

**Final Report  
on  
Protection Support for Myanmar Refugees and WASH support for Host  
Communities**

**Submitted to:  
Japan Platform**

**Submitted by:**

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## List of Abbreviations

AAR	Association for Aid and Relief
AWD	Acute Watery Diarrhea
BC	Bathing Cubicle
CFS	Child Friendly Space
CIC	Camp in Charge
CPSS	Child Protection Sub-Sector
CRM	Compliant and Response Mechanism
DPHE	Department of Public Health Engineering
GBV	Gender Based Violence
JPF	Japan Platform
JRP	JOINT RESPONSE PLAN 2020
LC	Learning Center
MHM	Menstrual Hygiene
MHPSS	Mental Health and Psychosocial Support
NFI	Non-Food Item
NGO	Non-Government Organization
NID	National Identity Card Strategic Objectives
SO	
TPM	Third Party Monitoring
UNO	Upazila Nirbahi Officer
WASH	Water, Sanitation and Hygiene
WFS	Woman Friendly Space

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# Executive Summary

## Introduction

The Japan Platform (hereinafter referred to as "JPF") is an international emergency humanitarian aid organization which offers the most effective and prompt emergency aid in response to humanitarian needs, focusing on issues of refugees and natural disasters. JPF conducts such aid through a tripartite cooperation system where NGOs, business communities, and the government of Japan work in close cooperation, based on equal partnership, and making the most of the respective sectors' characteristics and resources.

JPF serves as an intermediary support organization providing various types of assistance to member NGOs in Japan to deliver quick and comprehensive aid on their own. JPF has supported aid activities of 44 member NGOs, each with its own set of diverse strengths. It has delivered humanitarian assistance to 55 nations and regions about 1,500 projects, with a total financial contribution of 60 billion yen. JPF has built a strong reputation based on trust by promoting cooperation among private sectors and NGOs and by accurately reporting all of its activities. There are seven projects implemented under JPF scheme in Cox's Bazar as of March 2021 which are being funded by JPF and implemented by member NGOs in Cox's Bazar and among them four (04) were selected for TPM exercise. Protection Support for Myanmar Refugees and WASH support for Host Communities is one of the four projects being implemented by Association for Aid and Relief, Japan (AAR, specified non-profit corporation) for the period of March 31, 2020 to February 28, 2021 (335 days) with an allocated budget of 93,947,253 yens from JPF grant.

To this end, JPF has appointed Org-Quest Research Limited (hereinafter referred to as "OrQuest") as a Third-Party Monitor (TPM) entity to provide evaluation services for the Protection Support for Myanmar Refugees and WASH support for Host Communities.

## Overview of the Project

The broad objective of the project ***Protection Support for Myanmar Refugees and WASH support for Host Communities*** is to improve the protection environment in refugee camps, especially for women and children, along with improving the sustainable water, sanitation and hygiene (WASH) environment in the host communities. In this project, two components are being implemented for refugees and the host community. Firstly, two Woman Friendly Spaces (WFS) and two Child Friendly Spaces (CFS) are being operated in Camps 25 and 27 for Myanmar refugees in Cox's Bazar district. These facilities are expected to provide courses on protection risks, recreational activities for stress care, and psychosocial support by psychological counselors. In addition, information is being offered and assessment are being performed through outreach activities based at the two WFS facilities, and support according to individual needs are being provided after identifying the necessity of support. Secondly, monitoring of WASH facilities and their maintenance including repair are being performed in the host community in Teknaf Upazila in order to keep the facilities in a sustainable state of use, and hygiene awareness-raising activities are being conducted in schools in order to encourage changes in sanitary practices for safer and healthier living.

## Evaluation Design

This study applied both quantitative and qualitative approaches to data collection. Quantitative survey data will be collected from individuals through structured questionnaires using Computer Assisted Personal Interview (CAPI) technique. Qualitative data was collected through IDI and KII.

Once the project was awarded to OrQuest, JPF organized a kick-off meeting with OrQuest to finalize the methodology, discuss the development of study tools, and preparation of inception report. Based on the documents received from JPF, OrQuest prepared study tools and inception report for the evaluation and shared with JPF. After that, JPF organized an inception meeting with OrQuest and the project implementing NGO to discuss the details of the evaluation objectives, scope, targets, data processing and analyzing, allocated team, and reporting. Due to the outbreak of COVID-19 worldwide, most of the discussions were undertaken online. Based on the discussion in the inception meeting, the study methodology and sample size were revised from the project. To limit the physical movement inside the camps and in the host community locations, to reduce interaction with beneficiaries and other stakeholders, the sample size of the project was reduced.

### Geographical coverage:

As mentioned earlier, the project has two components. Component 1 of the project was implemented in Camp 25 & 27 of Rohingya refugee camps in Teknaf upazila in Cox's Bazar district. Four schools (1 school and three madrasas) and specific areas in host community in Teknaf upazila were covered under Component 2.

### Sample sizes by respondent type

Project Components	Beneficiaries	Number of interviews, IDIs and KIIs
<b>Component 1.</b>	Women registered with WFS	50 (F2F)
	Refugees in Target area (those who only attended COVID19 session)	20 IDI
	Women registered with WFS	5 IDI
	Case Manager	1 KII
	Case Worker	2 KII
	Volunteer	2 KII
	CIC	1 KII
	Majhi	1 KII
<b>Component 2.</b>	Households in host community	100 (F2F)
	Students in host community (male)	50 (F2F)
	Students in host community (female)	50 (F2F)
	Households in host community	6 IDI
	Students in host community (male)	2 IDI
	Students in host community (female)	2 IDI
	Teacher	2 IDI
Local opinion leader		2 KII
KII with implementing NGO officials		3 KII
<b>Total</b>		<b>250 F2F surveys, 37 IDIs, 12 KIIs</b>

## Study Findings for Component I:

There were 184 newly registered women at the WFS in the current phase of the project, among them 84 members registered at WFS at camp 25 and 100 members registered at WFS at camp 27. During the survey, total 50 registered members of WFS were interviewed. Among the surveyed WFS registered members, most of the women (80%) were housewives, while 18% were unemployed. A point to be noted that the women population in the Rohingya community who were married but not involved in any income-generating activity were housewives and those who were unmarried but not involved in any income-generating activity, claimed as unemployed. Among the surveyed registered women 2% (n=1) were NGO workers/volunteers. Among the surveyed WFS registered women, two third (66%) were married, while less than one-fifth respondents (18%) were single. There were 8% respondents who were widowed and remaining 8% were separate.

The survey was conducted among the registered girls and women of WFS. In the survey it was identified that 94% received information related to protection, while remaining 6% (n=3) respondents did not receive any information related to protection. Based on the findings it can be stated that all the members did not visit the WFS regularly or might not have participated in all the awareness sessions. They might have participated in the events only.

There were different protection concerns among the people in the Rohingya community. The most mentioned protection concern was 'trafficking' and 'domestic violence' (42%). After these mentioned concerns, 'free movement' (28%) inside the camp was a major concern. During the survey, there was a case of kidnapping, which raised their concern more. Early marriage (26%) was another major concern for the members of WFS.

Half of the respondents were very much aware of trafficking, while one-third of the respondents (32%) were somewhat aware of the topic. On the other hand, 12% of respondents thought that they did not know anything about the topic. In the case of early marriage, half of the respondents claimed that they were very much aware of 'Early marriage', while 40% of respondents thought that they were somewhat aware of the topic. There were 6% of respondents who were not aware of the topic at all. In another case, 48% of respondents were very much aware of 'domestic violence', while 40% of respondents were somewhat aware of 'domestic violence'. On the other hand, 8% of respondents were not aware of domestic violence at all.

The WFS members who were aware of protection-related topics, most of the cases they agreed that they had an improved knowledge. In the case of trafficking, 53.7% of respondents completely agreed and 41.5% of respondents agreed that their knowledge had increased, but 2.4% of respondents disagree with the statement. In the case of early marriage and domestic violence, all the respondents completely agreed or agreed to the statement their knowledge on the topics has increased.

As per the surveyed respondents, domestic violence was the most noticed activities related to protection in the camps, which was noticed by 84.1% of respondents, followed by early marriage (73.3%). Moreover, 53.7% of respondents have seen the incidence of 'trafficking' in the camp.

Overall, 59.5%, 63.6%, and 72.7% of respondents discussed the issue of domestic violence, early marriage, and trafficking issues respectively at the WFS. After WFS, the WFS members felt more comfortable sharing the protection-related issues with their neighbors. Early marriage (48.5%) was the most shared incident that was shared with neighbors, followed by trafficking. On the other hand, domestic violence (40.5%)

was the issue that was discussed with informed the local leader, Majhi, CiC (Camp in charge), followed by early marriage.

Overall, one-fifth (20%) of the respondents felt worried all the time, while 6% of respondents often felt worried because of the trauma from the experience of systematic violence in Myanmar and due to the separation from families. They were worried about their life, the stress they have and the uncertainty to return to their country. The majority (56%) of respondents felt worried sometimes. When people feel stressed, most of the WFS members visit the WFS (82%) and participate in different recreational activities. There were 10% respondents mention that when they felt stress they slept, 3% respondents talked to their friends, while 5 % respondents did nothing. More than half of the WFS members (54%) reported that they feel mental disorders from stress. They were further asked the type of disorder did they face and the majority of them (59%) mentioned that they suffered from anxiety. Moreover, close to one-fourth of the respondents mentioned that they suffered from insomnia. Additionally, 9% of WFS members suffer from a decrease in appetite, while the same number of respondents suffer from depression.

Overall, 72% of respondents visited the WFS for their mental health concerns, while a handsome number of respondents (40%) went to the health post. Additionally, 10% of respondents mentioned that they talk to their friends and family members to remove mental disorders, while another 10% visited primary health centers.

The majority of the respondents (68%) mentioned that they visited psychological counselors for their mental health concerns. Psychological counseling and referral required the consent of the relevant woman, child, or the child's guardian before the information is provided to a third party other than AAR and the local cooperative body. The majority of the beneficiaries agreed to the fact that when someone was referred to a psychological counselor due to mental health concerns, consent was sought from the person. However, 16% of respondents did not agree with the fact.

In the WFS, different awareness-raising sessions or events were organized during different national or international days. The majority of the respondents could recall International Women's Day (70%), followed by World Children's Day (60%) and Human Rights Day (60%). There were 14% of respondents who could not recall any of the activities.

The majority of the participants mentioned that they had participated in different activities on different days. The major participation was noticed on International Women's Day where 80% of WFS members had participated. Moreover, 73.3% of WFS members participated in activities on Human Rights Day, and 70% of WFS members participated in activities on World Children's Day. The respondents were further probed about the type of activities they have participated in, the majority of the respondents mentioned 'Awareness activities on protection issues' (58.8%), followed by the cultural programs (44.1%) and sports (26.5%).

One of the important protections concerns among the women inside the Rohingya community is that they did not feel safe roaming on their own in their camp. Among the WFS members, one-third (32%) women mentioned that they felt safe to roam around, while 60% of WFS members did not feel safe to roam on their own.

WFS was considered as their favorite place, mentioned by 82% of WFS members, while 16% of members liked their home. There were 2% of respondents (n=1) who mentioned CFS (which was implemented in the previous project) as their favorite place. Those who were interviewed under the survey, all the WFS members considered WFS a safe and secured place.

Just less than half (46.0%) of the respondents mentioned that they participated in different recreational activities which included participation in games, handicrafts, or other cultural activities. Additionally, 38% of respondents mentioned that they received counseling services when required, followed by psychological first aid (28%) and 'lectures on different courses.

The WFS members were asked to rate their satisfaction on different attributes of WFS. It was found that except for one respondent, all the WFS members were satisfied with different attributes of woman-friendly space. The highest satisfaction was noted on 'Accessibility of the facility followed by 'the attitude of the staff. The respondents had access to the facility anytime and the staff of the WFS was very supportive. However, they were happy with the content of the activity or understandability of course contents but might need slight improvement in the content and made it easy for the participants. Also, they were happy with the awareness session, but there is marginal scope for improvement to make them happier.

The respondents were asked to express themselves what they understand by violence against women and girls. Over one-third of the respondents mentioned 'Physical violence', followed by psychological and emotional abuse (30%) and violence by husbands against wives (20%). Additionally, 10% of respondents mentioned 'rape / sexual assault' and 4% respondents mentioned 'forced marriage.'

There were some positive changes in the mindset of the WFS members, while they still considered that males should have dominance over women. It was good to see that 'People should be treated the same whether they are male, or female had a score more than 4 (4.46) and also it was positive to see a high score for the statement 'men should share the work around the house with women, such as washing dishes, cleaning and cooking (3.98). On the other hand, the women still perceive that they should obey their husband (3.98) and a man should have the final decision in all family matters (3.38). Even in the study, it was found that the women are visiting the WFS with due permission of their husbands or other male family members of their household. A high score in 'man must be tough' (4.44) and 'defending reputation, with force' (3.96) shows that the women still appreciated the masculinity of the men and accepted the male dominance in their society. The most worrying fact was that in case of 'tolerating violence by a woman' (3.36) and 'husband has the right to punish his wife' (3.26) still had a high score. The most vulnerable finding was that in the Rohingya community if a woman is raped, she is usually to blame for putting herself in that situation' which has a score of 3.09. The above findings show that there are still lots of opportunities to change the perception of women and also males should be get involved to improve the situation related to protection in the Rohingya community.

