

Post Distribution Monitoring July 2020

"MY NAME IS ---- [SAY YOUR NAME] ----- AND I AM WORKING WITH ----- [SAY ORGANISATION] -----, WE ARE CONDUCTING AN ASSESSMENT ON THE EFFECTIVENESS OF ASSISTANCE PROVIDED TO YOU. THIS INTERVIEW CANNOT BE CONSIDERED GUARANTEE FOR ANY DIRECT OR INDIRECT SUPPORT TO YOU OR YOUR COMMUNITY, BUT THE INFORMATION YOU PROVIDE WILL HELP US TO IMPROVE THE DELIVERY OF ASSISTANCE. WE WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE ASSISTANCE YOU RECEIVED. YOUR IDENTITY WILL BE KEPT STRICTLY CONFIDENTIAL AND PERSONAL INFORMATION WILL NOT BE SHOWN TO OTHERS UNLESS YOUR PRIOR APPROVAL IS OBTAINED. YOUR PARTICIPATION IS VOLUNTARY AND YOU CAN CHOSE NOT TO ANSWER THE QUESTIONS OR STOP THE INTERVIEW AT ANY TIME. REFUSAL TO PARTICIPATE OR ANSWER ANY OF THE QUESTIONS WILL NOT AFFECT YOUR ACCESS TO ASSISTANCE OR SERVICES."

*

☒ OK

MOBILE NUMBER OF THE RESPONDENT

*

ARE YOU WILLING TO TAKE PART IN THIS INTERVIEW?

*

☒ Yes

☐ No

A. INTERVIEWER

A1. SITE/CAMP NAME *

- ☐ Camp 1E
- ☐ Camp 1W
- ☐ Camp 2E
- ☐ Camp 2W
- ☐ Camp 3
- ☐ Camp 4
- ☐ Camp 4 Ext
- ☐ Camp 5
- ☐ Camp 6
- ☐ Camp 7
- ☐ Camp 17
- ☐ Camp 21
- ☐ Camp 26
- ☐ Camp 27
- ☐ Kutupalong RC
- ☐ Nayapara RC

A2. DATE OF INTERVIEW: *

yyyy-mm-dd

A3. INTERVIEWER ID: ***B. INTERVIEWEE**

B1. NAME OF THE INTERVIEWEE

B1.1. PLEASE PROVIDE FAMILY COUNTING NUMBER *B2. AGE *

B3. GENDER

*

- ☐ Male
- ☐ Female

B4. HEAD OF HOUSEHOLD

*

- ☐ Yes
- ☐ No

B5. MARITAL STATUS

*

- ☐ Single
- ☐ Married
- ☐ Widowed
- ☐ Divorced
- ☐ Separated

B6. IF ANY HOUSEHOLD MEMBER IS WITH SPECIFIC NEEDS?

*

- ☐ Yes
- ☐ No

B6.1 WHICH KIND OF SPECIFIC NEED?

*

- ☐ Disable
- ☐ Serious medical condition
- ☐ Chronic medical condition
- ☐ Others

B6.2 PLEASE SPECIFY, IF OTHERS

*

B7. HOW MANY FAMILY MEMBERS ARE THERE WITH SPECIFIC NEEDS?

*

C. ASSISTANCE DISTRIBUTION INFORMATION

C1. WHICH TYPES OF ASSISTANCE YOUR FAMILY HAD RECEIVED? *

- ☒ CRH
- ☒ LPG
- ☒ CRI
- ☒ WASH Hygiene Kit
- ☒ Female Hygiene Kit
- ☒ Shelter Kit

D. COMPRESSED RICE HUSK

D1. LAST DISTRIBUTION DATE/MONTH *

- ☐ 2 weeks ago
- ☐ 1 month ago
- ☐ 2 months ago
- ☐ 3 months ago
- ☐ More than 6 months ago

D2. NAME OF AGENCY DISTRIBUTED/CRH. *

- ☐ UNHCR
- ☐ Brac
- ☐ BDRCS
- ☐ DRC
- ☐ Caritas
- ☐ Other

D2.1 IF OTHER, SPECIFY -/CRH. *

D3. QUANTITY RECEIVED IN (BAG)/CRH. *

.....

D4. IS THE QUANTITY SUFFICIENT?/CRH. *

- ☐ Yes
- ☐ No

D4.1. WHY NOT SUFFICIENT?/CRH. *

.....

D5. QUALITY/CRH. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

D5.1. IF QUALITY BELOW AVERAGE, REASON/CRH. *D6. USEFULNESS/CRH. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

D6.1. IF BELOW AVERAGE, REASON/CRH. *D7. ACTUAL USE/CRH. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

D7.1 SELLING PRICE/UNIT (IN BDT)/CRH. *D7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRH. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

D7.1.2. IF OTHER PLEASE SPECIFY/CRH.

*

D7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRH.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

D7.2.1. IF OTHER, SPECIFY -/CRH.

*

D7.2.2. IF FOOD PLEASE SELECT/CRH. *

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

D7.2.3. IF OTHER, SPECIFY -/CRH. *

D7.3. IF ITEMS GIFTED OR EXCHANGED , PLEASE MENTION TO WHOM? AND REASON __/CRH. *

J. Distribution Methodology (CRH)

J1. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO BE PUT ON THE DISTRIBUTION LIST?/CRH. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J1.1 HOW MUCH (IN BDT)?/CRH. *

J1.2 NATURE OF EXCHANGE?/CRH. *

J1.3 TO WHOM?/CRH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J1.3.1 IF OTHER, SPECIFY -/CRH. *

J2. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO RECEIVE THE ITEM(S)?/CRH. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J2.1 HOW MUCH (IN BDT)?/CRH. *

J2.2 NATURE OF EXCHANGE?/CRH. *

J2.3 TO WHOM?/CRH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J2.3.1 IF OTHER, SPECIFY -/CRH. *

J3. DID YOU HAVE TO PAY (OR ASK A NON-FAMILY MEMBER AS A FAVOUR) TO COLLECT AND TRANSPORT THE ASSISTANCE TO/FROM THE DISTRIBUTION POINT?/CRH. *

- ☐ Yes
- ☐ No

J3.1 HOW MUCH (IN BDT)?/CRH. *

J3.2 WHY?/CRH. *

- ☐ Mobility Issues
- ☐ Distance
- ☐ Single headed households
- ☐ Too heavy
- ☐ Other

J3.2.1 PLEASE SPECIFY, OTHERS/CRH. *

J4. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE BEFORE THE DISTRIBUTION?/CRH. *

- ☐ Yes
- ☐ No

J4.1 BY WHOM?/CRH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J4.1.1 IF OTHER, PLEASE SPECIFY-/CRH. *

J5. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE DURING THE DISTRIBUTION?/CRH. *

- ☐ Yes
- ☐ No

J5.1 BY WHOM?/CRH.

*

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J5.1.1 IF OTHER, PLEASE SPECIFY-/CRH.

*

J6. WAS THE DISTRIBUTION FAR FROM YOUR HOME?/CRH.

*

- ☐ Yes
- ☐ No

J6.1 IF YES, HOW LONG DOES IT TAKE TO REACH?/CRH.

*

- ☐ 0-15 min
- ☐ 15-30 min
- ☐ 30-60 min
- ☐ 60+ Min

J7. HOW LONG YOU HAD TO WAIT IN THE DISTRIBUTION QUEUE FOR RECEIVING DISTRIBUTION/CRH.

*

- ☐ Less than an hour
- ☐ 1-2 hours
- ☐ 3-4 hours
- ☐ 5-6 hours
- ☐ 6 hour or more

J8. IF THE ASSISTANCE COULD BE STARTED AGAIN WOULD YOU PREFER:/CRH.

*

- ☐ Voucher
- ☐ In kind
- ☐ Combination (Voucher+ In kind)
- ☐ Other

J8.1 IF OTHER, PLEASE SPECIFY -/CRH.

*

J9. HOW SATISFIED ARE YOU WITH THE DISTRIBUTION PROCESS?/CRH. *

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Average
- ☐ Satisfied
- ☐ Very satisfied

J9.1 IF SATISFACTION IS BELOW AVERAGE, PLEASE TELL US HOW CAN WE IMPROVE THE DISTRIBUTION SYSTEM?/CRH. *

J10. ANY PROBLEM(S) DURING DISTRIBUTION?/CRH. *

- ☐ Yes
- ☐ No

J10.1 IF YES, DESCRIBE -/CRH. *

J10.2 HAVE YOU MADE A COMPLAINT?/CRH. *

- ☐ Yes
- ☐ No

J10.2.1 HOW DID YOU MADE COMPLAINT?/CRH. *

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J10.2.1.1 IF OTHER, PLEASE SPECIFY -/CRH. *

J10.2.2 HOW MANY TIMES?/CRH. *

J11. ANY PROBLEM(S) AFTER DISTRIBUTION?/CRH. *

☐ Yes

☐ No

J11.1 IF YES, DESCRIBE -/CRH. *

J11.2 HAVE YOU MADE A COMPLAINT?/CRH. *

☐ Yes

☐ No

J11.2.1 HOW DID YOU MADE COMPLAINT?/CRH. *

☐ Information point

☐ NGO staff

☐ UN staff

☐ Hotline

☐ Feedback letterbox

☐ Help desk at distribution point

☐ Other

J11.2.1.1 IF OTHER, PLEASE SPECIFY -/CRH. *

J11.2.2 HOW MANY TIMES?/CRH. *

J12. IF YES OF ANY, PLEASE TELL US HOW CAN WE IMPROVE THE COMPLAINT MECHANISM?/CRH. *

J13. DID YOU OR THE PERSON WHO WENT TO COLLECT MATERIALS FEEL SAFE AT THE VENUE OF THE DISTRIBUTION?/CRH. *

☐ Yes

☐ No

J13.1. WHAT MADE YOU FEEL UNSAFE?/CRH. *

J14. HOW WAS THE DISTRIBUTION STAFF BEHAVIOUR AT DISTRIBUTION POINT?/CRH. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ VeryBad

J14.1. WHY IT WAS BAD?/CRH. *

J15. DO YOU WANT TO TELL ANYTHING ABOUT DISTRIBUTION TO UNHCR?/CRH. *

E. LPG

E1. LAST DISTRIBUTION DATE/MONTH *

- ☐ 2 weeks ago
- ☐ 1 month ago
- ☐ 2 months ago
- ☐ 3 months ago
- ☐ More than 6 months ago

E2. NAME OF AGENCY DISTRIBUTED/LPG. *

- ☐ Total
- ☐ Omera

E3. QUANTITY RECEIVED IN # OF CYLINDER/LPG. *

E4. IN THE LAST THREE MONTHS, DID THE LPG FINISH BEFORE THE NEXT REFILL CYCLE?/LPG. *

- ☐ Yes
- ☐ No

E4.1. HOW MANY DAYS IN AVERAGE?/LPG. *

E5. WHEN WAS THE FIRST TIME YOU HAD TO REPAIR STOVE, HOSEPIPE AND REGULATOR AFTER YOU RECEIVED THEM?/LPG. *

- ☐ 1 month
- ☐ 3 month
- ☐ 6 month
- ☐ More than 6 month
- ☐ Never repaired

E5.1. WHEN DID YOU RECEIVE YOUR STOVE?/LPG.

- ☐ Less than six months ago
- ☐ More than six months ago
- ☐ More than one year ago
- ☐ Two years ago

E5.2. HOW MANY TIMES DID YOU HAVE TO REPAIR YOUR STOVE?/LPG.

