones.

12.1 ¿Está bien si envío la recarga a este número? 1 Sí → *Finalice la encuesta* 2 No	**12.2** ¿A qué número debo enviarle la recarga? Número: __ __ __ __ __ __ __ __ __ __	**12.3** ¿Qué red utiliza con ese número para que podamos enviar la recarga correctamente? 1 Claro 2 Movistar 3 Tigo 4 Virgin Mobile 5 ETB 6 Avantel -666 Otra → *Vaya a 12.3.1* **12.3.1** ¿Cuál? _____

Gracias por su participación en nuestra encuesta. ¡Tenga un buen día!

12.4 *Encuestador: Por Favor escriba TODOS sus comentarios con respecto a la encuesta. Es importante que sea detallado pues estos comentarios serán usados por el equipo de IPA para analizar cómo estuvo la encuesta y revisar posibles inconsistencias.*

_____
_____
_____
_____
_____
_____
_____
_____
_____