During the current pandemic situation, both the Rohingya community and WFS members received some information on COVID hygiene practices. All the respondents mentioned that they received information on COVID hygiene practices. Among them, all of them mentioned washing hands with soap or soap substitute for 20 seconds frequently (100%) followed by wearing a mask (86%), the two most important COVID hygiene practices. Among other COVID hygiene practices, respondents also recalled about cover coughs or sneeze properly with the elbow (58%) and refrain from gathering (46%).

## **Study findings for Component II: Household (HH) Community of AAR Project**

Under the above-mentioned project, repairing had been conducted to 28 toilets, 27 bathing spaces in the host community for Camps 25 and 27, through the local cooperative body. Under the study out of 28 repaired toilets, 20 toilets were selected randomly and visited for observation. Out of 20 toilets, 18 toilets were in good condition while in one case the latrine was broken by functional and in one case the latrine was not functional. In all the cases, the doors were fine, could be locked from inside, there was functional light. The major improvement area noted was there was no handwashing facility inside the latrine, and there was not sufficient space and provisions for female menstrual needs. In 10 cases there was no natural light inside the toilet.

In the survey, a total of 100 people were surveyed, among them 25 (25%) were male and 75 (75%) were female from the host community households. Among the female respondents, almost all (92%) were housewives, while 4% were housemaids. Among males, 28% were unskilled labor, followed by business (24%) and skilled labor (16%). There were 16% males who were unemployed.

Most of the respondents (81%) were married whereas only 02% were unmarried. Again, among the respondents 9% were widows, 5% separated and 3% divorced. It is also found that all the divorced and widowed respondents were female. The rate of separation is also found higher among the female respondents.

The majority (61%) of the respondents claimed themselves as the primary caregiver of the children below 05 years living in their household. It is also claimed by the respondents that among male respondents 64% are primary caregivers whereas among the female respondents 60% are the primary caregivers. Moreover, in terms of age, 47% of the respondents from the age range of 18-25 years are primary caregiver on the other hand, 38% are from the age range of 26-35 years and 15% are from the age range of above 35 years. In the questionnaire, there was no definition set for the primary caregiver, but it was noticed that a higher number of respondents considered themselves as the primary caregivers. It was also noted that the presence of primary caregivers was higher among relatively younger respondents.

Most (93%) of the respondents mentioned that they were using sanitary latrine whereas only 7% of them were using a pit latrine. It is also found that most of the respondents who young (between the age of 18 to 35 years) are using sanitary latrine more rather than that of the aged people (above 35 years).

Among the respondents, one-third (35%) mentioned regarding the present situation of the latrine that the latrine has been repaired within last one year, followed by latrine has been constructed within last one year (28%) and broken due to normal use, but functional (26%).

During the survey, the respondents were asked about the place of the latrine which they use most often. Most of them (92%) mentioned that the latrine is situated on its own plot, owned or rented. Again, 7% mentioned the place that it is situated on neighbor's plot and only 1% mentioned that it is situated on the communal area. Moreover, it is also found that 100% of the respondents from the age range 18 to 25 years; 84.2% from the age range 18 to 25 years; and 92% from the age range above 35 years have their latrine on their own plot, owned or rented.

The majority (35%) of the respondents mentioned that they always used the latrine when they need to defecate whereas only 0.2% mentioned that they used it most of the time. Moreover, in terms of gender, it is found that female (98.7%) used the latrine more frequently than that of the male (96%). The respondent who could not use the latrine all the time were asked the reason for not being able to use latrines and the following responses were collected from the respondents.

During the survey, the respondents were asked about the process of washing hands after defecation. Most of them (77%) mentioned that they have a hand washing facility outside the latrine whereas 28% mentioned that there is a hand washing facility inside the latrine and only 3% mentioned they washed their hands after returning home. In comparison to males, more females found to wash their hands outside the latrine. Moreover, it is also found that 64% of the respondents from the age range 18 to 25 years; 79% from the age range 26 to 35 years; and 85% from the age range above 35 years have the hand washing facility outside the latrine.

Most (91%) of the respondents mentioned that they had a safe feeling regarding privacy during using sanitation facilities. Again, it was found that all males (100%) had a safe feeling regarding privacy during using sanitation facilities whereas 88% of female respondents had the same feelings. Moreover, in terms of age, 92.9% of the respondents from the age range 18 to 25 years; 84.2% from the age range 26 to 35 years; and 97.1% from the age range above 35 years mentioned that they have privacy during using sanitation facilities.

Among the respondents, 53% completely agreed whereas only 1% completely disagreed with the statement. Moreover, 39% agreed that the sanitation facility had improved; 5% mentioned neither agree, nor disagree, and only 2% mentioned disagree. It is also found that more male respondents mentioned the improvement of the sanitation facility than that of the female respondents.

Among the household, 53% mentioned completely satisfied whereas only 1% mentioned completely dissatisfied. Moreover, 38% satisfied with the current sanitation facility; 6% mentioned neither satisfied nor dissatisfied, and only 2% mentioned dissatisfaction. It is also found that males respondents were more satisfied with the current sanitation facility than female respondents.

The respondents were asked about the place of taking bath. The majority (39%) of the respondents mentioned that they have a bathing cubicle at the household whereas only 1% mentioned that they took bath in an open space at their household. Again, 34% mentioned space near the handpump; 15% mentioned bathing cubicle constructed by NGOs; 7% mentioned a bathing cubicle outside the household, and 4% mentioned pond as their bathing place. It is also found that most of the male respondents (48%) had a bathing cubicle in the household whereas most of the female respondents (41.3%) had to take bath in a space near the handpump.

Among the respondents, the majority (36%) mentioned regarding the present situation of the bathing space that the bathing space has been repaired within last one year. Again, 29% mentioned the bathing space is broken due to normal use, but functional; 24% mentioned the bathing space has been constructed within last one; 4% mentioned they took bath in an open space, and 3% mentioned bathing space is broken due to normal use, and not functional, and bathing space is old, but functional respectively.

Respondents were asked a question to understand their feeling regarding privacy during using bathing facilities. Most (70%) of the respondents mentioned that they had privacy during using bathing facilities. Again, it is found that females (72%) perceived to have more privacy during using bathing facilities than



that of the male respondents (64%). Moreover, in terms of age, 78.6% of the respondents from the age range 18 to 25 years; 76.3% from the age range 26 to 35 years; and 55.9% from the age range above 35 years mentioned that they have privacy during using bathing facilities. So, it can be stated that the young respondents have more privacy than the aged respondents.

During the survey, the respondents were asked whether they had seen any improvement with the bathing cubicles in the respondents' community in the year 2000-2021. They were asked to rate a statement regarding improvement of the bathing cubicle. It was recorded on a 5-point scale where 5 means the respondents completely agree that the bathing cubicle had been improved in the last year while 1 means the bathing cubicle had not improved at all. Among the respondents, 56% mentioned agreeing whereas only 3% mentioned completely disagree. Moreover, 32% completely agreed that the bathing cubicle had improved; 3% mentioned neither agree, nor disagree, and 6% mentioned disagree. It is also found that both the male and the female respondents mentioned the improvement of the bathing cubicle similarly, but 8% of females disagreed with the statement while 12% of males completely disagreed with this.

The respondents were also asked about their level of satisfaction with the current bathing cubicle in their community. Among the respondents, 52% mentioned satisfied whereas only 4% mentioned completely dissatisfied. Moreover, 34% completely satisfied with the current bathing cubicle; 2% mentioned neither satisfied, nor dissatisfied; and 8% mentioned dissatisfied. It is also found that female respondents were more satisfied with the current bathing cubicle than that of the male respondents. The following graph shows that the female respondents were more satisfied with the bathing cubicles and 16% of male respondents (n=5) were highly dissatisfied with the facility.

The respondents were asked during the survey to understand whether they had heard the word COVID or coronavirus. All the respondents mentioned affirmatively that they had heard the word COVID or coronavirus. During the survey, the respondents were asked about the hygiene practices that they followed during the situation of the corona. Among the respondents, almost all (99%) mentioned that they washed their hands with soap or soap substitute for 20 seconds frequently, while 98% mentioned they refrained themselves from gathering; 53% mentioned wearing a mask, 50% stayed at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing); 33% washed their hands with soap or soap substitute for 20 seconds after coughs or sneeze, and 21% had minimized physical contact. Moreover, 17% mentioned that they covered coughs or sneeze properly with the elbow; 13% washed their hands with soap or soap substitute for 20 seconds after attending a patient; 12% avoided touch face with unsensitized hands.

## Study findings for Component II: Students

During the survey, the respondents were asked about their level of education. More than half (54.8%) of the respondents were from secondary/ Dhakhil level (class 6-10) whereas 45.2% are from primary/ Ibtadai level (class 1 -5). Among the male students, 56.9% were primary/ Ibtadai level students while among female students' majority (66%) were secondary/ Dhakhil level students. During the survey, an effort was made to ensure that at least 30 female students would have started menstruation during the interview, hence some senior level female students were included in the survey.

Apart from this project, students often learn different health-related topics from their school. Hence, the respondents were asked about the types of health-related knowledge that they learned from the School/Madrasha. Among the respondents, the majority (81.7%) mentioned that they learned about regular hand wash, followed by use of soap (58.7%), use of clean water (53.8%), self-care (cleanliness) (51%), and use of sanitary latrine (36.5%). Moreover, 13.5% mentioned nutrition; 5.8% childcare; 10.6% mentioned others (drugs; tobacco; good touch-bad touch; early pregnancy; and puberty; and 8.7% mentioned child marriage; and regular physical exercise respectively.

The respondents were further asked about their participation in any hygiene awareness activities in the last year. All the respondents mentioned affirmatively that they had participated in at least one hygiene awareness activity in the last year. They were asked about the types of knowledge learned from the hygiene awareness activities. Among the respondents, the majority (87.5%) mentioned that they learned about public health whereas only 9.6% mentioned environmental health. Again, 53.8% mentioned personal hygiene; 46.2% latrine hygiene and environmental health; 38.5% food hygiene; and 32.7% mentioned the use of sanitary latrine. Moreover, 13.5% mentioned nutrition; 5.8% childcare; 10.6% mentioned covid-19 and hand-washing; 21.2% menstrual hygiene, and 13.5% mentioned hygiene of using water and water-borne acute diarrhea.

The respondents were asked about the frequency of wearing slipper during the use of toilet. All the respondents mentioned that they always wear slipper during the use of toilet.

The surveyed students were asked about the times in the day when they wash their hands. Most of them (94.2%) mentioned that they washed their hand before eating/ before meals, which was the same for both males (94.1%) and females (94.3%). Again, 68.3% mentioned they washed hands after defecating, which was relatively low among males (62.7%) than the females (73.6%). More than half male (52.9%) and female (50.9%) students mentioned that they washed their hands after eating. While mentioning hand washing practice with specifying the meal type, there was a substantial gap noticed between male and female students. Close to half (47.2%) of the female students washed their hands before touching foods, which was less than 20% among males. Culturally in Bangladesh, women perform the household chores, and in 20% to 35% of cases they washed their hands after such activities, that includes After cleaning the house (34%), after sweeping (28.3%), and after cooking (22.6%).

In the project, it was promoted among students to wash their both hands during different critical periods. During the survey, if someone did not mention both hands, the enumerators promoted to wash both hands during different critical times. Majority of the cases the respondents washed both hands, however, a significant number of students mentioned that they used a single hand. Overall, 38% of surveyed students washed their right hands and 1% washed their left hands. Before breakfast, lunch, and dinner 31%, 30%, and 36% of students respectively washed their right hands, while the remaining respondents washed both hands. Just over one-fourth of respondents (27%) washed their left hand after defecation,

while 1% of respondents washed their right hand only. Overall, 72% of students washed both hands after defecation. moreover, 36% of students washed their right hand after touching food, which was 33% after eating.

During the survey, the respondents were asked about the ways of washing hands at home. Most of them (49%) mentioned that they washed their hands with water and bar soap whereas 1.9% mentioned with water only. Again, 47.1% mentioned they washed their hands with water and soapy water; 22.1% mentioned water and liquid soap, and 4.8% mentioned water and powder detergent. It is also found that most of the female (58.3%) respondents used water and bar soap to wash their hands but most of the male (56.9%) respondents used water and soapy water to wash their hands. Moreover, it is also found that most (46.5%) of the respondents from the age range 10 to 12 years; and most (54.5%) of the respondents from the age range above 15 years used water and bar soap to wash their hands but most (63%) from the age range 13 to 14 years used water and soapy water to wash their hands.

The respondents were asked about types of hand washing facilities at home. Less than half (47.1%) of the respondents mentioned that they are using a water source – handpump. The rate was much higher among male students (62.7%) than female students (32.1%). Furthermore, 24% mentioned containers with cups (bucket/bowl/jerrycan with cup) which was higher among females (32.1%) than males (15.7%). Moreover, 20.2% mentioned water source – tap; 8.7% mentioned water tank with a tap; 7.7% mentioned buckets with a tap in the bottom; 4.8% mentioned water source – (stream, river, or pond); and 2.9% mentioned pitcher with a tap as the types of hand washing facility at their home.