- ☐ 0
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ More than 3

E5.3. WHO REPAIRED?/LPG.

- ☐ LPG vendor at the distribution point
- ☐ Yourself
- ☐ At a shop

E6. USEFULNESS/LPG. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

E6.1. IF QUALITY BELOW AVERAGE, REASON/LPG. *

E7. ACTUAL USE/LPG. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

E7.1 SELLING PRICE/UNIT (IN BDT)/LPG. *

E7.1.1. IF ITEM ITEMS SOLD OR EXCHANGED, REASON:/LPG. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

E7.1.2. IF OTHER PLEASE SPECIFY/LPG. *

E7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/LPG. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

E7.2.1. IF OTHER, SPECIFY -/LPG. *

E7.2.2. IF FOOD PLEASE SELECT/LPG. *

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

E7.2.3. IF OTHER, SPECIFY -/LPG.

*

E7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/LPG.

*

E8. HAVE YOU RECEIVED LPG TRAINING?LPG.

☐ Yes

☐ No

E9. HOW DID YOU LIKE THE TRAINING?LPG.

☐ Yes

☐ No

☐ Average

E10. HAVE YOU EVER BEEN RETURNED FROM THE DISTRIBUTION POINT WITHOUT LPG ASSISTANCE?LPG.

☐ Yes

☐ No

E10.1. WHY?LPG.

E11. HOW LONG DO YOU HAVE TO WAIT AT THE DISTRIBUTION POINT TO RECEIVE LPG ASSISTANCE.LPG.

☐ 30 minutes

☐ 1 hour

☐ 2 hours

☐ 2.5 hours

☐ 3 hours

☐ More than 3 hours

J. Distribution Methodology (LPG)

J1. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO BE PUT ON THE DISTRIBUTION LIST?/LPG. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J1.1 HOW MUCH (IN BDT)?/LPG. *

.....

J1.2 NATURE OF EXCHANGE?/LPG. *

.....

J1.3 TO WHOM?/LPG. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J1.3.1 IF OTHER, SPECIFY -/LPG. *

.....

J2. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO RECEIVE THE ITEM(S)?/LPG. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J2.1 HOW MUCH (IN BDT)?/LPG. *

.....

J2.2 NATURE OF EXCHANGE?/LPG. *

.....

J2.3 TO WHOM?/LPG. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J2.3.1 IF OTHER, SPECIFY -/LPG. *

.....

J3. DID YOU HAVE TO PAY (OR ASK A NON-FAMILY MEMBER AS A FAVOUR) TO COLLECT AND TRANSPORT THE ASSISTANCE TO/FROM THE DISTRIBUTION POINT?/LPG. *

- ☐ Yes
- ☐ No

J3.1 HOW MUCH (IN BDT)?/LPG. *

.....

J3.2 WHY?/LPG. *

- ☐ Mobility Issues
- ☐ Distance
- ☐ Single headed households
- ☐ Too heavy
- ☐ Other

J3.2.1 PLEASE SPECIFY, OTHERS/LPG. *

.....

J4. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE BEFORE THE DISTRIBUTION?/LPG. *

- ☐ Yes
- ☐ No

J4.1 BY WHOM?/LPG. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J4.1.1 IF OTHER, PLEASE SPECIFY-/LPG. *

J5. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE DURING THE DISTRIBUTION?/LPG. *

- ☐ Yes
- ☐ No

J5.1 BY WHOM?/LPG. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J5.1.1 IF OTHER, PLEASE SPECIFY-/LPG. *

J6. WAS THE DISTRIBUTION FAR FROM YOUR HOME?/LPG. *

- ☐ Yes
- ☐ No

J6.1 IF YES, HOW LONG DOES IT TAKE TO REACH?/LPG. *

- ☐ 0-15 min
- ☐ 15-30 min
- ☐ 30-60 min
- ☐ 60+ Min

J7. HOW LONG YOU HAD TO WAIT IN THE DISTRIBUTION QUEUE FOR RECEIVING DISTRIBUTION/LPG. *

- ☐ Less than an hour
- ☐ 1-2 hours
- ☐ 3-4 hours
- ☐ 5-6 hours
- ☐ 6 hour or more

J8. IF THE ASSISTANCE COULD BE STARTED AGAIN WOULD YOU PREFER:/LPG. *

- ☐ Voucher
- ☐ In kind
- ☐ Combination (Voucher+ In kind)
- ☐ Other

J8.1 IF OTHER, PLEASE SPECIFY -/LPG. *

J9. HOW SATISFIED ARE YOU WITH THE DISTRIBUTION PROCESS?/LPG. *

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Average
- ☐ Satisfied
- ☐ Very satisfied

J9.1 IF SATISFACTION IS BELOW AVERAGE, PLEASE TELL US HOW CAN WE IMPROVE THE DISTRIBUTION SYSTEM?/LPG. *

J10. ANY PROBLEM(S) DURING DISTRIBUTION?/LPG. *

- ☐ Yes
- ☐ No

J10.1 IF YES, DESCRIBE -/LPG. *

J10.2 HAVE YOU MADE A COMPLAINT?/LPG. *

- ☐ Yes
- ☐ No

J10.2.1 HOW DID YOU MADE COMPLAINT?/LPG. *

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J10.2.1.1 IF OTHER, PLEASE SPECIFY -/LPG. *

J10.2.2 HOW MANY TIMES?/LPG. *

J11. ANY PROBLEM(S) AFTER DISTRIBUTION?/LPG. *

- ☐ Yes
- ☐ No

J11.1 IF YES, DESCRIBE -/LPG. *

J11.2 HAVE YOU MADE A COMPLAINT?/LPG. *

- ☐ Yes
- ☐ No

J11.2.1 HOW DID YOU MADE COMPLAINT?/LPG. *

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J11.2.1.1 IF OTHER, PLEASE SPECIFY -/LPG. *

J11.2.2 HOW MANY TIMES?/LPG.

*

J12. IF YES OF ANY, PLEASE TELL US HOW CAN WE IMPROVE THE COMPLAINT MECHANISM?/LPG.

*

J13. DID YOU OR THE PERSON WHO WENT TO COLLECT MATERIALS FEEL SAFE AT THE VENUE OF THE DISTRIBUTION?/LPG.

*

☐ Yes

☐ No

J13.1. WHAT MADE YOU FEEL UNSAFE?/LPG.

*

J14. HOW WAS THE DISTRIBUTION STAFF BEHAVIOUR AT DISTRIBUTION POINT?/LPG.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ VeryBad

J14.1. WHY IT WAS BAD?/LPG.

*

J15. DO YOU WANT TO TELL ANYTHING ABOUT DISTRIBUTION TO UNHCR?/LPG.

*

F. Core Relief item (CRI) KIT/CRI.

F1. LAST DISTRIBUTION DATE/MONTH/CRI. *

- ☐ 2 weeks ago
- ☐ 1 month ago
- ☐ 2 months ago
- ☐ 3 months ago
- ☐ More than 6 months ago

F2. NAME OF AGENCY DISTRIBUTED/CRI. *

- ☐ UNHCR
- ☐ Brac
- ☐ BDRCS
- ☐ DRC
- ☐ Caritas
- ☐ Other

F2.1 IF OTHER, SPECIFY -/CRI. *

F2.3 SELECT THE /CRI ITEMS YOU HAVE RECEIVED-/CRI. *

- ☐ Jerry can (10l/ 1 PC)
- ☐ Kitchen Set(1 pc)
- ☐ Solar Lamp (1 pc)
- ☐ Blanket (5 pcs)
- ☐ Plastic sheets (4*5m / 1 pc)
- ☐ Bucket (15l / 1 pc)
- ☐ Sleeping Mat (5 pcs)

» Jerry Can

F3. QUANTITY RECEIVED/CRIJERRY. *

F4. IS THE QUANTITY SUFFICIENT?/CRIJERRY. *

- ☐ Yes
- ☐ No

F4.1. WHY NOT SUFFICIENT?/CRIJERRY. *

F5. QUALITY/CRIJERRY. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRIJERRY. *

F6. USEFULNESS/CRIJERRY. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

F6.1. IF QUALITY BELOW AVERAGE, REASON/CRIJERRY. *

F7. ACTUAL USE/CRIJERRY. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRIJERRY. *

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRIJERRY. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRIJERRY. *

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRIJERRY.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

F7.2.1. IF OTHER, SPECIFY -/CRIJERRY.

*

F7.2.2. IF FOOD PLEASE SELECT/CRIJERRY.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

F7.2.3. IF OTHER, SPECIFY -/CRIJERRY.

F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON _/CRIJERRY.

» Kitchen Set/CRIKitchen.

F3. QUANTITY RECEIVED/CRIKITCHEN.

F4. IS THE QUANTITY SUFFICIENT?/CRIKITCHEN.

☐ Yes

☐ No

F4.1. WHY NOT SUFFICIENT?/CRIKITCHEN.

F5. QUALITY/CRIKITCHEN.

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRIKITCHEN.

F6. USEFULNESS/CRIKITCHEN.

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

F6.1. IF QUALITY BELOW AVERAGE, REASON/CRIKITCHEN.

F7. ACTUAL USE/CRIKITCHEN.

☐ Used

- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRIKITCHEN.

*

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRIKITCHEN.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRIKITCHEN.

*

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRIKITCHEN.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs

☐ Other

F7.2.1. IF OTHER, SPECIFY -/CRIKITCHEN.

*

F7.2.2. IF FOOD PLEASE SELECT/CRIKITCHEN.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

F7.2.3. IF OTHER, SPECIFY -/CRIKITCHEN.

*

F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON _/CRIKITCHEN.

*

» SOLAR LAMP/CRISolar.

F3. QUANTITY RECEIVED/CRISOLAR.

*

F4. IS THE QUANTITY SUFFICIENT?/CRISOLAR.

*

- ☐ Yes
- ☐ No

F4.1. WHY NOT SUFFICIENT?/CRISOLAR.

*

F5. QUALITY/CRISOLAR.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRISOLAR.

*

F6. USEFULNESS/CRISOLAR.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

F6.1. IF BELOW AVERAGE, REASON/CRISOLAR.

*

F7. ACTUAL USE/CRISOLAR.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRISOLAR.

*

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRISOLAR.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRISOLAR.

*

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRISOLAR.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical

- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

F7.2.1. IF OTHER, SPECIFY -/CRISOLAR.

*

F7.2.2. IF FOOD PLEASE SELECT/CRISOLAR.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

F7.2.3. IF OTHER, SPECIFY -/CRISOLAR.

*

F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/CRISOLAR.

*

» **BLANKET/CRIB**Blanket.

F3. QUANTITY RECEIVED/CRIBLANKET.

*

F4. IS THE QUANTITY SUFFICIENT?/CRIBLANKET.

*

☐ Yes

☐ No

F4.1. WHY NOT SUFFICIENT?/CRIBLANKET.

*

F5. QUALITY/CRIBLANKET.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRIBLANKET.

*

F6. USEFULNESS/CRIBLANKET.

*

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

F6.1. IF BELOW AVERAGE, REASON/CRIBLANKET.

*

F7. ACTUAL USE/CRIBLANKET.

*

☐ Used

☐ Kept/Stored

☐ Sold

☐ Stolen

☐ Exchanged

☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRIBLANKET.

