

Section Two: (Information for the Researcher): Interview Procedure

1. Record the phone number and time of each call attempt until a response is received, as indicated in the list.
2. Introduce the PCBS and the purpose of the call, and ask to speak with the head of the household or any adult family member.
3. Interview Procedure:

“Hello, my name is (**your name**). We are from the Palestinian Central Bureau of Statistics conducting a survey on the social and economic conditions of Palestinian households in Gaza Strip amid the Israeli aggression. We are calling you because you participated in the first round of this phone survey in December last year. You had provided your number to us during the *Palestinian Expenditure and Consumption Survey* in 2023.”

This interview will take approximately 20-30 minutes. All the information we obtain will remain strictly confidential and anonymous. If you choose not to answer any question or wish to stop the interview, please let us know.”

4. According to the table below, specify the respondent's reaction based on the options in questions C5 and C6.
5. If the respondent agrees, proceed to Section Three according to the questions and their sequence.

C1	C2	C3	C4	C5	C6	C7	C8
Attempt	For the researcher: The phone number required in each attempt	Time of call attempt	Was the call answered? 1. Yes 2. No, no answer... >>next attempt 3. No, number out of service...>> next attempt 4. No, number is locked... >> next attempt 5.number is wrong\nnext attempt with different number if available	Did agree to conduct the interview? 1. Yes... proceed to next section 2. No, refused → MOVE TO C6	For the researcher: Ask the respondent if it's possible to call back later 1. Yes... specify day and time 2. No... go to final part (Interview Result)	Day	Hour
1							
2							
3							
4							
5							
6							
7							
8							

Section Three: Household member data

D1	D2	D3	D4	D5	D6	D7
Line No. of Individual	<p>Full Name as per Last Visit Record</p> <p>Researcher: "First, I would like to verify if the individuals we recorded during the last visit are still residing with you in the same dwelling (living with the family)."</p> <p>(Inquire about the following questions...)</p> <p>After that, inquire if there are any new members who have joined the household. After adding the new names?</p>	<p>Is (name) still living with this household?</p> <p>1. Yes → skip to D5 2. No</p>	<p>Why is (name) no longer living with the same household?</p> <p>1. Abroad for a limited period (non-study) 2. Abroad for study 3. Separated to form a new household (marriage) 4. Deceased 5. Martyred 6. Migrated 7. Imprisoned (by Israeli occupation) 8. Divorced 9. Missing 10. Moved with family to a new dwelling 11. Returned to original family 12. (Displacement) Moved to live with another family 13. Other – specify</p>	<p>What is the gender of (name)?</p> <p>1. Male 2. Female</p>	<p>Age in completed years</p>	<p>What is (name)'s relationship to the head of household?</p> <p>1. Head of household 2. Wife / Husband 3. Son / Daughter 4. Father / Mother 5. Brother / Sister 6. Grandfather / Grandmother 7. Grandson / Granddaughter 8. Daughter-in-law / Son-in-law 9. Other relatives 10. Others (non-relatives)</p>
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

9		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
---	--	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

Section Four: War and Displacement

D2	Name of the individual responding (per household roster)	
D1	Line number of respondent in roster		<input type="checkbox"/> <input type="checkbox"/>
H1	Place of residence of the household before the war	(Name of locality)	locality code <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H2	Current place of residence (Name of locality – record full address, code later)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
H3	Dwelling type before the war	1. Villa 2. House 3. Apartment 4. Independent room 5. Tent 6. Barracks / Caravan / Hut 7. Other – specify	<input type="checkbox"/>
H4	Dwelling type currently	1. Original dwelling (pre-war) 2. Home of a family member or friends 3. Barracks / storage of industrial or commercial premises 4. Independent tent / barracks or group of tents in public areas / streets / farmland 5. Internal shelter center – schools (government, private, UNRWA) or universities / institutes 6. Internal shelter center – international-organization premises 7. Internal shelter center – hospitals 8. Internal shelter center – charitable clubs / associations 9. Other – specify	<input type="checkbox"/>
H5	Since the Israeli aggression (Oct 2023), has your house been damaged by Israeli forces?	1. Yes, partial destruction 3. No 2. Yes, total destruction 4. Don't know / No answer	<input type="checkbox"/>
H6	Has your current dwelling / neighborhood been bombed by the Israeli army?	1. Yes 2. No → skip to H7 3. Don't know / No answer → skip to H7	<input type="checkbox"/>
H6_1	How many times has your current dwelling been bombed?	Number of times	<input type="checkbox"/> <input type="checkbox"/>
H6-2	Total number of times any of your dwellings or any type of place of residence have been bombed (current and previous)	Number of times	<input type="checkbox"/> <input type="checkbox"/>