The American Dental Association recommends brushing your teeth twice a day with fluoride toothpaste for two minutes each time. When someone brushes their teeth, they help remove food and plaque — a sticky white film that forms on their teeth and contains bacteria. The majority (76%) of the respondents mentioned that they washed their teeth twice a day in the past week whereas 24% mentioned that they washed their teeth once a day. It is also found that most of the male (72.5%) respondents and most of the female (79.2%) respondents washed their teeth twice a day.

During the survey, the respondents were asked about the materials they used to brush their teeth. Most of them (67.3%) mentioned that they used paste to brush their teeth whereas only 1.9% mentioned meswak (branch of a tree). Again, 22.1% mentioned coal, and 19.2% mentioned tooth powder. It is also found that most of the female (62.3%) respondents and most of the male (72.3%) respondents used paste to brush their teeth.

The majority (57.7%) of the respondents mentioned that they took a shower 4-6 days a week whereas 42.3% mentioned that they took shower every day. It is also found that males took showers more frequently than females as 45.1% of male students took showers every day, which was 39.6% among females. There is a possibility that male students spend more time outside the home and were involved in outdoor activities, hence they took shower more frequently.

Most of the respondents (94.2%) mentioned that they cut their nails once a week whereas 5.8% mentioned that they cut their nails once every 15 days. It is also found that males cut their nails more frequently than female students.

The respondents were asked about their opinion regarding the steps that should be taken to have safe food. The majority (68.3%) of the respondents mentioned washing hand before eating. Again, 65.4% mentioned washing hands before touching food; 46.2% mentioned cleaning food with clean water before

eating or cooking; 43.3% mentioned using clean crockeries while eating food; 35.6% mentioned not keeping any food uncovered and 7.7% mentioned using clean equipment to cut or process food. It is also found that most of the male respondents (68.6%) mentioned washing hands before eating whereas most of the female respondents (73.6%) mentioned washing hands before touching food.

Generally, students were adolescents, and they did not go to any place for their healthcare or treatment, rather they were taken to a place by their caregivers. The respondents were asked about the places they were taken when they had any physical health concerns. Most (58.7%) of the respondents mentioned that they visited the doctor's chamber when they have any physical health concerns. Again, 27.9% mentioned pharmacy; 12.5% mentioned Union Health and family welfare clinic, and 8.7% mentioned District Sadar Hospital and NGO health center/NGO clinic/NGO hospital respectively. It was found that more males were taken to doctor's chamber 66.7%, pharmacy (35.3%), and union health and family welfare clinic than females. None of the females were taken to Union Health and family welfare clinic.

All the respondents mentioned affirmatively that they had heard the word COVID or coronavirus. Among the respondents, almost all the students (93.3%) mentioned that they washed their hands with soap or soap substitute for 20 seconds frequently, followed by refraining themselves from gathering (92.3%). Other practices were not very regular as only 32.7% mentioned wearing a mask, 29.8% mentioned staying at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing); 15.4% mentioned washing their hands with soap or soap substitute for 20 seconds after coughs or sneeze, and 11.5% mentioned about minimizing physical contact. Less number of female respondents (17%) mentioned wearing masks, while it was mentioned by half of the male respondents (49%). Apart from washing hands for 20 seconds or social distancing, the students less than 12 years old rarely could mention other hygiene practices.

For those who had not started menstruation by the survey, 28.3% of the respondents did not know what menstruation is. This is a worrying fact since the interviewed respondents were more than 10 years old and soon, they would be started menstruation. However, those who have started menstruation, everybody received information on the topic. There were only 5.3% of females who did not start menstruating but received information on the topic. Most of the students (81.6%) mentioned that they use disposable sanitary pads whereas 13.2% of female students mentioned that they use other cotton materials to manage their menstruation.

The female respondents were asked about their access to the items that they use to manage their menstruation. Almost all the respondents (94.4%) mentioned that they had the access to the items that they use to manage their menstruation whereas 5.6% mentioned that they didn't have access.

Among the respondents, 77.8% mentioned affirmatively that they were very satisfied whereas 2.8% mentioned negatively that they were somewhat dissatisfied. Again, 19.4% mentioned affirmatively that they were somewhat satisfied with the items that they use to manage menstruation.

## **Evaluation based on CHS.**

### **CHS1: Communities and people affected by crisis receive assistance appropriate to their needs.**

#### **Component I: Protection**

The registered women at WFS found the project relevant for them from two points of view, one is related to protection and another is COVID hygiene-related awareness session. In both cases, the beneficiaries found the project relevant to them. The women felt stressed staying in under a small shed. They did not feel comfortable roaming inside the camp and due to COVID 19 situation, there was some restriction on movement. Even due to the violence they faced in their own country (Myanmar) they are traumatized. They did not have any option to release their stress. When they joined the WFS, they participated in different awareness sessions, which helped them to gain more confidence. Moreover, they received training on different handicrafts and able to produce handicrafts on their own. Under the work therapy, they produced masks which they made and used themselves.

The WFS members participated in different awareness sessions, which include early marriage, domestic violence, and trafficking. They were more aware of their rights and also learned how to protect themselves. They were aware of the negative impact of child marriage, the definition of trafficking, the reason for trafficking, and how to protect themselves from trafficking. It gave them the opportunity to discuss the protection-related concerns with their intimate partners and secured their rights. They also communicate with their children about tracking and made them alert from going to unknown places or meeting unknown people.

Those who participated in the COVID hygiene practice awareness session also found the project relevant to them. After participating in the awareness session, they changed their hygiene practices based on the information they received. The changes included maintaining social distance, keeping clean, washing hands with soap / or sanitize after returning home, using masks, caring for children, covering food.

#### **Component II: WASH**

The WASH project was also found relevant considering the WASH situation of the area. However, not all the households interviewed did use the repaired WASH facilities. There was light at all the WASH facilities, but in the qualitative survey, some respondents mentioned that the WASH facility they used did not have light inside the latrine. In the survey, it was also observed that the majority of the women use the hand pump to take a bath. We tried to validate the information and found that the bathing facilities were for community people or there was one bathing cubicle for both males and females. The females do not feel very comfortable using the community bathing cubicle. Moreover, they need to wash their clothes after taking the bath, which they feel more comfortable at the hand pump than in the bathing facility.

The host community household acknowledged that they received information on COVID 19 hygiene practices, and these were very useful for them. From different media, they received similar information, but they did not understand the importance of COVID 19 hygiene practices. They became more aware and alert on the issue.

The students also agreed that the information which they received on Personal Hygiene, COVID-19 and Handwashing, Water Hygiene and acute Watery Diarrhea (AWD), Sanitation Hygiene, Environmental Hygiene and Food Hygiene from NGO Forum was relevant to them. They believed this would be beneficial for them. They would use this information in their life. They have also received information related to

COVID 19 hygiene practices. They learned that they should not go out unless necessary, not to touch their faces and/or nose when outdoor, they need to wear masks whenever they go out and keeping their hands clean by washing frequently. They find these safety measures easy to apply. The girls mentioned that they received information on menstrual hygiene (MHM) which was new to them.

**CHS 2: Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.**

### **Component I: Protection**

The surveys found that the project was implemented in a timely manner. When the project was implemented, the prevalence of COVID was seen and there were restrictions on movement among the people inside the camp. Due to the restriction on the movement of people, men were forced to stay at home. As a result, domestic violence / intimate partner violence increased during this time. Moreover, the aid of different NGOs was reduced due to the restriction imposed by the authority during the COVID situation, many Rohingya males lost the jobs they used to do for the NGOs. As a result, they were depressed, and the intimate partner violence had increased. Furthermore, when the restriction on movement was imposed, the parents of girls became worried about the security of their female children. Hence the tendency of child marriage also increased.

In this situation, some of the women registered themselves as a member of WFS. They learned about domestic violence and how to tackle them. In some cases, the survivor was getting appropriate psychosocial support and referral services, able to spend some time with peer groups, and participating in different activities, which help them to gain mental stability. Also, they learned about the negative impact of child marriage. Hence, when they saw any incidence of child marriage, they used to share the issues with WFS staff. The WFS authority takes necessary action to stop child marriage. It was also found that, due to restriction of movement, the children could not go to the learning centers, but it was difficult to control them. Hence some women reported that children visited different places where they were supposed not to go and became victims of trafficking or were sexually abused. From the project the mothers became more aware and trying to keep in touch with their children more than they used to do. Moreover, advised their children not to go far or not to visit a place alone.

There were some limitations also identified from the current project. Due to the spread of COVID 19, the Learning Centers (LCs) were closed, and the children had nothing to do. During the period, the registration of CFS was also closed. So, the children had no activities to do and they became restless. They visited some places which were not safe for them. After the spread of COVID 19, there was some increase in child marriage and missing children. Child marriage was controlled with eh support of CiC and site management, but people among the Rohingya community were worried about kidnapping or trafficking. Hence, the local people highly recommended opening the CFS and increase the capacity of CFS.

## **Component II: WASH**

Under CHS 2, the project can be divided into three parts. The first part includes repairing the WASH facilities. These types of activities had a regular demand and always had a need for repairing the WASH facilities. The second part included awareness activities among students and teachers. The project was implemented in a remote location and access to information was not very common among the general population in the area. Most of the beneficiaries marked the information as new and much needed. The third part of the project included an awareness-raising session on COVID 19 hygiene practices. Though the information was received by the beneficiaries from different mass media, however, they failed to understand the importance of hygiene practices. Hence the information was considered timely and was delivered at the right time. Moreover, the project distributed handwashing devices along with soap, which was very helpful during the COVID 19 pandemic. It reminded them to wash their hands and maintain COVID 19 hygiene practice.

**CHS 3: Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action.**

## **Component I: Protection**

By reviewing project documents and conducting the survey among the beneficiaries, project staff, and local key stakeholders, it was clearly identified that the beneficiaries were aware of their rights, knew what to do, and were more confident. They were more aware of different topics related to protection, which they shared with their husbands. The WFS members were found to be more resilient after participating in the awareness sessions or activities at WFS. Before the implementation of the project, they did not feel comfortable going to the CiC to lodge a complaint or to share any incident related to protection. After the implementation of the project, they were more confident to share the issues with the WFS project staff and they were sure that necessary actions would be taken.

Moreover, the people staying inside the camp felt more resilient to fight against the corona virus. They participated in different awareness sessions and learned about hygiene practices to protect themselves from the virus. They have changed their hygiene behavior, washed their hands with soap for 20 seconds, wear masks, sneeze by covering their face with their elbow.

The project identified some negative issues as well. As per one of the beneficiaries and the project staff, it was found that the males did not have access to the WFS. Hence the males were suspicious about the activities inside the WFS. They were not very much interested to allow their wives or daughters to visit or spend time at the WFS. To resolve the issue, in some cases the project staff had to allow the males to inspect the WFS when there was no presence of female registered members. They were convinced, but still, some of the males were not very optimistic about WFS. Moreover, the males wanted their daughters or wives to stay at home and do the household chores. Hence the project needs to include more males, highlight the project features or components and explain the benefit of the project. Though the project planned outreach sessions including males as stated in project plan, but could not implement the session due to COVID-19 outbreak. The project included males for GBV awareness session conducted in CFS in small groups. However, considering the project need, it was recommended to involve males on a broader scale.

## **Component II: WASH**

The information disseminated related to water, sanitation, and hygiene (WASH) would help to strengthen communities and local capacities. It is believed that the local people will follow the hygiene practice in the future. Most importantly, students were considered as the future generation, hence the topic they learned would use in the future. The girls in the community would not miss their classes due to menstruation. Even in their professional life, they would be able to better manage their MHM practices. The teachers who have learned the information would disseminate those among their students. Before the workshop, the teachers never considered MHM practice in their policy or plan. They became aware of the rights of girls related to MHM and promised to keep this in mind during their future plan. However, no one in the host community thought that the project contributed to ease the tension between host communities and Myanmar refugees because their influx has a negative impact on the social environment as well as on the country's economy. Even they considered some restriction on their movement since they need to carry their NID to move from one location to another.

**CHS4: Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them.**

## **Component I: Protection**

The project team always appreciates the opinions of the beneficiaries. They try to understand the challenges they had faced in the past and the support they require. The WFS included the implementation of lectures and events. The content of activities, courses were reviewed by asking questions in an interview format to determine user needs. Based on their need the content of activities, courses were redesigned. Also, from the interview, the members who needed psychological counseling and/or referral were separated. The consent of the relevant woman, child, or the child's guardian was obtained before the information was provided to a third party other than AAR and the local cooperative body for the psychological support and/or referral as required. In the event of a referral, efforts were made to ensure that the relevant woman, child, or the child's guardian were in charge of making decisions at every stage including information provision and access to medical services.

The project was very much aware of the language barriers, hence recruited the case manager or case worker who can communicate in the language of the refugees, which includes local language or Chittagong dialect. The project recruited volunteers from the Rohingya community, hence they were very much familiar with the culture and language of the community. They also understand the needs of the beneficiaries very well.