*

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRIBLANKET. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRIBLANKET. *

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRIBLANKET. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

F7.2.1. IF OTHER, SPECIFY -/CRIBLANKET. *

F7.2.2. IF FOOD PLEASE SELECT/CRIBLANKET. *

- ☐ Cereals

- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

F7.2.3. IF OTHER, SPECIFY -/CRIBLANKET.

*

F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON _/CRIBLANKET.

*

» PLASTIC SHEETS

F3. QUANTITY RECEIVED/CRIPLASTIC.

*

F4. IS THE QUANTITY SUFFICIENT?/CRIPLASTIC.

*

- ☐ Yes
- ☐ No

F4.1. WHY NOT SUFFICIENT?/CRIPLASTIC.

*

F5. QUALITY/CRIPLASTIC.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRIPLASTIC.

*

F6. USEFULNESS/CRIPLASTIC.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average

- ☐ Not useful
☐ Not useful at all

F6.1. IF BELOW AVERAGE, REASON/CRIPLASTIC.

*

F7. ACTUAL USE/CRIPLASTIC.

*

- ☐ Used
☐ Kept/Stored
☐ Sold
☐ Stolen
☐ Exchanged
☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRIPLASTIC.

*

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRIPLASTIC.

*

- ☐ I need the item provided but had another urgent need
☐ I didn't need the item what provided
☐ Other (specify)
☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRIPLASTIC.

*

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRIPLASTIC.

*

- ☐ Money
☐ Food
☐ Water
☐ Medical
☐ Rent
☐ Education
☐ Shelter Kit
☐ Clothes
☐ Ghousehold Items
☐ Seeds/Tools

- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

F7.2.1. IF OTHER, SPECIFY -/CRIPLASTIC.

*

F7.2.2. IF FOOD PLEASE SELECT/CRIPLASTIC.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

F7.2.3. IF OTHER, SPECIFY -/CRIPLASTIC.

*

F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/CRIPLASTIC.

*

» BUCKET

F3. QUANTITY RECEIVED/CRIBUCKET.

*

F4. IS THE QUANTITY SUFFICIENT?/CRIBUCKET.

*

- ☐ Yes
- ☐ No

F4.1. WHY NOT SUFFICIENT?/CRIBUCKET.

*

F5. QUALITY/CRIBUCKET. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRIBUCKET. *

F6. USEFULNESS/CRIBUCKET. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

F6.1. IF BELOW AVERAGE, REASON/CRIBUCKET. *

F7. ACTUAL USE/CRIBUCKET. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRIBUCKET. *

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRIBUCKET. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRIBUCKET.

*

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRIBUCKET.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

F7.2.1. IF OTHER, SPECIFY -/CRIBUCKET.

*

F7.2.2. IF FOOD PLEASE SELECT/CRIBUCKET.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

F7.2.3. IF OTHER, SPECIFY -/CRIBUCKET.

*

F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON _/CRIBUCKET.

*

» SLEEPING MAT/CRIMat.

F3. QUANTITY RECEIVED/CRIMAT.

*

F4. IS THE QUANTITY SUFFICIENT?/CRIMAT.

*

☐ Yes

☐ No

F4.1. WHY NOT SUFFICIENT?/CRIMAT.

*

F5. QUALITY/CRIMAT.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

F5.1. IF QUALITY BELOW AVERAGE, REASON/CRIMAT.

*

F6. USEFULNESS/CRIMAT.

*

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

F6.1. IF BELOW AVERAGE, REASON/CRIMAT.

*

F7. ACTUAL USE/CRIMAT.

*

- ☐ Used
☐ Kept/Stored
☐ Sold
☐ Stolen
☐ Exchanged
☐ Gifted

F7.1 SELLING PRICE/UNIT (IN BDT)/CRIMAT.

*

F7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/CRIMAT.

*

- ☐ I need the item provided but had another urgent need
☐ I didn't need the item what provided
☐ Other (specify)
☐ Don't wish to answer

F7.1.2. IF OTHER PLEASE SPECIFY/CRIMAT.

*

F7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/CRIMAT.

*

- ☐ Money
☐ Food
☐ Water
☐ Medical
☐ Rent
☐ Education
☐ Shelter Kit
☐ Clothes
☐ Ghousehold Items
☐ Seeds/Tools
☐ Trade Items
☐ Fuel
☐ Marriage/Birth/Funeral
☐ Travel
☐ Bribes
☐ Debt
☐ Payment to receive other assistances / services

<input type="checkbox"/> <input type="checkbox"/> Hiring / paying someone to support family members with specific needs <input type="checkbox"/> Other	
F7.2.1. IF OTHER, SPECIFY -/CRIMAT.	*
.....	
F7.2.2. IF FOOD PLEASE SELECT/CRIMAT. <input type="checkbox"/> Cereals <input type="checkbox"/> Meat <input type="checkbox"/> Milk <input type="checkbox"/> Legumes <input type="checkbox"/> Oil <input type="checkbox"/> Vegetables <input type="checkbox"/> Fruits <input type="checkbox"/> Other	*
F7.2.3. IF OTHER, SPECIFY -/CRIMAT.	*
.....	
F7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/CRIMAT.	*
.....	

J. Distribution Methodology (/CRI)

J1. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO BE PUT ON THE DISTRIBUTION LIST?/CRI. <input type="radio"/> Yes (Pay) <input type="radio"/> No <input type="radio"/> Yes (Favour)	*
J1.1 HOW MUCH (IN BDT)?/CRI.	*
.....	
J1.2 NATURE OF EXCHANGE?/CRI.	*
.....	

J1.3 TO WHOM?/CRI. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J1.3.1 IF OTHER, SPECIFY -/CRI. *

J2. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO RECEIVE THE ITEM(S)?/CRI. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J2.1 HOW MUCH (IN BDT)?/CRI. *

J2.2 NATURE OF EXCHANGE?/CRI. *

J2.3 TO WHOM?/CRI. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J2.3.1 IF OTHER, SPECIFY -/CRI. *

J3. DID YOU HAVE TO PAY (OR ASK A NON-FAMILY MEMBER AS A FAVOUR) TO COLLECT AND TRANSPORT THE ASSISTANCE TO/FROM THE DISTRIBUTION POINT?/CRI. *

- ☐ Yes
- ☐ No

J3.1 HOW MUCH (IN BDT)?/CRI. *

J3.2 WHY?/CRI. *

- ☐ Mobility Issues
- ☐ Distance
- ☐ Single headed households
- ☐ Too heavy
- ☐ Other

J3.2.1 PLEASE SPECIFY, OTHERS/CRI. *

J4. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE BEFORE THE DISTRIBUTION?/CRI. *

- ☐ Yes
- ☐ No

J4.1 BY WHOM?/CRI. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J4.1.1 IF OTHER, PLEASE SPECIFY-/CRI. *

J5. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE DURING THE DISTRIBUTION?/CRI. *

- ☐ Yes
- ☐ No

J5.1 BY WHOM?/CRI. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J5.1.1 IF OTHER, PLEASE SPECIFY-/CRI. *

J6. WAS THE DISTRIBUTION FAR FROM YOUR HOME?/CRI. *

- ☐ Yes
- ☐ No

J6.1 IF YES, HOW LONG DOES IT TAKE TO REACH?/CRI. *

- ☐ 0-15 min
- ☐ 15-30 min
- ☐ 30-60 min
- ☐ 60+ Min

J7. HOW LONG YOU HAD TO WAIT IN THE DISTRIBUTION QUEUE FOR RECEIVING DISTRIBUTION-/CRI. *

- ☐ Less than an hour
- ☐ 1-2 hours
- ☐ 3-4 hours
- ☐ 5-6 hours
- ☐ 6 hour or more

J8. IF THE ASSISTANCE COULD BE STARTED AGAIN WOULD YOU PREFER-/CRI. *

- ☐ Voucher
- ☐ In kind
- ☐ Combination (Voucher+ In kind)
- ☐ Other

J8.1 IF OTHER, PLEASE SPECIFY -/CRI. *

J9. HOW SATISFIED ARE YOU WITH THE DISTRIBUTION PROCESS?/CRI. *

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Average
- ☐ Satisfied
- ☐ Very satisfied

J9.1 IF SATISFACTION IS BELOW AVERAGE, PLEASE TELL US HOW CAN WE IMPROVE THE DISTRIBUTION SYSTEM?/CRI. *

J10. ANY PROBLEM(S) DURING DISTRIBUTION?/CRI. *

- ☐ Yes
- ☐ No

J10.1 IF YES, DES/CRIBE -/CRI. *

J10.2 HAVE YOU MADE A COMPLAINT?/CRI. *

- ☐ Yes
- ☐ No

J10.2.1 HOW DID YOU MADE COMPLAINT?/CRI. *

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J10.2.1.1 IF OTHER, PLEASE SPECIFY -/CRI. *

J10.2.2 HOW MANY TIMES?/CRI. *

J11. ANY PROBLEM(S) AFTER DISTRIBUTION?/CRI. *

☐ Yes

☐ No

J11.1 IF YES, DES/CRIBE -/CRI. *

J11.2 HAVE YOU MADE A COMPLAINT?/CRI. *

☐ Yes

☐ No

J11.2.1 HOW DID YOU MADE COMPLAINT?/CRI. *

☐ Information point

☐ NGO staff

☐ UN staff

☐ Hotline

☐ Feedback letterbox

☐ Help desk at distribution point

☐ Other

J11.2.1.1 IF OTHER, PLEASE SPECIFY -/CRI. *

J11.2.2 HOW MANY TIMES?/CRI. *

J12. IF YES OF ANY, PLEASE TELL US HOW CAN WE IMPROVE THE COMPLAINT MECHANISM?/CRI. *

J13. DID YOU OR THE PERSON WHO WENT TO COLLECT MATERIALS FEEL SAFE AT THE VENUE OF THE DISTRIBUTION?/CRI. *

☐ Yes

☐ No

J13.1. WHAT MADE YOU FEEL UNSAFE?/CRI. *

J14. HOW WAS THE DISTRIBUTION STAFF BEHAVIOUR AT DISTRIBUTION POINT?/CRI. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ VeryBad

J14.1. WHY IT WAS BAD?/CRI. *

.....

J15. WHICH ITEM DO YOU PREFER MOST?/CRI. *

- ☐ Jerry can (10l/ 1 pc)
- ☐ Kitchen Set(1 pc)
- ☐ Solar Lamp (1 pc)
- ☐ Blanket (5 pcs)
- ☐ Plastic sheets (4*5m / 1 pc)
- ☐ Bucket (15l / 1 pc)
- ☐ Sleeping Mat (5 pcs)

J15.1. WHY DO YOU PREFER THIS?/CRI. *

.....

J16. IS THERE ANY ITEM WHAT YOU WANT TO BE ADDED IN THE /CRI KIT?/CRI. *

- ☐ Yes
- ☐ No

J16.1. WHAT IS THAT?/CRI. *

.....

J17. DO YOU WANT TO TELL ANYTHING ABOUT DISTRIBUTION TO UNHCR?/CRI. *

.....