H7	Since Oct 2023, have all household members moved elsewhere for at least one night? [Only ask if H4 = 1]	1. Yes 2. No → skip to H10 3. Don't know / No answer → skip to H10	<input type="checkbox"/>
H8	How many times have all household members been displaced since Oct 2023?	Number of times	<input type="checkbox"/> <input type="checkbox"/>
H10	Since Oct 2023, has anyone not part of this household before the war come to live with you?	1. Yes 2. No → skip to HS1 3. Don't know / No answer → skip to HS1	<input type="checkbox"/>
H11	How many such persons have come to live with this household?	Number of persons	<input type="checkbox"/> <input type="checkbox"/>

Section 5: Medical Services

HS1	Since the Israeli aggression (October 2023), has anyone in this household suffered serious injuries?	1. Yes 2. No 3. Don't know / No answer	<input type="checkbox"/>
HS2	Since the Israeli aggression on Gaza (October 2023), have you or any household member needed medical care for any reason?	1. Yes 2. No → skip to next section 3. Don't know / No answer → skip to next section	<input type="checkbox"/>
HS3	For the most recent medical service needed by any household member (including yourself), what was the MAIN reason for needing that service?	1. Management of a chronic condition (e.g., diabetes, hypertension, kidney disease, cancer, etc.) 2. New episode of an infectious disease (e.g., diarrhea, respiratory infection, other communicable disease) 3. Maternity services 4. Child health and nutrition 5. Mental-health care / psychosocial support 6. Injury, trauma, or any other direct effect of violence 7. Other – specify _____ 8. Don't know 9. Refused to answer	<input type="checkbox"/>
HS4	Were you/ they able to access/ attain the most recent medical services needed?	1. Yes → skip to next section 2. No 3. Don't know / No answer → skip to next section	<input type="checkbox"/>

HS5	<p>What were the MAIN reasons you could not access the medical services?</p> <p>Do not read the list. Select up to three reasons.</p> <ol style="list-style-type: none"> 1. NO HEALTH-CARE STAFF AVAILABLE, OR NO FEMALE STAFF AVAILABLE 2. MEDICINES NOT AVAILABLE 3. COST TOO HIGH 4. REQUIRED FACILITY TOO BUSY / OVERCROWDED 5. REQUIRED FACILITY TOO FAR AWAY 6. LACK OF TRANSPORTATION 7. ROADS BLOCKED, DAMAGED, OR DESTROYED BY THE AGGRESSION 8. TRAVEL TO FACILITY NOT SAFE 9. FACILITY ITSELF NOT SAFE 10. FACILITY CLOSED 11. FACILITY DESTROYED OR DAMAGED BY THE AGGRESSION 12. OTHER – SPECIFY _____ 88. DON'T KNOW 99. REFUSED TO ANSWER 	First choice	<input type="checkbox"/> <input type="checkbox"/>
		First choice	<input type="checkbox"/> <input type="checkbox"/>
		First choice	<input type="checkbox"/> <input type="checkbox"/>

Section six: Assistance

C1	Before the Israeli aggression (Oct 2023), were you or any household member benefiting from any of the following social-protection programmes?		1 . Yes or 2 . No. If all C1 items = 2 (No) → skip to C3	<input type="checkbox"/>
	1. Food coupons	<input type="checkbox"/>	5. Aid from UNRWA	<input type="checkbox"/>
	2. Free medical treatment	<input type="checkbox"/>	6. Transfers from family/friends abroad	<input type="checkbox"/>
	3. Cash transfers from the government	<input type="checkbox"/>	7. Transfers from family/friends inside Palestine	<input type="checkbox"/>
	4. Allowances for martyrs/injured	<input type="checkbox"/>	8. Other (specify):	<input type="checkbox"/>
			9. External in-kind assistance (airdrop/truck)	<input type="checkbox"/>