## **Component II: WASH**

During the implementation of the project, the implementation team visited different locations. NGO forum talked to the local community people, identified the WASH facilities which required repairing services, and prepared a list. They shared the list with the DPHE and UNO and received recommendations from the local authority.



The community people knew their rights very well and they were free to express their opinion. They guided the project team to identify the WASH facilities that needed to be repaired. The most important part was that the female students considered MHM practice as one of their basic rights and they were interested to discuss it with their parents and teachers in the future. The teachers who have received information on MHM have agreed that there were some topics very new to them and the workshops have helped them to enhance their knowledge on the topic. The teachers promised that they would disseminate the information they learned among the students, which would ensure better access to information on MHM among the students.

**CHS5: Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.**

The project followed the structured process for CRM which included the following.

- **Phone call (Hotline):** Every day, from 09.00 AM to 05.00 PM (except Friday, Saturday and others govt. Holidays), this number was open and handled by authorized personnel from AAR Japan and s/he was handling and receiving the complaints and feedback from the community and refer to relevant person who handled this. If s/he was not available, other staff answered the phone. The Hotline information and number was shown in sticker of each facility and was notified to beneficiaries.
- **Complaint box:** Each WFS/CFS had a complaint box with two keys. The box was handled by authorized personnel from NGO Forum. It was opened bi-weekly. Monitoring officer of NGO Forum and Protection Assistant, AAR Japan, opened the box along with at least 1 WFS/CFS staff as witnesses. If these staff were not available, other staff were present on behalf of her/hm.
- **Face to Face:** Verbal feedbacks and complaints were received by any staff of NGO Forum and AAR Japan to whom the beneficiaries had access to and trusts upon. As the children and women had less access to phones and difficulties in writing, many complaints could be communicated verbally. Any staff who should listened carefully, encouraged the person, and showed understanding of the situation.

**CHS6: Communities and people affected by crisis receive coordinated, complementary assistance.**

The project included stakeholders with different roles and responsibilities. To perform their roles and responsibilities, it requires different skill sets. New staff was recruited based on some specific criteria that best match the project requirement. The roles and responsibilities are clearly defined, and all the staff was accountable for their responsibility. The case managers, caseworkers, and volunteers were recruited following the appropriate recruitment process. The project staff had gone through some training and orientation programs so that they could serve the beneficiaries as per their requirement.

The project had a provision of referral service as and when required. Some of the beneficiaries required professional services by mental health and psychosocial support (MHPSS). Also, some beneficiaries required medical support or services. Hence, AAR and NGO Forum requires regular coordination with them to refer the beneficiaries who required referral services.

There were some other organizations that were also implementing similar projects inside the camp. In each camp, there was a focal person who divides the area of the project for each NGO. The implementation partners need to follow the service map assigned by the focal agency and implementation agencies need to follow the service map. AAR and NGO Forum were successfully implementing the project following the service map.

### **Component II: WASH**

In the host community when AAR and NGO Forum wanted to implement the project, they visited the location and identified the locations where aid was required. Moreover, they visited different schools, talked to the teachers, inspected the WASH facilities, and selected the schools and WASH facilities under the project. When the COVID 19 pandemic started and the health risk increased, the project changed its plan and include COVID 19 hygiene practice both for households and schools. Moreover, since the schools were closed, the project tried to reach the students at the household level. It was also found that the implementation partners talked to government authorities during their plan and sought their permission. Once the project was completed, all the WASH facilities were handed over to the DPHE, school authorities, and respective households.

**CHS7: Communities and people affected by crisis can expect delivery of improved assistance as organizations learn from experience and reflection.**

### **Component I: Protection**

This is the 3rd phase of the project. The implementation partners gained enormous experience from their previous phases and tried to implement their learning in the current project. Based on their experience they had a plan to increase the number of registered members for WFS and CFS. Unfortunately, due to COVID 19 pandemic, they could not increase the registered members for CFS, but the project has increased the number of registered members for WFS. Moreover, the implementation team is improving their events and lectures based on their previous learning from their project.

### **Component II: WASH**

The project was also conducted in the past and the project team had enormous experience in the WASH sector. The project team tried to implement their past learning into the current project to ensure improved support and assistance. During the implementation of past projects, it was identified that it was difficult to conduct the awareness session for males and females in mass groups. Hence the project was designed in a way that one member from one household participates in the session so that the participants share their learnings with other family members.

### **Component I: Protection**

The project recruited the staff (case managers and caseworkers) with the qualification that the person had the knowledge on protection and are very much familiar with the norms of the Rohingya community. The volunteers were recruited from the Rohingya community who understood the needs of the beneficiaries very well and helped to design the program accordingly. All the volunteers went through an orientation program, which focused on the easiest way that would be convenient for them to understand.

Following that, the session was designed lecture methods, demo sessions, question-answer, and at the end feedback receiving to ensure the learning.

The psychological counselors recruited for the project, all of them were with psychological backgrounds and had previous experience of conducting counseling. Also, they were very much familiar with the local language and Rohingya culture. Moreover, they went through some extensive training before launching the project. The project management sought feedback from the beneficiaries who available for the psychological counseling service. There were some amendments made based on the feedback from the beneficiaries.

### **Component II: WASH**

As it was mentioned earlier, the NGO forum had enormous experience in the WASH sector. Hence while developing the materials the project team utilized their experience to make the facilities durable and cost-efficient. To conduct training among the recruited volunteers, the project required some experienced resources and NGO Forum supported a lot by engaging their experienced resources in this project.

**CHS 9: Communities and people affected by crisis can expect that the organizations assisting them are managing resources effectively, efficiently, and ethically.**

### **Component I: Protection**

AAR and NGO Forum were accountable to JPF regarding spending the budget. The project attrition rate was 89%. AAR has to spend and manage their resource wisely to achieve maximum output. The final audit was not conducted before the survey, but AAR and NGO Forum maintained all the documentation for the audit purpose and future reference. However, AAR perceived that if they had received more budget or resources, they could have served more beneficiaries.

### **Component II: WASH**

The resources were utilized efficiently. There were some changes made in the project plan and AAR and NGO forum tried to accommodate it as per the project budget. There were some savings from the project budget, the project team included some additional activities with due permission from JPF. NGO forum maintained proper documentation on all the expenditure so that when the audit team conducted the audit, the NGO forum could share the evidence against their expenditure.

### **Achievement of project outputs and outcomes against indicators in the log frame**

#### **Component I: Protection**

As per the log frame, the project targeted to have 400 women registered in WFS and 200 children registered in CFS. However, due to COVID 19, there was no children registered in CFS. There were 184 registered members at the WFS. The project targeted that, 80% member would acknowledge that WFS is a safe and secure place in the camp. The survey found that all the surveyed respondents marked WFS as a safe place and 82% surveyed respondents marked WFS as their favorite place.

The had a target that there would be improvement of understanding of WFS users for appropriate responses to human trafficking, domestic violence and early marriage. As per the project findings,

- 53.7% respondents *completely agreed*, and 41.5% respondents *agreed* that their knowledge on trafficking has been increased.
- 48.9% respondents *completely agreed*, and 51.1% respondents *agreed* that their knowledge on early marriage has been increased.
- 52.3% respondents *completely agreed*, and 47.7% respondents *agreed* that their knowledge on domestic violence has been increased.

Those who have improved knowledge on the topics, knew their responsibility and was able to response to protection related issues.

At the beginning of the project, there was a target set that 70% WFS users would be satisfied at the end of the project. The survey identified that 98% respondents were highly satisfied or satisfied on different attributes of WFS. There was a provision of psychosocial support or referral for women and children in need and it was aimed that all those who will be needed will be referred. At the end of the survey, 68% members of WFS sought psychosocial support from the WFS and all (100%) of them received psychosocial support or referral for women and children as per their need.

The project included information provision for 700 households through outreach activities. The project reached 1053 households on awareness for COVID-19 hygiene practice and also received some information on protection.

Additionally, there was a Provision of case management under the project, where the project targeted to: 10 GBV cases, 40 other cases. As of February 28th, 2021 there were 40 case managements provided under the project.

## **Component II: WASH**

Under component II, AAR repaired 55 latrines and bathing cubicles with an aim that every month, 95% of the WASH facilities would be in usable condition. During the survey it was found that 96% latrines and 97% bathing cubicles were functional. Moreover, there was a target that 95% of the users of latrines and bathing cubicles would remain satisfied with the facility. During the survey, it was found that 53% respondents were completely satisfied, and 38% respondents were satisfied (total 91%) with the latrines and bathing cubicles.

## Recommendation

- The main component of the project was implemented in reactive nature. Considering the protection related situation in the camp, the program should be proactive, where some volunteers need to visit the households at the camp area, talk to potential survivors and recruit them as a member of WFS.
- The scale of the project needs to be increased to make the project more effective. Moreover, the project can follow a collective approach by forming partnerships with other implementation NGOs in the camp to achieve a larger objective.
- To make the project more relevant to the refugees and appropriate to their needs, it is strongly recommended to include males under the protection component.
- It is recommended to open the CFS and increase the capacity of CFS when the local administrators give permission.
- The religious leaders should be trained and given the role of awareness program among the community people.
- Some sessions can be conducted through video demonstration with real life example. The community people themselves can take part in the street play, which would help to the beneficiaries to entertained and also would be able to reach higher number of people.
- The protection and WASH components of the project can be integrated. If through the WFS the beneficiaries can be trained on making sanitary napkin, or soap, these items can be distributed in the areas where WASH project is being implemented.
- In the WASH project at the host community, the project was implemented as per a pre-decided plan and need assessment conducted on some selected plan only. If the project team conducts the need assessment first and prepare the plan based on the result of the need assessment report, it would serve the purpose of the community people in a better way.
- It is recommended to place or construct handwashing devices/facilities inside or just outside the latrines, so that it works as a reminder for the people.

# 1. Introduction

## 1.1 Project Background

The Japan Platform (hereinafter referred to as "JPF") is an international emergency humanitarian aid organization which offers the most effective and prompt emergency aid in response to humanitarian needs, focusing on issues of refugees and natural disasters. JPF conducts such aid through a tripartite cooperation system where NGOs, business communities, and the government of Japan work in close cooperation, based on equal partnership, and making the most of the respective sectors' characteristics and resources.

JPF serves as an intermediary support organization providing various types of assistance to member NGOs in Japan to deliver quick and comprehensive aid on their own. JPF has supported aid activities of 44 member NGOs, each with its own set of diverse strengths. It has delivered humanitarian assistance to 55 nations and regions about 1,500 projects, with a total financial contribution of 60 billion yen. JPF has built a strong reputation based on trust by promoting cooperation among private sectors and NGOs and by accurately reporting all of its activities. There are seven projects implemented under JPF scheme in Cox's Bazar as of March 2021 which are being funded by JPF and implemented by member NGOs in Cox's Bazar and among them four (04) were selected for TPM exercise. Protection Support for Myanmar Refugees and WASH support for Host Communities is one of the four projects being implemented by Association for Aid and Relief, Japan (AAR, specified non-profit corporation) for the period of March 31, 2020 to February 28, 2021 (335 days) with an allocated budget of 93,947,253 yens from JPF grant.

To this end, JPF has appointed Org-Quest Research Limited (hereinafter referred to as "OrQuest") as a Third-Party Monitor (TPM) entity to provide evaluation services for the Protection Support for Myanmar Refugees and WASH support for Host Communities.

## 1.2 Overview of the Project

The broad objective of the project ***Protection Support for Myanmar Refugees and WASH support for Host Communities*** is to improve the protection environment in refugee camps, especially for women and children, along with improving the sustainable water, sanitation and hygiene (WASH) environment in the host communities. In this project, two components are being implemented for refugees and the host community. Firstly, two Woman Friendly Spaces (WFS) and two Child Friendly Spaces (CFS) are being operated in Camps 25 and 27 for Myanmar refugees in Cox's Bazar district. These facilities are expected to provide courses on protection risks, recreational activities for stress care, and psychosocial support by psychological counselors. In addition, information is being offered and assessment are being performed through outreach activities based at the two WFS facilities, and support according to individual needs are being provided after identifying the necessity of support. Secondly, monitoring of WASH facilities and their maintenance including repair are being performed in the host community in Teknaf Upazila in order to keep the facilities in a sustainable state of use, and hygiene awareness-raising activities are being conducted in schools in order to encourage changes in sanitary practices for safer and healthier living.

### **1.3 Project Objectives**

The objective of the project is to improve the protection environment in refugee camps, especially for women and children, along with improving the sustainable water, sanitation and hygiene (WASH) environment in the host communities.

### **1.4 Objective of evaluation**

The broad objective of the evaluation is to capture information, verify activities and analyze data on this project activities. JPF will use the outcome of this evaluation to improve the current and future projects and programme. The evaluation reports would be made available to public as a part of JPF's activity to ensure accountability to the donor and public.

The specific objectives of evaluation are:

- To verify actual outputs and if possible, outcomes of the project with the available data
- To verify that the humanitarian principles and standards including Core Humanitarian Standards (CHS) are respected.
- To understand the beneficiary satisfaction
- To provide feedback and recommendations to the future projects and programme improvement for both JPF and member NGOs
- To provide contextual information on the target sec.