G. /WASH HYGIENE KIT

G1. LAST DISTRIBUTION DATE/MONTH/WASH. *

- ☐ 2 weeks ago
- ☐ 1 month ago
- ☐ 2 months ago
- ☐ 3 months ago
- ☐ More than 6 months ago

G2. NAME OF AGENCY DISTRIBUTED/WASH. *

- ☐ UNHCR
- ☐ Brac
- ☐ BDRCS
- ☐ DRC
- ☐ Caritas
- ☐ Other

G2.1 IF OTHER, SPECIFY -/WASH. *

G2.2 SELECT THE /WASH HYGIENE KIT ITEMS YOU RECEIVED/WASH. *

- ☐ Jerry Can (10l/4pcs)
- ☐ Potty for children (1 pc)
- ☐ Disposable nappies (1 pkt)
- ☐ Bathing soap (5 pcs)
- ☐ Laundry soap (10 pcs)
- ☐ Non disposable sanitary cloth (6 pcs)
- ☐ Gamcha local towel (2 pcs)
- ☐ Bucket (15l / 1 pc)
- ☐ Aqua Tab

» Jerry Can

G3. QUANTITY RECEIVED/WASHJERRY. *

G4. IS THE QUANTITY SUFFICIENT?/WASHJERRY. *

- ☐ Yes
- ☐ No

G4.1. WHY NOT SUFFICIENT?/WASHJERRY.

*

G5. QUALITY/WASHJERRY.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHJERRY.

*

G6. USEFULNESS/WASHJERRY.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

G6.1. IF USEFULNESS BELOW AVERAGE, REASON/WASHJERRY.

*

G7. ACTUAL USE/WASHJERRY.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHJERRY.

*

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHJERRY.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)

☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHJERRY.

*

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHJERRY.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHJERRY.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHJERRY.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits

☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHJERRY.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHJERRY.

*

» Potty for children

G3. QUANTITY RECEIVED/WASHPOTTY.

*

G4. IS THE QUANTITY SUFFICIENT?/WASHPOTTY.

*

☐ Yes

☐ No

G4.1. WHY NOT SUFFICIENT?/WASHPOTTY.

*

G5. QUALITY/WASHPOTTY.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHPOTTY.

*

G6. USEFULNESS/WASHPOTTY.

*

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

G6.1. IF BELOW AVERAGE, REASON/WASHPOTTY.

*

G7. ACTUAL USE/WASHPOTTY. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHPOTTY. *

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHPOTTY. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHPOTTY. *

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHPOTTY. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt

- ☐
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHPOTTY.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHPOTTY.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHPOTTY.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHPOTTY.

*

» Disposable nappies

G3. QUANTITY RECEIVED/WASHDISPO.

*

G4. IS THE QUANTITY SUFFICIENT?/WASHDISPO.

*

- ☐ Yes
- ☐ No

G4.1. WHY NOT SUFFICIENT?/WASHDISPO.

*

G5. QUALITY/WASHDISPO.

*

- ☐ Very Good
- ☐ Good
- ☐ Average

- ☐ Bad
- ☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHDISPO. *

G6. USEFULNESS/WASHDISPO. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

G6.1. IF QUALITY BELOW AVERAGE, REASON/WASHDISPO. *

G7. ACTUAL USE/WASHDISPO. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHDISPO. *

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHDISPO. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHDISPO. *

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHDISPO. *

- ☐ Money
- ☐ Food

- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHDISPO.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHDISPO.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHDISPO.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHDISPO.

*

» Bathing Soap

G3. QUANTITY RECEIVED/WASHB.SOAP.

*

G4. IS THE QUANTITY SUFFICIENT?/WASHB.SOAP.

*

☐ Yes☐ No

G4.1. WHY NOT SUFFICIENT?/WASHB.SOAP.

*

G5. QUALITY/WASHB.SOAP.

*

☐ Very Good☐ Good☐ Average☐ Bad☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHB.SOAP.

*

G6. USEFULNESS/WASHB.SOAP.

*

☐ Very useful☐ Useful☐ Average☐ Not useful☐ Not useful at all

G6.1. IF BELOW AVERAGE, REASON/WASHB.SOAP.

*

G7. ACTUAL USE/WASHB.SOAP.

*

☐ Used☐ Kept/Stored☐ Sold☐ Stolen☐ Exchanged☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHB.SOAP. *

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHB.SOAP. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHB.SOAP. *

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHB.SOAP. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHB.SOAP. *

G7.2.2. IF FOOD PLEASE SELECT/WASHB.SOAP.

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHB.SOAP.

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHB.SOAP.

» Laundry Soap

G3. QUANTITY RECEIVED/WASHL.SOAP.

G4. IS THE QUANTITY SUFFICIENT?/WASHL.SOAP.

- ☐ Yes
- ☐ No

G4.1. WHY NOT SUFFICIENT?/WASHL.SOAP.

G5. QUALITY/WASHL.SOAP.

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHL.SOAP.

G6. USEFULNESS/WASHL.SOAP.

- ☐ Very useful

- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

G6.1. IF BELOW AVERAGE, REASON/WASHL.SOAP.

*

G7. ACTUAL USE/WASHL.SOAP.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHL.SOAP.

*

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHL.SOAP.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHL.SOAP.

*

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHL.SOAP.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes

- ☐ Household Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHL.SOAP.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHL.SOAP.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHL.SOAP.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHL.SOAP.

*

» Non Disposable Sanitary Cloth

G3. QUANTITY RECEIVED/WASHNONDISPO.

*

G4. IS THE QUANTITY SUFFICIENT?/WASHNONDISPO.

*

- ☐ Yes

<input type="radio"/> No	
G4.1. WHY NOT SUFFICIENT?/WASHNONDISPO.	*
<hr/>	
G5. QUALITY/WASHNONDISPO.	*
<input type="radio"/> Very Good <input type="radio"/> Good <input type="radio"/> Average <input type="radio"/> Bad <input type="radio"/> Very Bad	
G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHNONDISPO.	*
<hr/>	
G6. USEFULNESS/WASHNONDISPO.	*
<input type="radio"/> Very useful <input type="radio"/> Useful <input type="radio"/> Average <input type="radio"/> Not useful <input type="radio"/> Not useful at all	
G6.1. IF BELOW AVERAGE, REASON/WASHNONDISPO.	*
<hr/>	
G7. ACTUAL USE/WASHNONDISPO.	*
<input type="radio"/> Used <input type="radio"/> Kept/Stored <input type="radio"/> Sold <input type="radio"/> Stolen <input type="radio"/> Exchanged <input type="radio"/> Gifted	
G7.1 SELLING PRICE/UNIT (IN BDT)/WASHNONDISPO.	*
<hr/>	
G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHNONDISPO.	*
<input type="radio"/> I need the item provided but had another urgent need <input type="radio"/> I didn't need the item what provided	

- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHNONDISPO.

*

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHNONDISPO.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHNONDISPO.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHNONDISPO.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables

- ☐
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHNONDISPO.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHNONDISPO.

*

» Gamcha (Local towel)

G3. QUANTITY RECEIVED/WASHGAMCHA.

*

G4. IS THE QUANTITY SUFFICIENT?/WASHGAMCHA.

*

- ☐ Yes
- ☐ No

G4.1. WHY NOT SUFFICIENT?/WASHGAMCHA.

*

G5. QUALITY/WASHGAMCHA.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHGAMCHA.

*

G6. USEFULNESS/WASHGAMCHA.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

G6.1. IF QUALITY BELOW AVERAGE, REASON/WASHGAMCHA.

*

G7. ACTUAL USE/WASHGAMCHA.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHGAMCHA.

*

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHGAMCHA.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHGAMCHA.

*

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHGAMCHA.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes

- ☐
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHGAMCHA.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHGAMCHA.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHGAMCHA.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHGAMCHA.

*

» Bucket

G3. QUANTITY RECEIVED/WASHBUCKET.

*

G4. IS THE QUANTITY SUFFICIENT?/WASHBUCKET.

*

- ☐ Yes
- ☐ No

G4.1. WHY NOT SUFFICIENT?/WASHBUCKET.

*

G5. QUALITY/WASHBUCKET.

*

- ☐ Very Good
- ☐ Good

- ☐ Average
- ☐ Bad
- ☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHBUCKET.

*

G6. USEFULNESS/WASHBUCKET.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

G6.1. IF BELOW AVERAGE, REASON/WASHBUCKET.

*

G7. ACTUAL USE/WASHBUCKET.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHBUCKET.

*

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHBUCKET.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHBUCKET.

*

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHBUCKET.

*

- ☐ Money

- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHBUCKET.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHBUCKET.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHBUCKET.

*

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHBUCKET.

*

» Aqua tab

G3. QUANTITY RECEIVED/WASHAQUA. *

G4. IS THE QUANTITY SUFFICIENT?/WASHAQUA. *

- ☐ Yes
- ☐ No

G4.1. WHY NOT SUFFICIENT?/WASHAQUA. *

G5. QUALITY/WASHAQUA. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

G5.1. IF QUALITY BELOW AVERAGE, REASON/WASHAQUA. *

G6. USEFULNESS/WASHAQUA. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

G6.1. IF BELOW AVERAGE, REASON/WASHAQUA. *

G7. ACTUAL USE/WASHAQUA. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged

☐ Gifted

G7.1 SELLING PRICE/UNIT (IN BDT)/WASHAQUA.

*

G7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/WASHAQUA.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

G7.1.2. IF OTHER PLEASE SPECIFY/WASHAQUA.

*

G7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/WASHAQUA.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

G7.2.1. IF OTHER, SPECIFY -/WASHAQUA.

*

G7.2.2. IF FOOD PLEASE SELECT/WASHAQUA. *

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

G7.2.3. IF OTHER, SPECIFY -/WASHAQUA. *

G7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/WASHAQUA. *

J. Distribution Methodology (/WASH Hygiene)

J1. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO BE PUT ON THE DISTRIBUTION LIST?/WASH. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J1.1 HOW MUCH (IN BDT)?/WASH. *

J1.2 NATURE OF EXCHANGE?/WASH. *

J1.3 TO WHOM?/WASH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J1.3.1 IF OTHER, SPECIFY -/WASH. *

J2. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO RECEIVE THE ITEM(S)?/WASH. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J2.1 HOW MUCH (IN BDT)?/WASH. *

J2.2 NATURE OF EXCHANGE?/WASH. *

J2.3 TO WHOM?/WASH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J2.3.1 IF OTHER, SPECIFY -/WASH. *

J3. DID YOU HAVE TO PAY (OR ASK A NON-FAMILY MEMBER AS A FAVOUR) TO COLLECT AND TRANSPORT THE ASSISTANCE TO/FROM THE DISTRIBUTION POINT?/WASH. *

- ☐ Yes
- ☐ No

J3.1 HOW MUCH (IN BDT)?/WASH. *

J3.2 WHY?/WASH. *

- ☐ Mobility Issues
- ☐ Distance
- ☐ Single headed households
- ☐ Too heavy
- ☐ Other

J3.2.1 PLEASE SPECIFY, OTHERS/WASH. *

J4. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE BEFORE THE DISTRIBUTION?/WASH. *

- ☐ Yes
- ☐ No

J4.1 BY WHOM?/WASH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J4.1.1 IF OTHER, PLEASE SPECIFY-/WASH. *

J5. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE DURING THE DISTRIBUTION?/WASH. *

- ☐ Yes
- ☐ No

J5.1 BY WHOM?/WASH. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J5.1.1 IF OTHER, PLEASE SPECIFY-/WASH. *

J6. WAS THE DISTRIBUTION FAR FROM YOUR HOME?/WASH. *

- ☐ Yes
- ☐ No

J6.1 IF YES, HOW LONG DOES IT TAKE TO REACH?/WASH. *

- ☐ 0-15 min
- ☐ 15-30 min
- ☐ 30-60 min
- ☐ 60+ Min

J7. HOW LONG YOU HAD TO WAIT IN THE DISTRIBUTION QUEUE FOR RECEIVING DISTRIBUTION/WASH. *

- ☐ Less than an hour
- ☐ 1-2 hours
- ☐ 3-4 hours
- ☐ 5-6 hours
- ☐ 6 hour or more

J8. IF THE ASSISTANCE COULD BE STARTED AGAIN WOULD YOU PREFER:/WASH. *

- ☐ Voucher
- ☐ In kind
- ☐ Combination (Voucher+ In kind)
- ☐ Other

J8.1 IF OTHER, PLEASE SPECIFY -/WASH. *

J9. HOW SATISFIED ARE YOU WITH THE DISTRIBUTION PROCESS?/WASH. *

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Average
- ☐ Satisfied
- ☐ Very satisfied

J9.1 IF SATISFACTION IS BELOW AVERAGE, PLEASE TELL US HOW CAN WE IMPROVE THE DISTRIBUTION SYSTEM?/WASH. *

.....