C1_1	Since the start of the aggression, have the regular aids you used to receive before the war stopped?		1 . Yes 2 . No	<input type="checkbox"/>
C2	Regardless of whether previous aids stopped, have you received any new or additional assistance because of the aggression (Oct 2023)?		1 . Yes (If at least one C2 item = 1 (Yes) → go to C4 .) 2 . No (If all C2 items = 2 (No) → skip to FS1 (Food-Security section))	
	1. Food coupons	<input type="checkbox"/>	5. Aid from UNRWA	<input type="checkbox"/>
	2. Free medical treatment	<input type="checkbox"/>	6. Transfers from family/friends abroad	<input type="checkbox"/>
	3. Cash transfers from the government	<input type="checkbox"/>	7. Transfers from family/friends inside Palestine	<input type="checkbox"/>
	4. Allowances for martyrs/injured	<input type="checkbox"/>	8. Other (specify):	<input type="checkbox"/>
			9. External in-kind assistance (airdrop/truck)	<input type="checkbox"/>

C3	Since the beginning of the aggression (Oct 2023), have you received any of the following aids?		1 . Yes or 2 . No. If all C3 items = 2 (No) → skip to FS1	
	1. Food coupons	<input type="checkbox"/>	5. Aid from UNRWA	<input type="checkbox"/>
	2. Free medical treatment	<input type="checkbox"/>	6. Transfers from family/friends abroad	<input type="checkbox"/>
	3. Cash transfers from the government	<input type="checkbox"/>	7. Transfers from family/friends inside Palestine	<input type="checkbox"/>

	4. Allowances for martyrs/injured	<input type="checkbox"/>	8. Other (specify):	<input type="checkbox"/>
			9. External in-kind assistance (airdrop/truck)	<input type="checkbox"/>
C4	How important have the aids you (or your household) received since the aggression been? (Ask if at least one C1 item = 1 or one C3 item = 1.)		1 . Without this aid the household could not cover living needs 2 . Enabled the household to cope, but with great difficulty 3 . Provided regular supplementary income / support 4 . Helped alleviate hardship during difficult times 5 . Household could manage without it 6 . Aid has no importance at all	<input type="checkbox"/>

Section Seven: Food Security and Coping Strategies

FS1	During the past four weeks, how many times was there no food of any kind to eat in your dwelling because you lacked the resources to buy food? If 1 or 99 → end the interview	1. Never 2. Rarely (1–2 times) 3. Sometimes (3–10 times) 4. Often (more than 10 times) 98. Don't know 99. Refused to answer	<input type="checkbox"/>
FS2	During the past four weeks, when there was no food available, what was the household's main strategy to cope with the shortage?	1. Ate less-preferred foods 2. Reduced number of meals per day 3. Reduced and rationed meal portions 4. Restricted adults' consumption 5. Restricted women's consumption 6. Borrowed food or money to buy food 7. Skipped entire days without eating 8. Collected unfamiliar wild foods (e.g., leaves) 9. Sold more animals or personal belongings 10. Consumed stored seeds meant for planting 11. Sent family members to live elsewhere 12. Other – specify _____ 98. Don't know 99. Refused to answer	<input type="checkbox"/>

Interview Result

QC3	Interview result	1.Completed 2.Partially completed 3.Family refused to cooperate 4.Could not reach the family	<input type="checkbox"/>
QC4	Thank you very much for your time. The answers you provided are very important to us. With your consent, we would like to contact you again after 3 months for a follow-up survey.	Yes No → End the interview	<input type="checkbox"/>
QC5	If you agree, is there another phone number we can reach you through?	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
QC6	If the household is in a shelter (H4 ≠ 1): Is there another household sharing your room or tent?	1. Yes 2. No	
QC6_1	If yes, would that household agree to be interviewed in future rounds?	1. Yes 2. No	
QC7	Name of the head of the household	
QC8	Their phone number	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Interview Result

QC3	Interview result	1.Completed 2.Partially completed 3.Family refused to cooperate 4.Could not reach the family	<input type="checkbox"/>
------------	------------------	--	--------------------------

QC4	Thank you very much for your time. The answers you provided are very important to us. With your consent, we would like to contact you again after 3 months for a follow-up survey.	Yes No → End the interview	<input type="checkbox"/>
QC5	If you agree, is there another phone number we can reach you through?	□□□□□□□□□□	
QC6	Is there any households share with you your residence	1. Yes	2. No
QC6 1	If yes with that households agree to make interview in next rounds	1. Yes	2. No
QC6 2	The name		
QC6 3	The mobile		