## 2. Evaluation Overview.

### 2.1 Evaluation Design

This study applied both quantitative and qualitative approaches to data collection. Quantitative survey data will be collected from individuals through structured questionnaires using Computer Assisted Personal Interview (CAPI) technique. Qualitative data was collected through IDI and KII.

Once the project was awarded to OrQuest, JPF organized a kick-off meeting with OrQuest to finalize the methodology, discuss the development of study tools, and preparation of inception report. Based on the documents received from JPF, OrQuest prepared study tools and inception report for the evaluation and shared with JPF. After that, JPF organized an inception meeting with OrQuest and the project implementing NGO to discuss the details of the evaluation objectives, scope, targets, data processing and analyzing, allocated team, and reporting. Due to the outbreak of COVID-19 worldwide, most of the discussions were undertaken online. Based on the discussion in the inception meeting, the study methodology and sample size were revised from the project. To limit the physical movement inside the camps and in the host community locations, to reduce interaction with beneficiaries and other stakeholders, the sample size of the project was reduced.

### 2.2 Geographical coverage:

As mentioned earlier, the project has two components. Component 1 of the project was implemented in Camp 25 & 27 of Rohingya refugee camps in Teknaf upazila in Cox's Bazar district. Four schools (1 school and three madrasas) and specific areas in host community in Teknaf upazila were covered under Component 2.

### 2.3 Method of data collection

The performance evaluation study of the project was conducted using both primary and secondary research. Primary data collection included quantitative and qualitative approaches. A quantitative approach was used where population size is large enough (100+) to quantify the results. If population size was small or in-depth information was required, a qualitative approach was adopted. While the quantitative study was carried out by using face-to-face interview technique with the help of structured questionnaires using Computer Assisted Personal Interview (CAPI) technique, while the qualitative study was conducted through IDI and KII. Secondary data collection included a review of all project documents including project proposal, amendment documents, copies of project progress reports and past M&E evaluations, relevant baseline/mid-term/end line assessments, and project checklist for progress monitoring activities. Considering the Covid 19 situation, all necessary safeguarding protocols will be taken to ensure the safety of researchers, enumerators, and respondents.



## 2.4 Our Approach to TPM

Defining units of analysis and framework for synthesis of information to be collected based on the RFP objectives in the table below. The framework will be used to evaluate all four projects.

- Communities and people affected by crisis receive assistance appropriate and relevant to their needs.
- **Quality Criterion: Humanitarian response is appropriate and relevant.**
- Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.
- **Quality Criterion: Humanitarian response is effective and timely.**
- Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action.
- **Quality Criterion: Humanitarian response strengthens local capacities and avoids negative effects.**
- Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them.
- **Quality Criterion: Humanitarian response is based on communication, participation and feedback.**
- Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.
- **Quality Criterion: Complaints are welcomed and addressed.**
- Communities and people affected by crisis receive coordinated, complementary assistance.
- **Quality Criterion: Humanitarian response is coordinated and complementary.**
- Communities and people affected by crisis can expect delivery of improved assistance as organizations learn from experience and reflection.
- **Quality Criterion: Humanitarian actors continuously learn and improve.**
- Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers.
- **Quality Criterion: Staff are supported to do their job effectively and are treated fairly and equitably.**
- Communities and people affected by crisis can expect that the organizations assisting them are managing resources effectively, efficiently and ethically.
- **Quality Criterion: Resources are managed and used responsibly for their intended purpose.**

## 2.5 Survey population:

The project consists of two components; each of which has multiple beneficiary groups. Beneficiary groups with respective population sizes are being presented in the following Table-1:

*Table 1: Beneficiary groups with population sizes*

Project Components	Beneficiaries
<p><b>Component 1.</b> Establish protective environments for women and children</p>	<p><b>WFS<sup>1</sup>:</b> 184 registered women (WFS in camp 25 84, WFS in camp 27, 100)</p> <p><b>Case Management:</b> 40 cases as of February 28, 2021</p> <p><b>HH for Outreach Activities:</b> 1053 HH as of February 28, 2021</p> <p><b>Refugees in Target area:</b> 9,847 persons</p>
<p><b>Component 2.</b> Develop Access to adequate Water, Sanitation and Hygiene (WASH)</p>	<p>164 households of host communities</p> <p>Accumulative:</p> <p>General sessions 1547, Menstrual sessions 475</p> <p>Listed students: 516 students for General sessions (each student takes 3 sessions), 193 students for MHM</p>

## 2.6 Sample size for quantitative:

**Sample size:** As mentioned earlier, quantitative approach used where population size is large enough (100+). However, due to COVID 19 situation, could not use a representative sample. Rather quota sample was proposed for quantitative survey. Therefore, following beneficiary groups will be covered through quantitative survey:

- Women registered with WFS.
- Refugees in target area
- Households in the host community
- Students in host community

**Component 1. Establish protective environments for women and children:** Since there were only 184 registered women in both the WFSs, we agreed on 50 quantitative sample for registered women from both the WFSs. As of February 2021, there were 1053 refugees in target area who only attended COVID19 session. Few topics on protection was also covered during the session. Hence, we agreed to replace the quantitative survey with 20 IDIs for refugees in target area. One of the core objectives of the study is to

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<sup>1</sup> Women Friendly Spaces

verify that the humanitarian principles and standards including Core Humanitarian Standards (CHS) are respected. It was difficult to measure CHS through quantitative survey. Hence OrQuest also proposed to include 5 IDIs among Women registered with WFS.

- **Case Manager, Case Worker, Volunteer and local opinion leader:** In order to initiate individualized support based in WFSs from this project, one case manager, two case workers, and four volunteers were newly recruited. Their opinion was vital as a key stakeholder. Hence, two KIIs were proposed in the evaluation. To have more in-depth understanding the project, we included the KII for 1 case manager, 2 case workers and 2 volunteers. As local opinion leader, we included 1 CIC and 1 Majhi to understand the overall protection related progresses or changes in the camp.

**Component 2. Develop Access to adequate Water, Sanitation and Hygiene (WASH):** Households in host community are the main beneficiaries of the project. Some COVID related information was disseminated among the households in the host community. Hence, we proposed to cover 100 Households in host community we were staying close to the constructed or repaired WASH facilities and also received information from the project. In addition to households in host community, we agreed to cover 50 male and 50 female students for face-to-face survey. The students received information on personal hygiene, COVID-19 and handwashing, water hygiene and acute watery diarrhea (AWD), sanitation hygiene, environmental hygiene and food hygiene. Among the 50 female respondents. To understand CHS questions better, we included 5 IDIs among households in host community, Students in host community (boys) and Students in host community (girls).

- **Observation of WASH facilities:** There were 28 latrines, and 27 bathing cubicles were monitored, repaired and maintained. Moreover, at 4 school/madrasas latrines, hand washing facilities, BCs, septic tank etc. were maintained and repaired during the project. Under the evaluation OrQuest observed 35 WASH facilities located in the host community and 4 WASH facilities at school.
- **Teachers:** As per the initial plan, at Nhilla Union in Teknaf Upazila, hygiene awareness and menstrual hygiene workshops was supposed to be held 10 times in total for a total of 20 teachers. However, due to COVID-19 situation and considering the availability of the teachers, the workshops were conducted in a different way. As of January 2021, there were 4-days workshop for 10 teachers (7th-10th December 2020) and 3-days workshop for 10 teachers (5th-7th Jan 2021). To evaluate the change in knowledge of the teachers and to know how the teachers are communicating the WASH related message, we have included 2 KIIs for teachers.
- **Local opinion leaders:** To understand the perception of the local opinion leader, a KII of local union member and another KII of Sub Assistant Engineer (SAE) was included in the sample.

Table 2: Sample sizes by respondent type

Project Components	Beneficiaries	Number of interviews, IDIs and KIIs
<b>Component 1.</b> Establish protective environments for women and children	Women registered with WFS	50 (F2F)
	Refugees in Target area (those who only attended COVID19 session)	20 IDI
	Women registered with WFS	5 IDI
	Case Manager	1 KII
	Case Worker	2 KII
	Volunteer	2 KII
	CIC	1 KII
	Majhi	1 KII
<b>Component 2.</b> Develop Access to adequate Water, Sanitation and Hygiene (WASH)	Households in host community	100 (F2F)
	Students in host community (male)	50 (F2F)
	Students in host community (female)	50 (F2F)
	Households in host community	6 IDI
	Students in host community (male)	2 IDI
	Students in host community (female)	2 IDI
	Teacher	2 IDI
Local opinion leader		2 KII
KII with implementing NGO officials		3 KII
<b>Total</b>		<b>250 F2F surveys, 37 IDIs, 12 KIIs</b>

## 2.7 Selection of respondents:

The evaluation included different type of respondents with diversified portfolio. Hence there were different method followed to identify and select the target respondents.

*Table 3: Selection of respondents*

Beneficiaries	Selection of the respondents
<b>Component 1. Establish protective environments for women and children</b>	
Women registered with WFS for Face-to-Face Survey	The list of all Women registered with WFS will be collected from the project and respondents were selected randomly
Refugees in Target area (those who only attended COVID19 session as of December 2020) for qualitative survey	The list of all participants who have attended COVID19 session at CFS as of December 2020 will be collected from the project and respondents were selected randomly
Case Manager for qualitative survey	There was a case manager who was newly appointed was interviewed for the survey
Case Worker for qualitative survey	There were two caseworkers under the survey and all of them were selected
Volunteer for qualitative survey	All the volunteers under the project were recruited for the survey
CIC for qualitative survey	One of the CICs were selected conveniently
Majhi for qualitative survey	One Majhi from the camp was selected judgmentally. The Majhi must have some knowledge on protection related activities inside the camp.
<b>Component 2. Develop Access to adequate Water, Sanitation and Hygiene (WASH)</b>	
Households in host community for Face-to-Face Survey	Within the project area in the host community where project took place, 20 starting points (SPs) were selected purposively keeping geographical dispersion in mind. From the SPs first household were selected randomly from the first 5 households. After that, every fifth household were knocked for interview. If there was any non-response, next immediate household was approached. The respondents were selected randomly using KISH <sup>2</sup> tables. In addition to random sampling, specific types of respondents (e.g., disability, elderly population) were selected through snowball sampling.

<sup>2</sup> **Kish Table:** Use of Kish table (a randomized selection method) helps selecting the right respondents from the right household with multiple eligible respondents. The Kish Table was developed by statistician L. Kish.

Beneficiaries	Selection of the respondents
Students in host community (male) for Face-to-Face Survey	The list of students who have participated in hygiene awareness activities were collected from the project and respondents were selected randomly. The age of the respondents were more than 10 years. Though the program targeted 1 school and 3 madrasahs, but all the educational institutes were closed during the COVID 19 pandemic. Hence, the awareness activities were conducted at the household level. Therefore, students from different educational institutes were selected from the project area.
Students in host community (female) for Face-to-Face Survey	The list of students who have participated in hygiene awareness activities were collected from the project and respondents were selected randomly. There were 50 respondents and we planned to cover at least 30 female students 30 respondents who have started menstruation before conducting the survey. The minimum age of the respondents were more than 10 years.
Households in host community for qualitative survey	Within the project area in the host community where project took place, the households were selected judgmentally from those who received information from the project. Since this was a qualitative survey, the respondents were selected with special characteristics (e.g., elderly people, people with disability or mother of children under 5 etc.)
Students in host community (male) for qualitative survey	The list of students who had participated in hygiene awareness activities were collected from the project and respondents were selected randomly.
Students in host community (female) for qualitative survey	The list of students who had participated in hygiene awareness activities were collected from the project and respondents were selected randomly. The female students must have started menstruation before conducting the survey.
Teacher for qualitative survey	The list of teachers who have participated in 3- or 4-days workshop were collected from the project and respondents were selected randomly.
Local opinion leader for qualitative survey	A list of potential respondents was collected from the project team. The respondents were selected from the list judgmentally
KII with implementing NGO officials	OrQuest team had sessions with AAR team to identify the respondents. Implementing NGO officials were those who were very much aware of the entire project.

**Development of data collection instruments:** OrQuest was responsible for the development of the tools. Draft data collection tools were prepared by Org Quest Research Limited for quantitative survey and IDIs, KIIs based on the project proposal and other secondary documents. The draft tools were submitted to JPF for feedback. Once developed, the draft questionnaires and guides were translated by OrQuest into Bangla. The draft questionnaires for quantitative survey with feedback from JPF and AAR were pretested in the field. Questionnaires were revised and finalized as necessary based on the pilot survey.

**Scripting procedure:** The quantitative questionnaire was programmed for the CAPI survey by using SurveyCTO, a licensed software, utilizing our own resources. All scripts will be written in Bengali and in English. CAPI programming rendered questionnaire into a sequence of input prompts that will apply questionnaire logic, entry constraints and repeating sub-structures (if required). If necessary, the programming will also take care of random rotation of questions and options. Grids, if any, will be broken down into a sequence of input prompts in order to fit into the tablet screen and minimize data input error. Checklist, radio button, drop-down menu and basic formatting will be used as applicable. Survey programming will be done in close partnership with JPF and will embed skips and logic checks to ensure quality and consistency of the data.