J10. ANY PROBLEM(S) DURING DISTRIBUTION?/WASH. *

- ☐ Yes
- ☐ No

J10.1 IF YES, DESCRIBE -/WASH. *

.....

J10.2 HAVE YOU MADE A COMPLAINT?/WASH. *

- ☐ Yes
- ☐ No

J10.2.1 HOW DID YOU MADE COMPLAINT?/WASH. *

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J10.2.1.1 IF OTHER, PLEASE SPECIFY -/WASH. *

.....

J10.2.2 HOW MANY TIMES?/WASH. *

.....

J11. ANY PROBLEM(S) AFTER DISTRIBUTION?/WASH. *

☐ Yes

☐ No

J11.1 IF YES, DESCRIBE -/WASH. *

J11.2 HAVE YOU MADE A COMPLAINT?/WASH. *

☐ Yes

☐ No

J11.2.1 HOW DID YOU MADE COMPLAINT?/WASH. *

☐ Information point

☐ NGO staff

☐ UN staff

☐ Hotline

☐ Feedback letterbox

☐ Help desk at distribution point

☐ Other

J11.2.1.1 IF OTHER, PLEASE SPECIFY -/WASH. *

J11.2.2 HOW MANY TIMES?/WASH. *

J12. IF YES OF ANY, PLEASE TELL US HOW CAN WE IMPROVE THE COMPLAINT MECHANISM?/WASH. *

J13. DID YOU OR THE PERSON WHO WENT TO COLLECT MATERIALS FEEL SAFE AT THE VENUE OF THE DISTRIBUTION?/WASH. *

☐ Yes

☐ No

J13.1. WHAT MADE YOU FEEL UNSAFE?/WASH. *

J14. HOW WAS THE DISTRIBUTION STAFF BEHAVIOUR AT DISTRIBUTION POINT?/WASH. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ VeryBad

J14.1. WHY IT WAS BAD?/WASH. *

J15. WHICH ITEM DO YOU PREFER MOST?/WASH. *

- ☐ Jerry Can (10l/4pcs)
- ☐ Potty for children (1 pc)
- ☐ Disposable nappies (1 pkt)
- ☐ Bathing soap (5 pcs)
- ☐ Laundry soap (10 pcs)
- ☐ Non disposable sanitary cloth (6 pcs)
- ☐ Gamcha local towel (2 pcs)
- ☐ Bucket (15l / 1 pc)
- ☐ Aqua Tab

J15.1. WHY DO YOU PREFER THIS?/WASH. *

J16. IS THERE ANY ITEM WHAT YOU WANT TO BE ADDED IN THE /WASH HYGINE KIT?/WASH. *

- ☐ Yes
- ☐ No

J16.1. WHAT IS THAT?/WASH. *

J17. DID YOU RECEIVED ANY /WASH TOP-UP KIT WITH-IN THE LAST 6 MONTHS?/WASH. *

- ☐ Yes
- ☐ No

J17.1. FROM WHICH ORGANIZATION DID YOU RECEIVE IT?/WASH. *

J18. DO YOU WANT TO TELL ANYTHING ABOUT DISTRIBUTION TO UNHCR?/WASH. *

H. Female Menstrual hygiene kit (Female respondents only)

H1. LAST DISTRIBUTION DATE/MONTH/FEM. *

- ☐ 2 weeks ago
- ☐ 1 month ago
- ☐ 2 months ago
- ☐ 3 months ago
- ☐ More than 6 months ago

H2. NAME OF AGENCY DISTRIBUTED/FEM. *

- ☐ UNHCR
- ☐ Brac
- ☐ BDRCS
- ☐ DRC
- ☐ Caritas
- ☐ Other

H2.1 IF OTHER, SPECIFY -/FEM. *

H2.2 SELECT THE /FEMALE HYGIENE KIT ITEMS YOU RECEIVED/FEM. *

- ☐ Reusable sanitary napkins (3x6 pcs)
- ☐ Female Underwear Panty (8 pcs)
- ☐ Antiseptic Liquid, 125ml (1 pc)
- ☐ Bath Soap, 100mg (8 pc)
- ☐ Laundry Soap, 130mg (8 pc)
- ☐ Bucket (15l / 1 pc)

» Reusable sanitary napkins

H3. QUANTITY RECEIVED/FEMNAP. *

H4. IS THE QUANTITY SUFFICIENT?/FEMNAP.

*

☐ Yes

☐ No

H4.1. WHY NOT SUFFICIENT?/FEMNAP.

*

H5. QUALITY/FEMNAP.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

H5.1. IF QUALITY BELOW AVERAGE, REASON/FEMNAP.

*

H6. USEFULNESS/FEMNAP.

*

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

H6.1. IF BELOW AVERAGE, REASON/FEMNAP.

*

H7. ACTUAL USE/FEMNAP.

*

☐ Used

☐ Kept/Stored

☐ Sold

☐ Stolen

☐ Exchanged

☐ Gifted

H7.1 SELLING PRICE/UNIT (IN BDT)/FEMNAP.

*

H7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/FEMNAP.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

H7.1.2. IF OTHER PLEASE SPECIFY/FEMNAP.

*

H7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/FEMNAP.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

H7.2.1. IF OTHER, SPECIFY -/FEMNAP.

*

H7.2.2. IF FOOD PLEASE SELECT/FEMNAP.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes

- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

H7.2.3. IF OTHER, SPECIFY -/FEMNAP.

*

H7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/FEMNAP.

*

» Female Underwear Panty

H3. QUANTITY RECEIVED/FEMPANTY.

*

H4. IS THE QUANTITY SUFFICIENT?/FEMPANTY.

*

- ☐ Yes
- ☐ No

H4.1. WHY NOT SUFFICIENT?/FEMPANTY.

*

H5. QUALITY/FEMPANTY.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

H5.1. IF QUALITY BELOW AVERAGE, REASON/FEMPANTY.

*

H6. USEFULNESS/FEMPANTY.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

H6.1. IF BELOW AVERAGE, REASON/FEMPANTY.

*

H7. ACTUAL USE/FEMPANTY.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

H7.1 SELLING PRICE/UNIT (IN BDT)/FEMPANTY.

*

H7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/FEMPANTY.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

H7.1.2. IF OTHER PLEASE SPECIFY/FEMPANTY.

*

H7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/FEMPANTY.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral

- ☐ Marriage/Divorce/Unlaid
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

H7.2.1. IF OTHER, SPECIFY -/FEMPANTY.

*

H7.2.2. IF FOOD PLEASE SELECT/FEMPANTY.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

H7.2.3. IF OTHER, SPECIFY -/FEMPANTY.

*

H7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/FEMPANTY.

*

» Antiseptic liquid

H3. QUANTITY RECEIVED/FEMPANTY.

*

H4. IS THE QUANTITY SUFFICIENT?/FEMPANTY.

*

- ☐ Yes
- ☐ No

H4.1. WHY NOT SUFFICIENT?/FEMPANTY.

*

H5. QUALITY/FEMPANTY.

*

- ☐ Very Good
☐ Good
☐ Average
☐ Bad
☐ Very Bad

H5.1. IF QUALITY BELOW AVERAGE, REASON/FEMANTY.

*

H6. USEFULNESS/FEMANTY.

*

- ☐ Very useful
☐ Useful
☐ Average
☐ Not useful
☐ Not useful at all

H6.1. IF BELOW AVERAGE, REASON/FEMANTY.

*

H7. ACTUAL USE/FEMANTY.

*

- ☐ Used
☐ Kept/Stored
☐ Sold
☐ Stolen
☐ Exchanged
☐ Gifted

H7.1 SELLING PRICE/UNIT (IN BDT)/FEMANTY.

*

H7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/FEMANTY.

*

- ☐ I need the item provided but had another urgent need
☐ I didn't need the item what provided
☐ Other (specify)
☐ Don't wish to answer

H7.1.2. IF OTHER PLEASE SPECIFY/FEMANTY.

*

H7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/FEMANTY. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

H7.2.1. IF OTHER, SPECIFY -/FEMANTY. *

H7.2.2. IF FOOD PLEASE SELECT/FEMANTY. *

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

H7.2.3. IF OTHER, SPECIFY -/FEMANTY. *

H7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/FEMANTY.

» Bathing Soap

H3. QUANTITY RECEIVED/FEMB.SOAP.

H4. IS THE QUANTITY SUFFICIENT?/FEMB.SOAP.

☐ Yes

☐ No

H4.1. WHY NOT SUFFICIENT?/FEMB.SOAP.

H5. QUALITY/FEMB.SOAP.

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

H5.1. IF QUALITY BELOW AVERAGE, REASON/FEMB.SOAP.

H6. USEFULNESS/FEMB.SOAP.

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

H6.1. IF BELOW AVERAGE, REASON/FEMB.SOAP.

H7. ACTUAL USE/FEMB.SOAP.

☐ Used

☐ Kept/Stored

☐ Sold

- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

H7.1 SELLING PRICE/UNIT (IN BDT)/FEMB.SOAP. *

H7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/FEMB.SOAP. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

H7.1.2. IF OTHER PLEASE SPECIFY/FEMB.SOAP. *

H7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/FEMB.SOAP. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

H7.2.1. IF OTHER, SPECIFY -/FEMB.SOAP.

*

H7.2.2. IF FOOD PLEASE SELECT/FEMB.SOAP.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

H7.2.3. IF OTHER, SPECIFY -/FEMB.SOAP.

*

H7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON _/FEMB.SOAP.

*

» Laundry Soap

H3. QUANTITY RECEIVED/FEML.SOAP.

*

H4. IS THE QUANTITY SUFFICIENT?/FEML.SOAP.

*

- ☐ Yes
- ☐ No

H4.1. WHY NOT SUFFICIENT?/FEML.SOAP.

*

H5. QUALITY/FEML.SOAP.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

H5.1 IF QUALITY BELOW AVERAGE REASON/FEML SOAP

*

H6. USEFULNESS/FEML.SOAP. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

H6.1. IF BELOW AVERAGE, REASON/FEML.SOAP. *

H7. ACTUAL USE/FEML.SOAP. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

H7.1 SELLING PRICE/UNIT (IN BDT)/FEML.SOAP. *

H7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/FEML.SOAP. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

H7.1.2. IF OTHER PLEASE SPECIFY/FEML.SOAP. *

H7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/FEML.SOAP. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent

- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

H7.2.1. IF OTHER, SPECIFY -/FEMPL.SOAP.