## 2.8 Limitations

- First of all, due to COVID 19 pandemic, the representative sample could not be proposed. To minimize physical interaction, minimum number of samples has been proposed in the survey.
- Due to COVID 19 there was a long delay to receive permission for access to camp. Hence, the survey could not be started as per schedule. Moreover, the approval was granted for only limited period of time. As a result, the survey had to be completed within minimum possible time.
- In the host community, the presence of people from Rohingya community was found. Since they were not the citizen of the country, we were not allowed to conduct the interview among them. However, it was often difficult for the enumerators to identify the actual Bangladeshi citizens during the survey.
- Due to restriction on movement inside the camp, the enumerators and moderators were able to conduct interview among project beneficiaries and project staff only. Thus, the overall change occurred based on the implementation could not be measured.
- The survey tools were developed based on reviewing project documents only. Due to time constraint, it was not possible to review all the project documents, which eventually resulted in some confusion to develop the project tools.
- The inception meeting was conducted for a noticeably short period of time. Hence, the evaluation team could not obtain complete project brief from the implementation team.
- Since the project beneficiaries did not have access to mobile network, remote interview during COVID 19 could not be conducted. For the same reason, the data collected from the interview could not be back checked over phone and validated. However, some of the information in the host community was validated over phone when required.
- The enumerators and the supervisors were recruited from the host community. However, due to language barrier, the project management team could not validate the response collected by the enumerators.





## 4. Evaluation Results

The project had two different components as shown below.

- Component I: Establish protective environments for women and children.
- Component II: Develop access to adequate water, sanitation, and hygiene (WASH)

### 4.1 Component I: Establish protective environments for women and children.

This component was implemented in collaboration with a local NGO, NGO Forum. The project was implemented in at Camps 25 and 27 in Teknaf Upazila. The project was started on March 31, 2020, and was supposed to be completed by February 28, however it was extended by one month. The protection environment for women and children was aimed to comprehensively improve through the operation of a total of four facilities: two Woman Friendly Spaces (WFS) and two Child-Friendly Spaces (CFS), and the implementation of outreach activities and the provision of individualized support by the case management team based in the WFS facilities. However, due to COVID 19 situation, the project was able to register 84 women at camp25 and 100 women at Camp27 at the Woman Friendly Space (WFS). Due to the COVID situation, no children were registered at the Child-Friendly Space (CFS). As per the project document, there were some awareness-raising events held on Human Rights Day and International Women's Day with the aim of raising awareness among refugees who do not normally participate in WFS activities. The awareness sessions included both COVID and protection-related topics. There was some concealing support provided to the beneficiaries over the phone, where at each session there were on average four participants and there was a speaker with the support of volunteers where the session was conducted over the phone. The project also included Work Therapy for mask making, so that those who were stressed could remain busy with the handicraft activities.

The members acknowledged that after participating in different awareness sessions their knowledge on protection-related topics has increased. Also, they discussed the topics with their family members and gained some confidence to share the issues with their family members.

Under the project, psychosocial support was provided for individuals and groups by a psychological counselor, which mainly included support for the community and households, instead of professional services by the mental health and psychosocial support (MHPSS) intervention pyramid. In case of referral (where required), efforts were made to ensure that the relevant woman, child, or the child's guardian were in charge of making decisions at every stage including information provision and access to medical services. MHPSS included mainly counseling for the survivors. The project also included some referral service as well when required, which was need-based services. Sometimes the survivors were referred to the nearby health post and health services for better treatment.

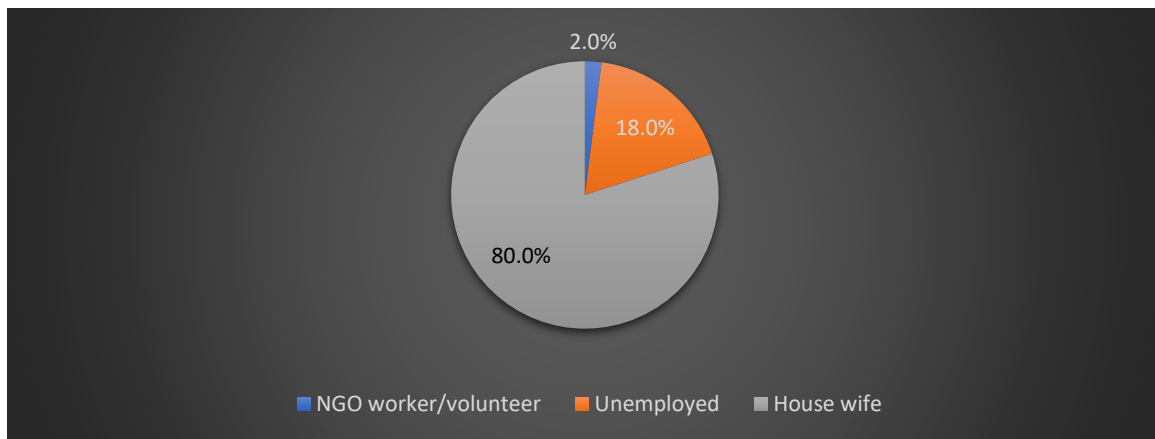
### 4.2 Study findings for Component I

Since there were only 50 respondents interviewed under the survey, age wise interpretation was not possible for the women registered in WFS. WFSs were intended for female refugees aged 13 and older who have never been registered as a user, and the capacity is 200 per facility (400 in total). However, due to COVID 19 situation, the project was able to register 84 women at camp25 and 100 women at Camp 27 at the Woman Friendly Space (WFS). As per our survey, out of 50 interviewed WFS registered members, 7 respondents had age less than 18 years. The average age of the respondents were 26.1 years. There were three women who were more than 40 years old during the survey.

#### 4.2.1 Occupation of the respondent

As per the regulation inside the camp, there are no formal jobs available for Rohingya in the camps. The employment inside the camp includes in-camp cash for work and volunteer jobs. Therefore, the Rohingya people inside the camp has limited opportunity to work or involved in income-generating activities. Also, from other surveys, it was found that the females were not involved in any income-generating activities. Among the surveyed WFS registered members, most of the women (80%) were housewives, while 18% were unemployed. A point to be noted that the women population in the Rohingya community who were married but not involved in any income-generating activity were housewives and those who were unmarried but not involved in any income-generating activity, claimed as unemployed. Among the surveyed registered women 2% (n=1) were NGO workers/volunteers.

Figure 1: Occupation of the respondent

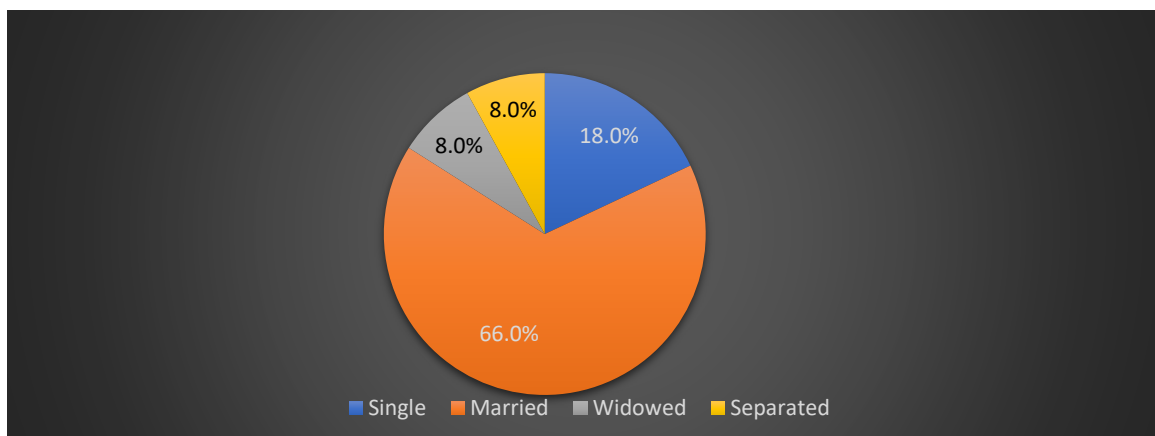


Ref: D3 What best describes your employment status

#### 4.2.2 Marital Status

Among the surveyed WFS registered women, two third (66%) were married, while less than one-fifth respondents (18%) were single. There were 8% respondents who were widowed and remaining 8% were separate.

Figure 2: Marital Status of the respondents

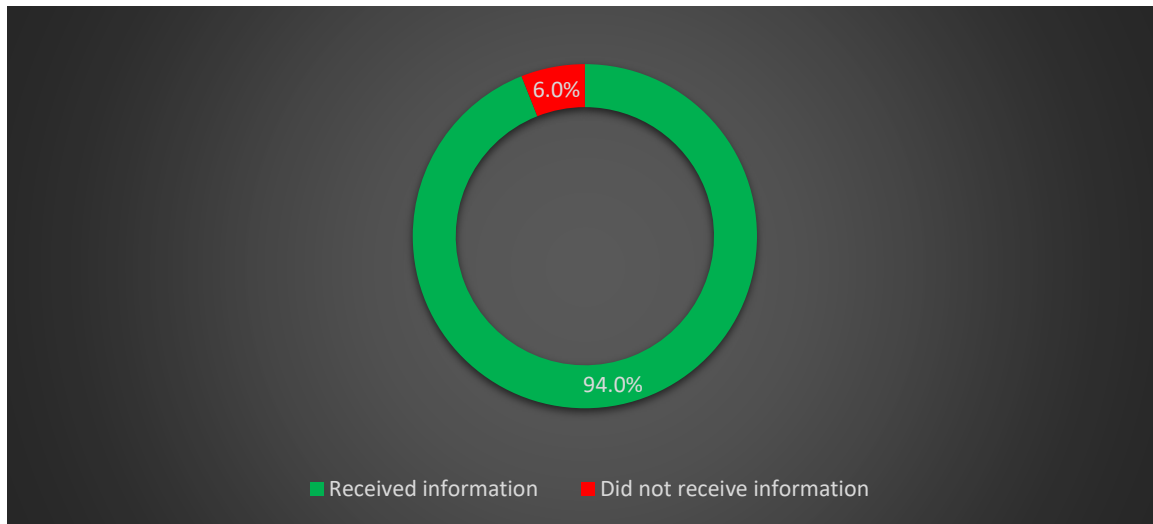


Ref: D4 What is your marital status now are you married; living with a partner, not married; widowed; divorced; or separated?

#### 4.2.3 Incidence of receiving any information related to protection.

The survey was conducted among the registered girls and women of WFS. During the project the members participated some activities and celebrated some national and international days. They also received some information related to protection from COVID and other information related to protection. In the survey it was identified that 94% received information related to protection, while remaining 6% (n=3) respondents did not receive any information related to protection. Based on the findings it can be stated that all the members did not visit the WFS regularly or might not have participated in all the awareness sessions. They might have participated in the events only.

Figure 3: Incidence of receiving any information related to protection.

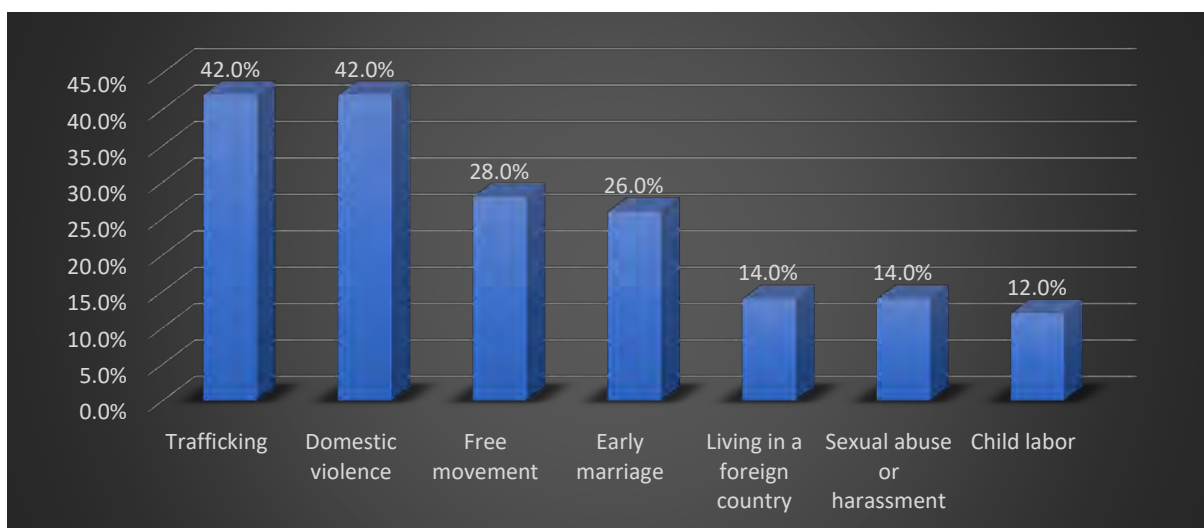


Ref: Q3 Have you ever received any information related to protection during the last 6 months?

#### 4.2.4 Biggest protection concerns

There were different protection concerns among the people in the Rohingya community. The most mentioned protection concern was 'trafficking' and 'domestic violence' (42%). After these mentioned concerns, 'free movement' (28%) inside the camp was a major concern. During the survey, there was a case of kidnapping, which raised their concern more. Early marriage (26%) was another major concern for the members of WFS.

Figure 4: Biggest protection concerns

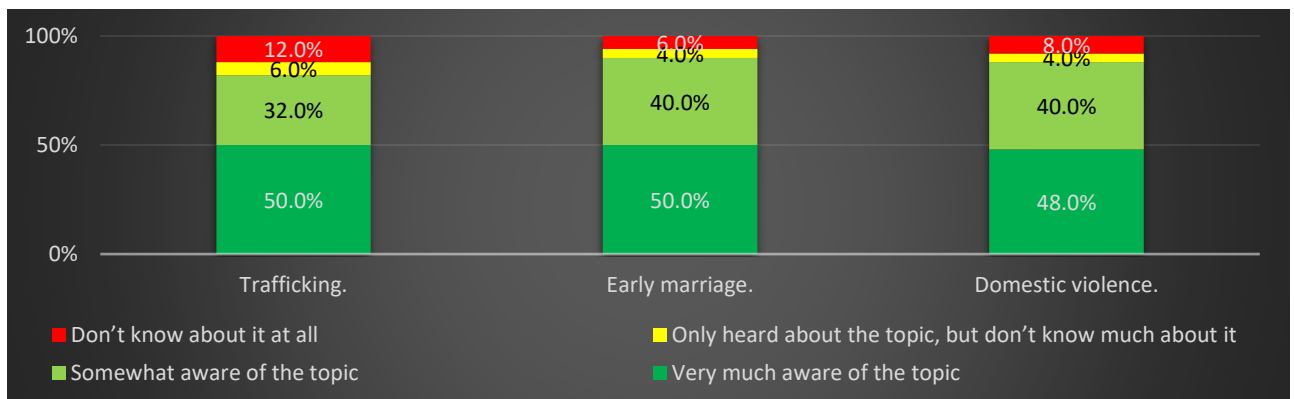


Ref: Q4. What are your biggest protection concerns?

#### 4.2.5 Awareness on different protection topics

There were different topics on protection. Among the three important topics picked up and asked among the WFS members to express their opinion on their knowledge level. For trafficking, half of the respondents were very much aware of the topic, while one-third of the respondents (32%) were somewhat aware of the topic. On the other hand, 12% of respondents thought that they did not know anything about the topic. In the case of early marriage, half of the respondents claimed that they were very much aware of 'Early marriage', while 40% of respondents thought that they were somewhat aware of the topic. There were 6% of respondents who were not aware of the topic at all. In another case, 48% of respondents were very much aware of 'domestic violence, while 40% of respondents were somewhat aware of 'domestic violence. On the other hand, 8% of respondents were not aware of domestic violence at all.

Figure 5: Awareness on different protection topics

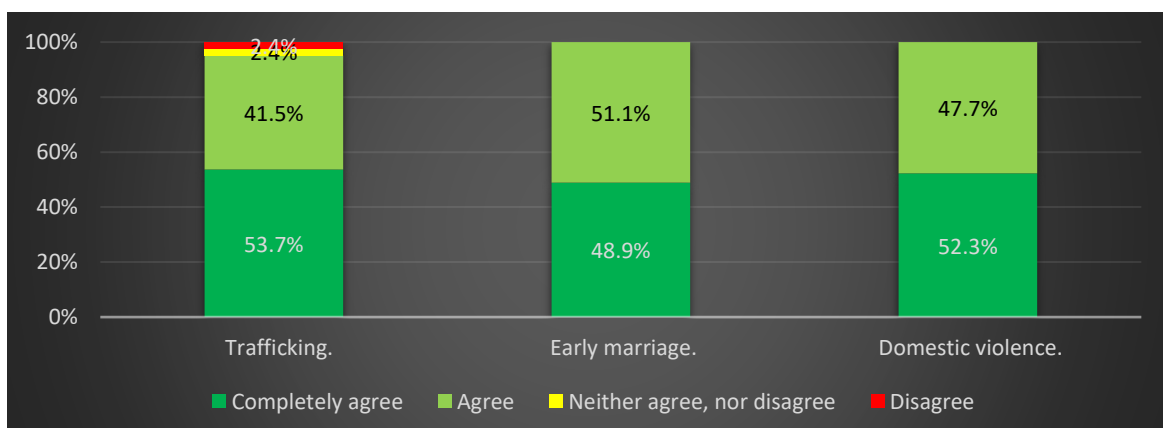


Ref: Q5 Now I will read some of the topics related to protection. Can you let me know how much you know about the topics?

#### 4.2.6 Change in knowledge on protection related knowledges.

The WFS members who were aware of protection-related topics, most of the cases they agreed that they had an improved knowledge. In the case of trafficking, 53.7% of respondents completely agreed and 41.5% of respondents agreed that their knowledge had increased, but 2.4% of respondents disagree with the statement. In the case of early marriage and domestic violence, all the respondents completely agreed or agreed to the statement their knowledge on the topics has increased.

Figure 6: Change in knowledge on protection related knowledges

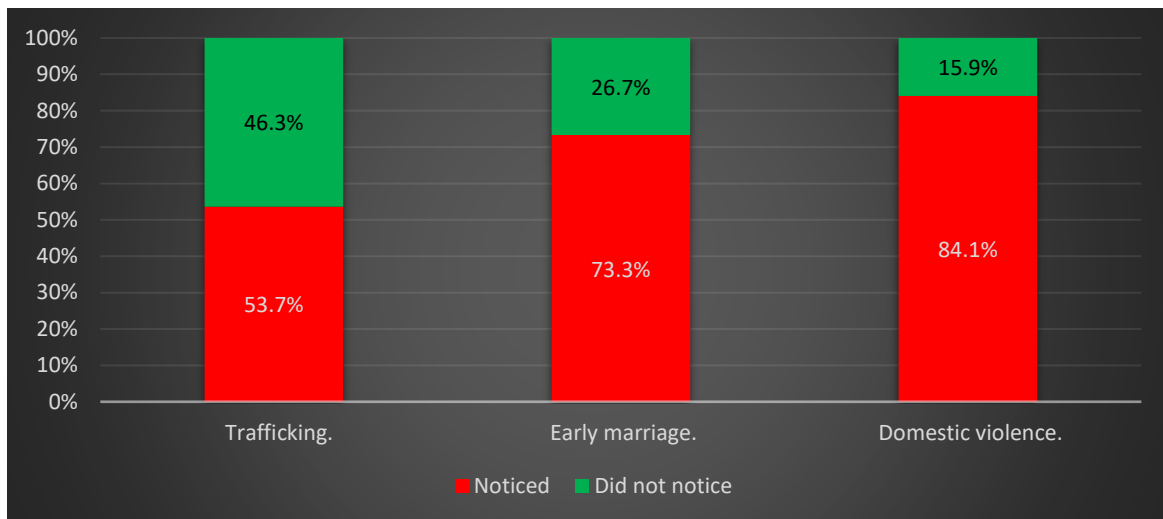


Ref: Q6 If I want you to compare your current knowledge on the topics and the knowledge you have 6 months ago, how much do you agree or disagree that, your knowledge on \_\_\_\_\_ has increased substantially.

#### 4.2.7 Incidence of noticing protection related activities in the camp.

As per the surveyed respondents, domestic violence was the most noticed activities related to protection in the camps, which was noticed by 84.1% of respondents, followed by early marriage (73.3%). Moreover, 53.7% of respondents have seen the incidence of ‘trafficking’ in the camp.

Figure 7: Type of protection related activities noticed in the camp.



Ref: Q7 Have you noticed any incident of Trafficking/ Early marriage/ Domestic violence. in your camp?

*“Recently we have noticed some increase in domestic violence inside the camp. Due to COVID 19, there is a restriction on the movement inside the camp and the males had to stay at home. They felt more stressed and got involved in domestic violence” ..... NGO staff.*

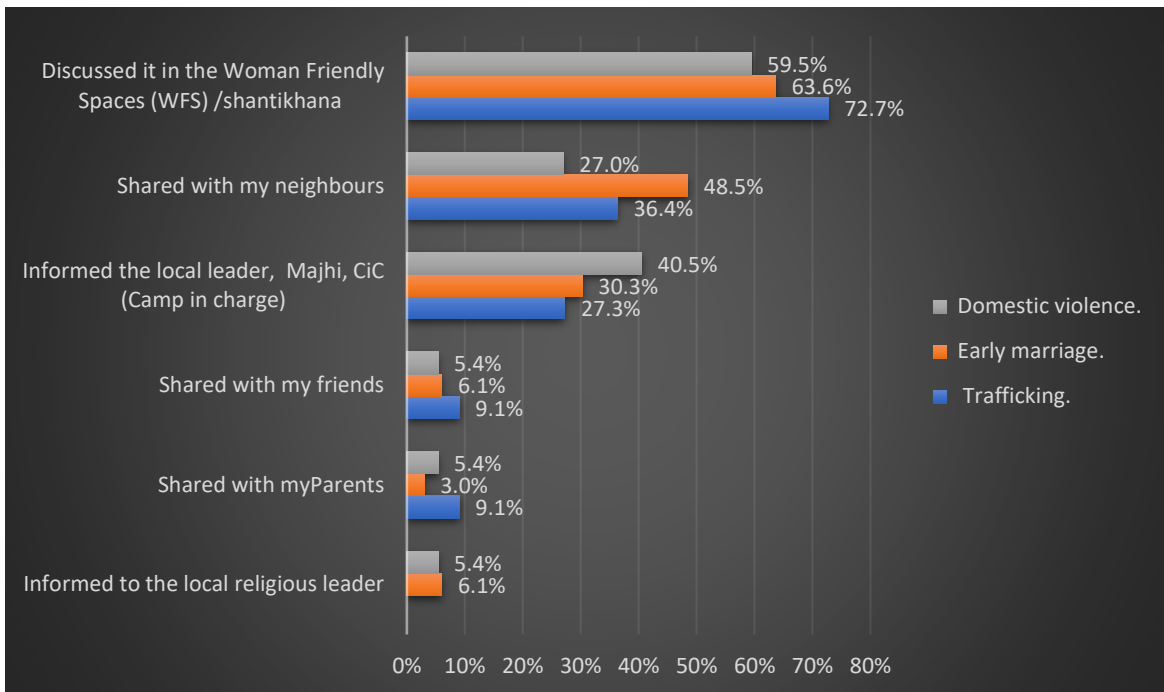
*“Child marriage is quite common practice in our community. Whenever there is a marriage, the father of bride must pay a dowry (a dowry is a transfer of parental property, gifts, property, or money upon the marriage of a daughter) and the lower the age of the bride, the lower the amount of dowry is. Hence the father of girls is often motivated to give the marriage of their daughters at an early age” ..... Refugees in Target area*

*“Camp is a very congested area, and it is often not safe for the girls. Hence considering the safety of girls the parents often arrange early marriage, though the rate has been reduced recently” ..... Refugees in Target area*

#### 4.2.8 Steps taken when any incidence related to protection seen.

The actions taken by interviewed beneficiaries seeing any protection-related incidences slightly depended on the type of incidence. Regardless of the type of incidence was, the beneficiaries discussed the issues in the WFS. Overall, 59.5%, 63.6%, and 72.7% of respondents discussed the issue of domestic violence, early marriage, and trafficking issues respectively at the WFS. After WFS, the WFS members felt more comfortable sharing the protection-related issues with their neighbors. Early marriage (48.5%) was the most shared incident that was shared with neighbors, followed by trafficking. On the other hand, domestic violence (40.5%) was the issue that was discussed with informed the local leader, Majhi, CiC (Camp in charge), followed by early marriage.

Figure 8: Steps taken when any incidence related to protection seen.

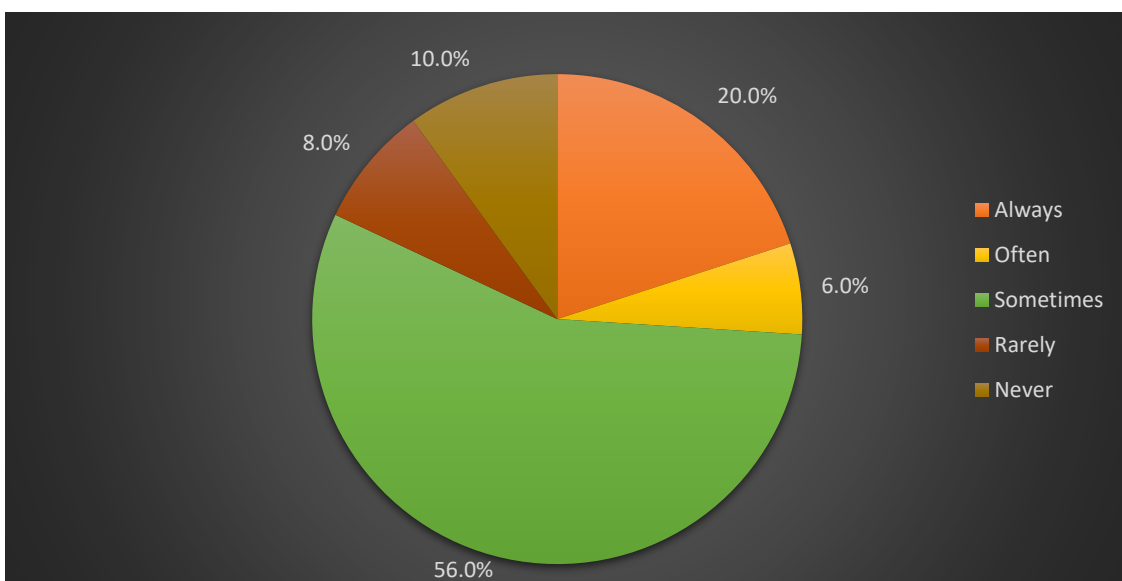


Ref: Q8. What did you do when you have seen such incidents?