*

H7.2.2. IF FOOD PLEASE SELECT/FEMPL.SOAP.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

H7.2.3. IF OTHER, SPECIFY -/FEMPL.SOAP.

*

H7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/FEMPL.SOAP.

*

» Bucket

H3. QUANTITY RECEIVED/FEMBUCKET.

*

H4. IS THE QUANTITY SUFFICIENT?/FEMBUCKET.

*

☐ Yes

☐ No

H4.1. WHY NOT SUFFICIENT?/FEMBUCKET.

*

H5. QUALITY/FEMBUCKET.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

H5.1. IF QUALITY BELOW AVERAGE, REASON/FEMBUCKET.

*

H6. USEFULNESS/FEMBUCKET.

*

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

H6.1. IF BELOW AVERAGE, REASON/FEMBUCKET.

*

H7. ACTUAL USE/FEMBUCKET.

*

☐ Used

☐ Kept/Stored

☐ Sold

☐ Stolen

☐ Exchanged

☐ Gifted

H7.1 SELLING PRICE/UNIT (IN BDT)/FEMBUCKET.

*

H7.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/FEMBUCKET. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

H7.1.2. IF OTHER PLEASE SPECIFY/FEMBUCKET. *

H7.2. IF ITEM SOLD OR EXCHANGED THEM FOR/FEMBUCKET. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

H7.2.1. IF OTHER, SPECIFY -/FEMBUCKET. *

H7.2.2. IF FOOD PLEASE SELECT/FEMBUCKET. *

- ☐ Cereals
- ☐ Meat
- ☐ Milk

- ☐ WITHIN
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

H7.2.3. IF OTHER, SPECIFY -/FEMBUCKET.

*

H7.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON _/FEMBUCKET.

*

J. Distribution Methodology (/FEMale Hygiene)

J1. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO BE PUT ON THE DISTRIBUTION LIST?/FEM.

*

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J1.1 HOW MUCH (IN BDT)?/FEM.

*

J1.2 NATURE OF EXCHANGE?/FEM.

*

J1.3 TO WHOM?/FEM.

*

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J1.3.1 IF OTHER, SPECIFY -/FEM.

*

J2. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO RECEIVE THE ITEM(S)?/FEM. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J2.1 HOW MUCH (IN BDT)?/FEM. *

.....

J2.2 NATURE OF EXCHANGE?/FEM. *

.....

J2.3 TO WHOM?/FEM. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J2.3.1 IF OTHER, SPECIFY -/FEM. *

.....

J3. DID YOU HAVE TO PAY (OR ASK A NON-FAMILY MEMBER AS A FAVOUR) TO COLLECT AND TRANSPORT THE ASSISTANCE TO/FROM THE DISTRIBUTION POINT?/FEM. *

- ☐ Yes
- ☐ No

J3.1 HOW MUCH (IN BDT)?/FEM. *

.....

J3.2 WHY?/FEM. *

- ☐ Mobility Issues
- ☐ Distance
- ☐ Single headed households
- ☐ Too heavy
- ☐ Other

J3.2.1 PLEASE SPECIFY, OTHERS/FEM.

*

J4. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE BEFORE THE DISTRIBUTION?/FEM.

*

☐ Yes

☐ No

J4.1 BY WHOM?/FEM.

*

☐ Majhi

☐ UN Staff

☐ NGO Staff

☐ Govt Staff

☐ Army Staff

☐ Other

☐ Don't Want to Answer

J4.1.1 IF OTHER, PLEASE SPECIFY-/FEM.

*

J5. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE DURING THE DISTRIBUTION?/FEM.

*

☐ Yes

☐ No

J5.1 BY WHOM?/FEM.

*

☐ Majhi

☐ UN Staff

☐ NGO Staff

☐ Govt Staff

☐ Army Staff

☐ Other

☐ Don't Want to Answer

J5.1.1 IF OTHER, PLEASE SPECIFY-/FEM.

*

J6. WAS THE DISTRIBUTION FAR FROM YOUR HOME?/FEM. *

- ☐ Yes
- ☐ No

J6.1 IF YES, HOW LONG DOES IT TAKE TO REACH?/FEM. *

- ☐ 0-15 min
- ☐ 15-30 min
- ☐ 30-60 min
- ☐ 60+ Min

J7. HOW LONG YOU HAD TO WAIT IN THE DISTRIBUTION QUEUE FOR RECEIVING DISTRIBUTION/FEM. *

- ☐ Less than an hour
- ☐ 1-2 hours
- ☐ 3-4 hours
- ☐ 5-6 hours
- ☐ 6 hour or more

J8. IF THE ASSISTANCE COULD BE STARTED AGAIN WOULD YOU PREFER:/FEM. *

- ☐ Voucher
- ☐ In kind
- ☐ Combination (Voucher+ In kind)
- ☐ Other

J8.1 IF OTHER, PLEASE SPECIFY -/FEM. *

J9. HOW SATISFIED ARE YOU WITH THE DISTRIBUTION PROCESS?/FEM. *

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Average
- ☐ Satisfied
- ☐ Very satisfied

J9.1 IF SATISFACTION IS BELOW AVERAGE, PLEASE TELL US HOW CAN WE IMPROVE THE DISTRIBUTION SYSTEM?/FEM. *

J10. ANY PROBLEM(S) DURING DISTRIBUTION?/FEM. *

☐ Yes

☐ No

J10.1 IF YES, DESCRIBE -/FEM. *

J10.2 HAVE YOU MADE A COMPLAINT?/FEM. *

☐ Yes

☐ No

J10.2.1 HOW DID YOU MADE COMPLAINT?/FEM. *

☐ Information point

☐ NGO staff

☐ UN staff

☐ Hotline

☐ Feedback letterbox

☐ Help desk at distribution point

☐ Other

J10.2.1.1 IF OTHER, PLEASE SPECIFY -/FEM. *

J10.2.2 HOW MANY TIMES?/FEM. *

J11. ANY PROBLEM(S) AFTER DISTRIBUTION?/FEM. *

☐ Yes

☐ No

J11.1 IF YES, DESCRIBE -/FEM. *

J11.2 HAVE YOU MADE A COMPLAINT?/FEM. *

☐ Yes

☐ No

J11.2.1 HOW DID YOU MADE COMPLAINT?/FEM. *

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J11.2.1.1 IF OTHER, PLEASE SPECIFY -/FEM. *

.....

J11.2.2 HOW MANY TIMES?/FEM. *

.....

J12. IF YES OF ANY, PLEASE TELL US HOW CAN WE IMPROVE THE COMPLAINT MECHANISM?/FEM. *

.....

J13. DID YOU OR THE PERSON WHO WENT TO COLLECT MATERIALS FEEL SAFE AT THE VENUE OF THE DISTRIBUTION?/FEM. *

- ☐ Yes
- ☐ No

J13.1. WHAT MADE YOU FEEL UNSAFE?/FEM. *

.....

J14. HOW WAS THE DISTRIBUTION STAFF BEHAVIOUR AT DISTRIBUTION POINT?/FEM. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ VeryBad

J14.1. WHY IT WAS BAD?/FEM. *

.....

J15. WHICH ITEM DO YOU PREFER MOST?/FEM. *

- ☐ Reusable sanitary napkins (3x6 pcs)
- ☐ Female Underwear Panty (8 pcs)
- ☐ Antiseptic Liquid, 125ml (1 pc)
- ☐ Bath Soap, 100mg (8 pc)
- ☐ Laundry Soap, 130mg (8 pc)
- ☐ Bucket (15l / 1 pc)

J15.1. WHY DO YOU PREFER THIS?/FEM. *

J16. IS THERE ANY ITEM WHAT YOU WANT TO BE ADDED IN THE /FEMALE HYGINE KIT?/FEM. *

- ☐ Yes
- ☐ No

J16.1. WHAT IS THAT?/FEM. *

J17. DO YOU WANT TO TELL ANYTHING ABOUT DISTRIBUTION TO UNHCR?/FEM. *

I.SHELTER KIT

I1. DID YOU RECEIVE ANY /SHELTER MATERIALS IN DEC 2019 TO JULY 2020? SUCH AS BORAK BAMBOO, MULI BAMBOO, PLASTIC SHEET (TARPAULIN), PEGS, WIRE, ROPES, JUTE SANDBAG?/SHEL. *

- ☐ Yes
- ☐ No

I1.1. SELECT THE /SHELTER ITEMS YOU RECEIVED/SHEL. *

- ☐ Bamboo Borak
- ☐ Bamboo Muli
- ☐ Rope
- ☐ Iron Peg
- ☐ Plastic Sheet (Tarpaulin)
- ☐ Jute Sand Bag
- ☐ Wire

I2. LAST DISTRIBUTION DATE/MONTH/SHEL.

*

- ☐ 2 weeks ago
- ☐ 1 month ago
- ☐ 2 months ago
- ☐ 3 months ago
- ☐ More than 6 months ago

I3. NAME OF AGENCY DISTRIBUTED/SHEL.

*

- ☐ UNHCR
- ☐ Brac
- ☐ BDRCS
- ☐ DRC
- ☐ Caritas
- ☐ Other

I3.1 IF OTHER, SPECIFY -/SHEL.

*

» **Bamboo Borak/SHEL.**

I4. QUANTITY RECEIVED/SHELBORAK.

*

I5. IS THE QUANTITY SUFFICIENT?/SHELBORAK.

*

- ☐ Yes
- ☐ No

I5.1. WHY NOT SUFFICIENT?/SHELBORAK.

*

I6. QUALITY/SHELBORAK.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

I6.1. IF QUALITY BELOW AVERAGE, REASON/SHELBORAK.

*

17. USEFULNESS/SHELBORAK. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

17.1. IF BELOW AVERAGE, REASON/SHELBORAK. *

18. ACTUAL USE/SHELBORAK. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

18.1 SELLING PRICE/UNIT (IN BDT)/SHELBORAK. *

18.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELBORAK. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

18.1.2. IF OTHER PLEASE SPECIFY/SHELBORAK. *

18.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELBORAK. *

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education

- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

I8.2.1. IF OTHER, SPECIFY -/SHELBORAK.

*

I8.2.2. IF FOOD PLEASE SELECT/SHELBORAK.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

I8.2.3. IF OTHER, SPECIFY -/SHELBORAK.

*

I8.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHELBORAK.

*

I8.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHELBORAK.

*

- ☐ Rebuild Shelter
- ☐ Repair/Replacement
- ☐ Strengthen foundation

- ☐ Bigger shelter size
- ☐ Partition walls
- ☐ Attached/External Kitchen
- ☐ Improve wall covering
- ☐ Improve roof covering
- ☐ Other (specify)

I8.4.1. PLEASE SPECIFY/SHELBORAK.

*

I8.5. IF ITEMS STORED, WHY DID YOU STORE?/SHELBORAK.

*

I8.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHELBORAK.

*

- ☐ Yes
- ☐ No
- ☐ Not Sure

I9. WHICH ARE THE THREE MAIN IMPROVEMENTS YOU MADE TO YOUR SHELTER WITH MATERIALS RECEIVED?

- ☐ Rebuild Shelter
- ☐ Repair/Replacement
- ☐ Strengthen foundation
- ☐ Bigger shelter size
- ☐ Partition walls
- ☐ Attached/External Kitchen
- ☐ Other

I9.1. SPECIFY

» Bamboo Muli

I4. QUANTITY RECEIVED/SHELMULI.

*

I5. IS THE QUANTITY SUFFICIENT?/SHELMULI.

*

- ☐ Yes
- ☐ No

I5.1. WHY NOT SUFFICIENT?/SHELMULI.

I6. QUALITY/SHELMULI.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

I6.1. IF QUALITY BELOW AVERAGE, REASON/SHELMULI.

*

I7. USEFULNESS/SHELMULI.

*

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

I7.1. IF BELOW AVERAGE, REASON/SHELMULI.

*

I8. ACTUAL USE/SHELMULI.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

I8.1 SELLING PRICE/UNIT (IN BDT)/SHELMULI.

*

I8.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELMULI.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

18.1.2. IF OTHER PLEASE SPECIFY/SHELMULI.

*

18.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELMULI.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

18.2.1. IF OTHER, SPECIFY -/SHELMULI.

*

18.2.2. IF FOOD PLEASE SELECT/SHELMULI.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits

☐ Other

18.2.3. IF OTHER, SPECIFY -/SHELMULI.

*

18.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHELMULI.

*

18.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHELMULI.

*

- ☐ Rebuild Shelter
- ☐ Repair/Replacement
- ☐ Strengthen foundation
- ☐ Bigger shelter size
- ☐ Partition walls
- ☐ Attached/External Kitchen
- ☐ Improve wall covering
- ☐ Improve roof covering
- ☐ Other (specify)

18.4.1. PLEASE SPECIFY/SHELMULI.

*

18.5. IF ITEMS STORED, WHY DID YOU STORE?/SHELMULI.

*

18.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHELMULI.

*

- ☐ Yes
- ☐ No
- ☐ Not Sure

» Rope

14. QUANTITY RECEIVED/SHELROPE.

*

15. IS THE QUANTITY SUFFICIENT?/SHELROPE.

*

- ☐ Yes
- ☐ No

15.1. WHY NOT SUFFICIENT?/SHELROPE.

*

16. QUALITY/SHELROPE. *

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

16.1. IF QUALITY BELOW AVERAGE, REASON/SHELROPE. *

17. USEFULNESS/SHELROPE. *

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

17.1. IF BELOW AVERAGE, REASON/SHELROPE. *

18. ACTUAL USE/SHELROPE. *

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

18.1 SELLING PRICE/UNIT (IN BDT)/SHELROPE. *

18.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELROPE. *

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

I8.1.2. IF OTHER PLEASE SPECIFY/SHELROPE.

*

I8.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELROPE.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

I8.2.1. IF OTHER, SPECIFY -/SHELROPE.

*

I8.2.2. IF FOOD PLEASE SELECT/SHELROPE.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

18.2.3. IF OTHER, SPECIFY -/SHELROPE.

*

18.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHELROPE.

*

18.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHELROPE.

*

- ☐ Resistance to High winds
- ☐ Strengthen shelter connections
- ☐ Other (specify)

18.4.1. PLEASE SPECIFY/SHELROPE.

*

18.5. IF ITEMS STORED, WHY DID YOU STORE?/SHELROPE.

*

18.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHELROPE.

*

- ☐ Yes
- ☐ No
- ☐ Not Sure

» Iron Peg

14. QUANTITY RECEIVED/SHELPEG.

*

15. IS THE QUANTITY SUFFICIENT?/SHELPEG.

*

- ☐ Yes
- ☐ No

15.1. WHY NOT SUFFICIENT?/SHELPEG.

*

16. QUALITY/SHELPEG.

*

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

<input type="radio"/> Very bad	
16.1. IF QUALITY BELOW AVERAGE, REASON/SHELPEG.	
17. USEFULNESS/SHELPEG.	
<input type="radio"/> Very useful <input type="radio"/> Useful <input type="radio"/> Average <input type="radio"/> Not useful <input type="radio"/> Not useful at all	
17.1. IF BELOW AVERAGE, REASON/SHELPEG.	
18. ACTUAL USE/SHELPEG.	
<input type="radio"/> Used <input type="radio"/> Kept/Stored <input type="radio"/> Sold <input type="radio"/> Stolen <input type="radio"/> Exchanged <input type="radio"/> Gifted	
18.1 SELLING PRICE/UNIT (IN BDT)/SHELPEG.	
18.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELPEG.	
<input type="radio"/> I need the item provided but had another urgent need <input type="radio"/> I didn't need the item what provided <input type="radio"/> Other (specify) <input type="radio"/> Don't wish to answer	
18.1.2. IF OTHER PLEASE SPECIFY/SHELPEG.	
18.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELPEG.	
<input type="checkbox"/> Money <input type="checkbox"/> Food <input type="checkbox"/> Water <input type="checkbox"/> Medical	

<input type="checkbox"/> Medical <input type="checkbox"/> Rent <input type="checkbox"/> Education <input type="checkbox"/> Shelter Kit <input type="checkbox"/> Clothes <input type="checkbox"/> Household Items <input type="checkbox"/> Seeds/Tools <input type="checkbox"/> Trade Items <input type="checkbox"/> Fuel <input type="checkbox"/> Marriage/Birth/Funeral <input type="checkbox"/> Travel <input type="checkbox"/> Bribes <input type="checkbox"/> Debt <input type="checkbox"/> Payment to receive other assistances / services <input type="checkbox"/> Hiring / paying someone to support family members with specific needs <input type="checkbox"/> Other	
18.2.1. IF OTHER, SPECIFY -/SHELPEG.	*
.....	
18.2.2. IF FOOD PLEASE SELECT/SHELPEG.	*
<input type="checkbox"/> Cereals <input type="checkbox"/> Meat <input type="checkbox"/> Milk <input type="checkbox"/> Legumes <input type="checkbox"/> Oil <input type="checkbox"/> Vegetables <input type="checkbox"/> Fruits <input type="checkbox"/> Other	
18.2.3. IF OTHER, SPECIFY -/SHELPEG.	*
.....	
18.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHELPEG.	*
.....	
18.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHELPEG.	*
.....	

☐ Resistance to High winds

☐ Other (specify)

18.4.1. PLEASE SPECIFY/SHELPEG. *

18.5. IF ITEMS STORED, WHY DID YOU STORE?/SHELPEG. *

18.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHELPEG. *

☐ Yes

☐ No

☐ Not Sure

» Plastic Sheet (Tarpaulin)

14. QUANTITY RECEIVED/SHELTRAP. *

15. IS THE QUANTITY SUFFICIENT?/SHELTRAP. *

☐ Yes

☐ No

15.1. WHY NOT SUFFICIENT?/SHELTRAP. *

16. QUALITY/SHELTRAP. *

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

16.1. IF QUALITY BELOW AVERAGE, REASON/SHELTRAP. *

17. USEFULNESS/SHELTRAP. *

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

- ☐ Not useful
- ☐ Not useful at all

I7.1. IF BELOW AVERAGE, REASON/SHELTRAP.

*

I8. ACTUAL USE/SHELTRAP.

*

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

I8.1 SELLING PRICE/UNIT (IN BDT)/SHELTRAP.

*

I8.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELTRAP.

*

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

I8.1.2. IF OTHER PLEASE SPECIFY/SHELTRAP.

*

I8.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELTRAP.

*

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items

- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt
- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

18.2.1. IF OTHER, SPECIFY -/SHELTRAP.

*

18.2.2. IF FOOD PLEASE SELECT/SHELTRAP.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

18.2.3. IF OTHER, SPECIFY -/SHELTRAP.

*

18.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHELTRAP.

*

18.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHELTRAP.

*

- ☐ Improve/Repair Roof covering
- ☐ Partition walls
- ☐ Bigger shelter size
- ☐ Flooring
- ☐ Other (specify)

18.4.1. PLEASE SPECIFY/SHELTRAP.

*

I8.5. IF ITEMS STORED, WHY DID YOU STORE?/SHELTRAP.

I8.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHELTRAP.

- ☐ Yes
- ☐ No
- ☐ Not Sure

» Jute Sand Bag

I4. QUANTITY RECEIVED/SHELBAG.

I5. IS THE QUANTITY SUFFICIENT?/SHELBAG.

- ☐ Yes
- ☐ No

I5.1. WHY NOT SUFFICIENT?/SHELBAG.

I6. QUALITY/SHELBAG.

- ☐ Very Good
- ☐ Good
- ☐ Average
- ☐ Bad
- ☐ Very Bad

I6.1. IF QUALITY BELOW AVERAGE, REASON/SHELBAG.

I7. USEFULNESS/SHELBAG.

- ☐ Very useful
- ☐ Useful
- ☐ Average
- ☐ Not useful
- ☐ Not useful at all

I7.1. IF BELOW AVERAGE, REASON/SHELBAG.

I8. ACTUAL USE/SHELBAG.

- ☐ Used
- ☐ Kept/Stored
- ☐ Sold
- ☐ Stolen
- ☐ Exchanged
- ☐ Gifted

I8.1 SELLING PRICE/UNIT (IN BDT)/SHELBAG.

I8.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELBAG.

- ☐ I need the item provided but had another urgent need
- ☐ I didn't need the item what provided
- ☐ Other (specify)
- ☐ Don't wish to answer

I8.1.2. IF OTHER PLEASE SPECIFY/SHELBAG.

I8.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELBAG.

- ☐ Money
- ☐ Food
- ☐ Water
- ☐ Medical
- ☐ Rent
- ☐ Education
- ☐ Shelter Kit
- ☐ Clothes
- ☐ Ghousehold Items
- ☐ Seeds/Tools
- ☐ Trade Items
- ☐ Fuel
- ☐ Marriage/Birth/Funeral
- ☐ Travel
- ☐ Bribes
- ☐ Debt

- ☐ Payment to receive other assistances / services
- ☐ Hiring / paying someone to support family members with specific needs
- ☐ Other

I8.2.1. IF OTHER, SPECIFY -/SHEL BAG.

*

I8.2.2. IF FOOD PLEASE SELECT/SHEL BAG.

*

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

I8.2.3. IF OTHER, SPECIFY -/SHEL BAG.

*

I8.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHEL BAG.

*

I8.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHEL BAG.

*

- ☐ Flooring
- ☐ Slope protection
- ☐ Resistance to high wind
- ☐ Storing family assets
- ☐ Other (specify)

I8.4.1. PLEASE SPECIFY/SHEL BAG.

*

I8.5. IF ITEMS STORED, WHY DID YOU STORE?/SHEL BAG.

*

I8.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHEL BAG.

*

- ☐ Yes
- ☐ No

☐ Not Sure

» Wire

I4. QUANTITY RECEIVED/SHELWIRE. *

I5. IS THE QUANTITY SUFFICIENT?/SHELWIRE. *

☐ Yes

☐ No

I5.1. WHY NOT SUFFICIENT?/SHELWIRE. *

I6. QUALITY/SHELWIRE. *

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ Very Bad

I6.1. IF QUALITY BELOW AVERAGE, REASON/SHELWIRE. *

I7. USEFULNESS/SHELWIRE. *

☐ Very useful

☐ Useful

☐ Average

☐ Not useful

☐ Not useful at all

I7.1. IF BELOW AVERAGE, REASON/SHELWIRE. *

I8. ACTUAL USE/SHELWIRE. *

☐ Used

☐ Kept/Stored

☐ Sold

☐ Stolen

☐ Exchanged

☐ Gifted

18.1 SELLING PRICE/UNIT (IN BDT)/SHELWIRE.

*

18.1.1. IF ITEMS SOLD OR EXCHANGED, REASON:/SHELWIRE.

*

☐ I need the item provided but had another urgent need

☐ I didn't need the item what provided

☐ Other (specify)

☐ Don't wish to answer

18.1.2. IF OTHER PLEASE SPECIFY/SHELWIRE.

*

18.2. IF ITEM SOLD OR EXCHANGED THEM FOR/SHELWIRE.

*

☐ Money

☐ Food

☐ Water

☐ Medical

☐ Rent

☐ Education

☐ Shelter Kit

☐ Clothes

☐ Ghousehold Items

☐ Seeds/Tools

☐ Trade Items

☐ Fuel

☐ Marriage/Birth/Funeral

☐ Travel

☐ Bribes

☐ Debt

☐ Payment to receive other assistances / services

☐ Hiring / paying someone to support family members with specific needs

☐ Other

18.2.1. IF OTHER, SPECIFY -/SHELWIRE.

*

18.2.2. IF FOOD PLEASE SELECT/SHELWIRE. *

- ☐ Cereals
- ☐ Meat
- ☐ Milk
- ☐ Legumes
- ☐ Oil
- ☐ Vegetables
- ☐ Fruits
- ☐ Other

18.2.3. IF OTHER, SPECIFY -/SHELWIRE. *

18.3. IF ITEMS GIFTED, PLEASE MENTION TO WHOM? AND REASON __/SHELWIRE. *

18.4. IF ITEMS USED, WHAT DID YOU USED FOR?/SHELWIRE. *

- ☐ Resistance to High winds
- ☐ Strengthen shelter connections
- ☐ Other (specify)

18.4.1. PLEASE SPECIFY/SHELWIRE. *

18.5. IF ITEMS STORED, WHY DID YOU STORE?/SHELWIRE. *

18.6. IF ITEMS STORED, DO YOU INTEND TO USE IT LATER?/SHELWIRE. *

- ☐ Yes
- ☐ No
- ☐ Not Sure

J. Distribution Methodology (/SHELter)

J1. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO BE PUT ON THE DISTRIBUTION LIST?/SHEL. *

- ☐ Yes (Pay)
- ☐ No

☐ Yes (Favour)

J1.1 HOW MUCH (IN BDT)?/SHEL. *

J1.2 NATURE OF EXCHANGE?/SHEL. *

J1.3 TO WHOM?/SHEL. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other
- ☐ Don't Want to Answer

J1.3.1 IF OTHER, SPECIFY -/SHEL. *

J2. DID YOU HAVE TO PAY (OR ASK SOMEONE AS A FAVOUR IN EXCHANGE OF SOMETHING ELSE) TO RECEIVE THE ITEM(S)?/SHEL. *

- ☐ Yes (Pay)
- ☐ No
- ☐ Yes (Favour)

J2.1 HOW MUCH (IN BDT)?/SHEL. *

J2.2 NATURE OF EXCHANGE?/SHEL. *

J2.3 TO WHOM?/SHEL. *

- ☐ Majhi
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Army Staff
- ☐ Other

☐ Don't Want to Answer

J2.3.1 IF OTHER, SPECIFY -/SHEL.

*

J3. DID YOU HAVE TO PAY (OR ASK A NON-FAMILY MEMBER AS A FAVOUR) TO COLLECT AND TRANSPORT THE ASSISTANCE TO/FROM THE DISTRIBUTION POINT?/SHEL.

*

☐ Yes

☐ No

J3.1 HOW MUCH (IN BDT)?/SHEL.

*

J3.2 WHY?/SHEL.

*

☐ Mobility Issues

☐ Distance

☐ Single headed households

☐ Too heavy

☐ Other

J3.2.1 PLEASE SPECIFY, OTHERS/SHEL.

*

J4. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE BEFORE THE DISTRIBUTION?/SHEL.

*

☐ Yes

☐ No

J4.1 BY WHOM?/SHEL.

*

☐ Majhi

☐ UN Staff

☐ NGO Staff

☐ Govt Staff

☐ Army Staff

☐ Other

☐ Don't Want to Answer

J4.1.1 IF OTHER, PLEASE SPECIFY-/SHEL.

*

J5. WERE YOU TOLD WHAT ITEMS YOU WOULD RECEIVE DURING THE DISTRIBUTION?/SHEL.

*

☐ Yes☐ No

J5.1 BY WHOM?/SHEL.

*

☐ Majhi☐ UN Staff☐ NGO Staff☐ Govt Staff☐ Army Staff☐ Other☐ Don't Want to Answer

J5.1.1 IF OTHER, PLEASE SPECIFY-/SHEL.

*

J6. WAS THE DISTRIBUTION FAR FROM YOUR HOME?/SHEL.

*

☐ Yes☐ No

J6.1 IF YES, HOW LONG DOES IT TAKE TO REACH?/SHEL.

*

☐ 0-15 min☐ 15-30 min☐ 30-60 min☐ 60+ Min

J7. HOW LONG YOU HAD TO WAIT IN THE DISTRIBUTION QUEUE FOR RECEIVING DISTRIBUTION/SHEL.

*

☐ Less than an hour☐ 1-2 hours☐ 3-4 hours☐ 5-6 hours☐ 6 hour or more

J8. IF THE ASSISTANCE COULD BE STARTED AGAIN WOULD YOU PREFER:/SHEL.

*

☐ Voucher☐ In kind☐ Combination (Voucher+ In kind)☐ Other

J8.1 IF OTHER, PLEASE SPECIFY -/SHEL.

J9. HOW SATISFIED ARE YOU WITH THE DISTRIBUTION PROCESS?/SHEL.

*

- ☐ Very Dissatisfied
- ☐ Dissatisfied
- ☐ Average
- ☐ Satisfied
- ☐ Very satisfied

J9.1 IF SATISFACTION IS BELOW AVERAGE, PLEASE TELL US HOW CAN WE IMPROVE THE DISTRIBUTION SYSTEM?/SHEL.

*

J10. ANY PROBLEM(S) DURING DISTRIBUTION?/SHEL.

*

- ☐ Yes
- ☐ No

J10.1 IF YES, DESCRIBE -/SHEL.

*

J10.2 HAVE YOU MADE A COMPLAINT?/SHEL.

*

- ☐ Yes
- ☐ No

J10.2.1 HOW DID YOU MADE COMPLAINT?/SHEL.

*

- ☐ Information point
- ☐ NGO staff
- ☐ UN staff
- ☐ Hotline
- ☐ Feedback letterbox
- ☐ Help desk at distribution point
- ☐ Other

J10.2.1.1 IF OTHER, PLEASE SPECIFY -/SHEL.

*

J10.2.2 HOW MANY TIMES?/SHEL.

*

J11. ANY PROBLEM(S) AFTER DISTRIBUTION?/SHEL.

*

☐ Yes

☐ No

J11.1 IF YES, DESCRIBE -/SHEL.

*

J11.2 HAVE YOU MADE A COMPLAINT?/SHEL.

*

☐ Yes

☐ No

J11.2.1 HOW DID YOU MADE COMPLAINT?/SHEL.

*

☐ Information point

☐ NGO staff

☐ UN staff

☐ Hotline

☐ Feedback letterbox

☐ Help desk at distribution point

☐ Other

J11.2.1.1 IF OTHER, PLEASE SPECIFY -/SHEL.

*

J11.2.2 HOW MANY TIMES?/SHEL.

*

J12. IF YES OF ANY, PLEASE TELL US HOW CAN WE IMPROVE THE COMPLAINT MECHANISM?/SHEL.

*

J13. DID YOU OR THE PERSON WHO WENT TO COLLECT MATERIALS FEEL SAFE AT THE VENUE OF THE DISTRIBUTION?/SHEL.

*

☐ Yes

☐ No

J13.1. WHAT MADE YOU FEEL UNSAFE?/SHEL.

*

J14. HOW WAS THE DISTRIBUTION STAFF BEHAVIOUR AT DISTRIBUTION POINT?/SHEL.

*

☐ Very Good

☐ Good

☐ Average

☐ Bad

☐ VeryBad

J14.1. WHY IT WAS BAD?/SHEL.

*

J15. WHICH ITEM DO YOU PREFER MOST?/SHEL.

*

- ☐ Bamboo Borak
- ☐ Bamboo Muli
- ☐ Rope
- ☐ Iron Peg
- ☐ Plastic Sheet (Tarpaulin)
- ☐ Jute Sand Bag
- ☐ Wire

J15.1. WHY DO YOU PREFER THIS?/SHEL.

*

J16. WHAT ARE THE PREFERRED MEANS OF COMMUNICATION?/SHEL.

*

- ☐ Mahji
- ☐ UN Staff
- ☐ NGO Staff
- ☐ Govt Staff
- ☐ Neighbor
- ☐ Army Staff
- ☐ Don't want to answer
- ☐ Other

J16.1. PLEASE SPECIFY

J17. DO YOU WANT TO TELL ANYTHING ABOUT DISTRIBUTION TO UNHCR?/SHEL.

*

K. ADDITIONAL /SHELTER QUESTIONS/SHEL.

K1. WHAT IS NEEDED TO SUPPORT FOR YOUR /SHELTER IMPROVEMENTS FURTHER?/SHEL.

*

- ☐ Construction Materials
- ☐ Tools
- ☐ Technical Assistance

- ☐
- ☐ Money
- ☐ Nothing
- ☐ Other (Specify)
- ☐ Do not wish to answer

K1.1. SPECIFY

K2. WHAT KIND OF IMPROVEMENTS WOULD YOU LIKE TO DO TO YOUR /SHELTER IN THE FUTURE?/SHEL. *

- ☐ Built new shelter
- ☐ Bigger size
- ☐ Partition size
- ☐ Attached/external kitchen
- ☐ New floor
- ☐ Stronger structure to resist heavy wind
- ☐ Better roof to resist heavy rain
- ☐ Better insulation to resist to hot weather
- ☐ Better support for the shelter on the slope
- ☐ Other (Specify)
- ☐ Do not wish to answer

K2.1. SPECIFY

K3. WAS YOUR FAMILY ABLE TO BUILD/UPGRADE/REPAIR YOUR /SHELTER BY YOURSELF?/SHEL. *

- ☐ Yes
- ☐ No

K3.1 IF NO, DID YOU RECEIVE TECHNICAL SUPPORT FROM SOMEONE?/SHEL. *

- ☐ Yes
- ☐ No
- ☐ Do not wish to answer

K3.2 IF YES, BY WHOM/SHEL. *

- ☐ Relatives
- ☐ Neighbor
- ☐ Friends

- ☐ NGO/INGO Staff
- ☐ Volunteers
- ☐ Other

K3.2.1 IF OTHER, PLEASE SPECIFY/SHEL.

K3.2.1 IF YES, ARE YOU HAPPY WITH TECHNICAL SUPPORT PROVIDED?/SHEL. *

- ☐ Extremely happy
- ☐ Happy
- ☐ Not happy
- ☐ Do not wish to answer

K4. DO YOU THINK YOUR /SHELTER WILL BE STRONG ENOUGH FOR THE BAD WEATHER?/SHEL. *

- ☐ Yes
- ☐ No
- ☐ Do not wish to answer