#### 4.2.9 Incidence of feeling stress.

Overall, one-fifth (20%) of the respondents felt worried all the time, while 6% of respondents felt worried often. The majority (56%) of respondents felt worried sometimes. It was found that there were many women who had trauma from the experience of systematic violence in Myanmar and from separation from families and had mental/psychological problems. The WFS provided facilities with courses on protection risks, recreational activities for stress care, and psychosocial support by psychological counselors.

Figure 9: Incidence of feeling stress.

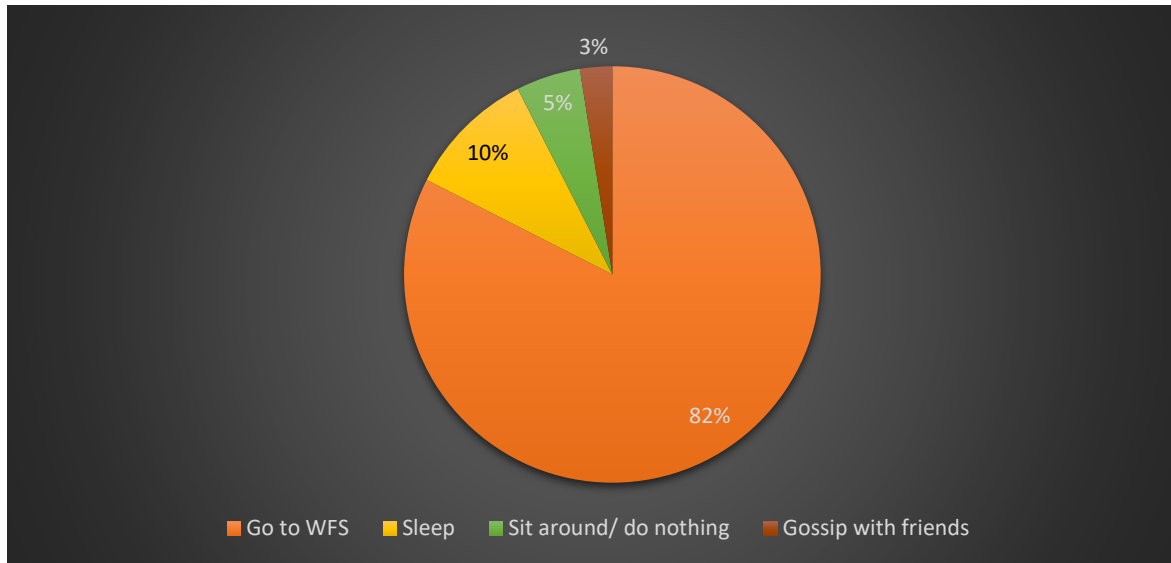


Ref: Q9. How often do you feel worried or stressed about your life? In this regard I am going to read out some response options.

#### 4.2.10 Activities when people are stressed.

When people feel stressed, most of the WFS members visit the WFS (82%) and participate in different recreational activities. There were 10% respondents mention that when they felt stress they slept, 3% respondents talked to their friends, while 5 % respondents did nothing.

Figure 10: Activities when people are stressed.

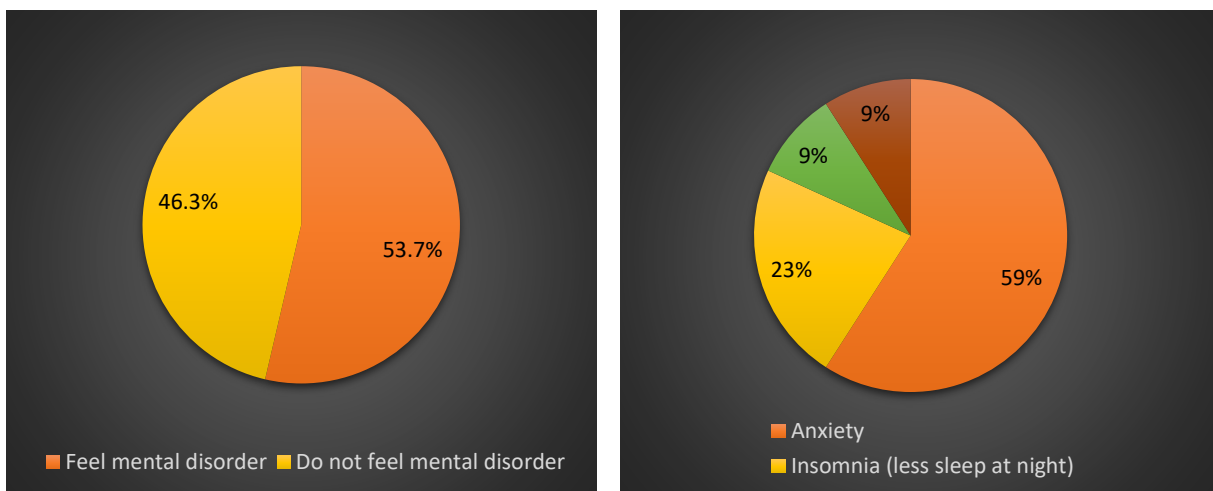


Ref: Q10 What do you do when you are stressed about your life?

#### 4.2.11 Mental disorder due to stress

More than half of the WFS members (54%) reported that they feel mental disorders from stress. They were further asked the type of disorder did they face and the majority of them (59%) mentioned that they suffered from anxiety. Moreover, close to one-fourth of the respondents mentioned that they suffered from insomnia. Additionally, 9% of WFS members suffer from a decrease in appetite, while the same number of respondents suffer from depression.

Figure 11: Mental disorder due to stress



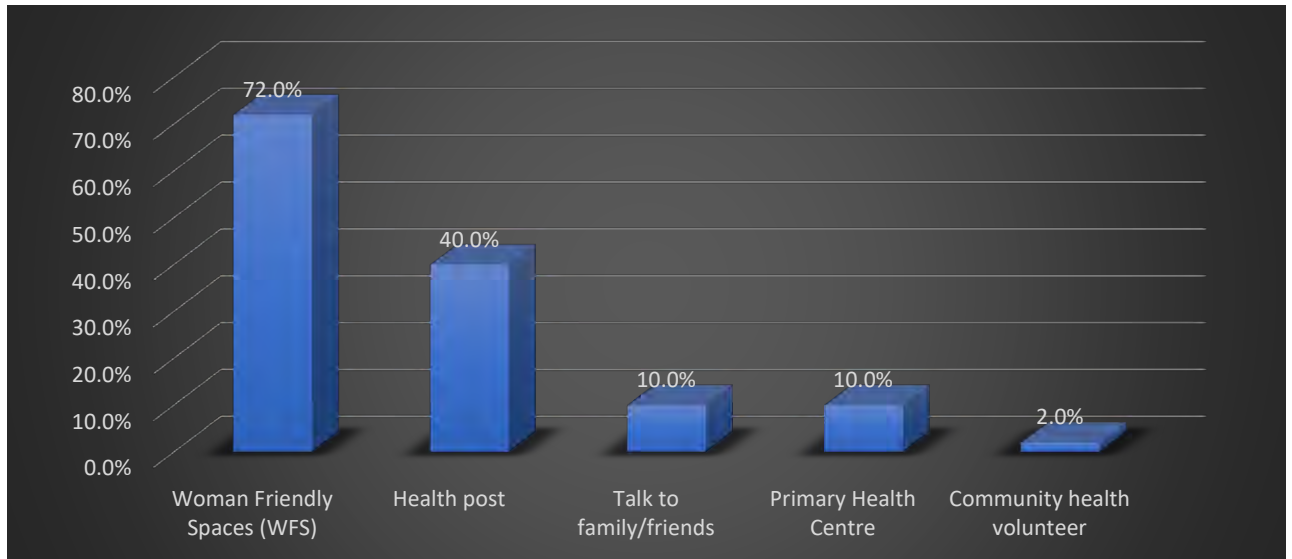
Ref: Q11 Did you face any kind of mental disorder that occurred due to the stress you face?

Ref: Q12 What kind of mental disorder did you face?

#### 4.2.12 Activities during mental health concerns

Overall, 72% of respondents visited the WFS for their mental health concerns, while a handsome number of respondents (40%) went to the health post. Additionally, 10% of respondents mentioned that they talk to their friends and family members to remove mental disorders, while another 10% visited primary health centers.

Figure 12: Activities during mental health concerns

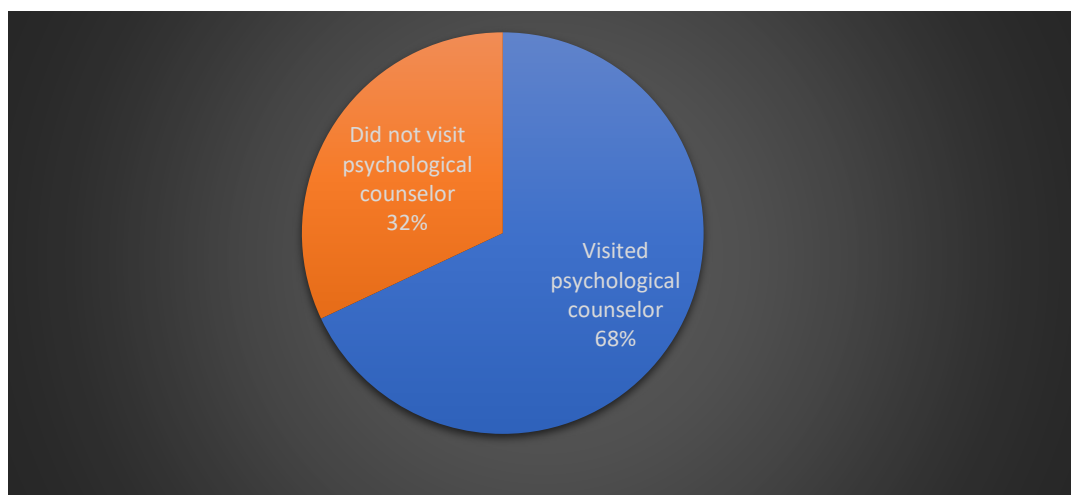


Ref: Q13. Where would you go if you have any mental health concerns?

#### 4.2.13 Incidence of visiting psychological counselor.

As per the project document, there was a provision that psychosocial support was provided for individuals and groups by a psychological counselor. Psychosocial support meant support for the community and households. Many of the respondents (68%) mentioned that they visited psychological counselors for their mental health concerns. Psychological counseling and referral required the consent of the relevant woman, child, or the child's guardian before the information is provided to a third party other than AAR and the local cooperative body.

Figure 13: Incidence of visiting psychological counselor.



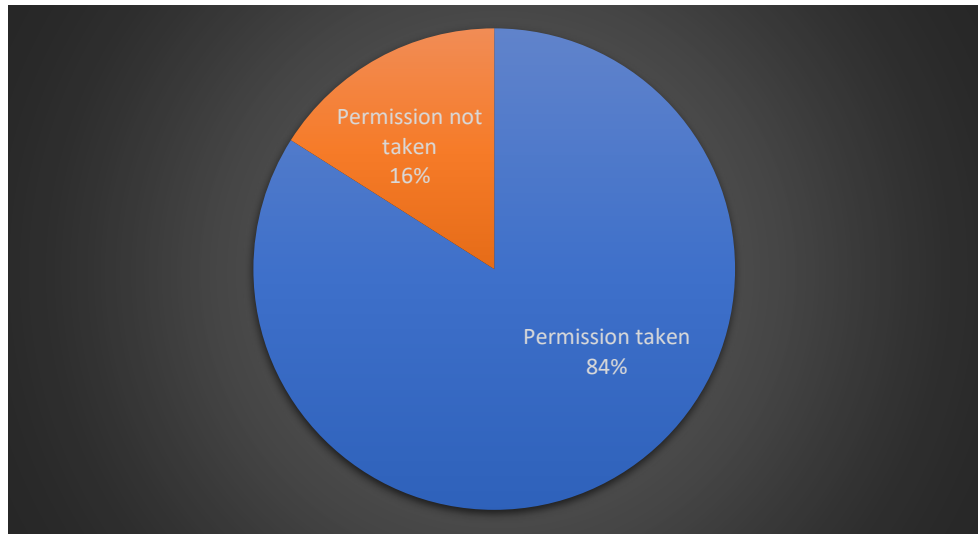
Ref: Q14 Have you ever visited any psychological counselor due to mental health concerns?



#### 4.2.14 Incidence of seeking permission sought from beneficiaries.

From the project document, it was found that the relevant women, child, or the child’s guardian make their own decision to avail any counseling or referral service. The majority of the beneficiaries agreed to the fact that when someone was referred to a psychological counselor due to mental health concerns, consent was sought from the person. However, 16% of respondents did not agree with the fact.

Figure 14: Incidence of seeking permission sought from beneficiaries.

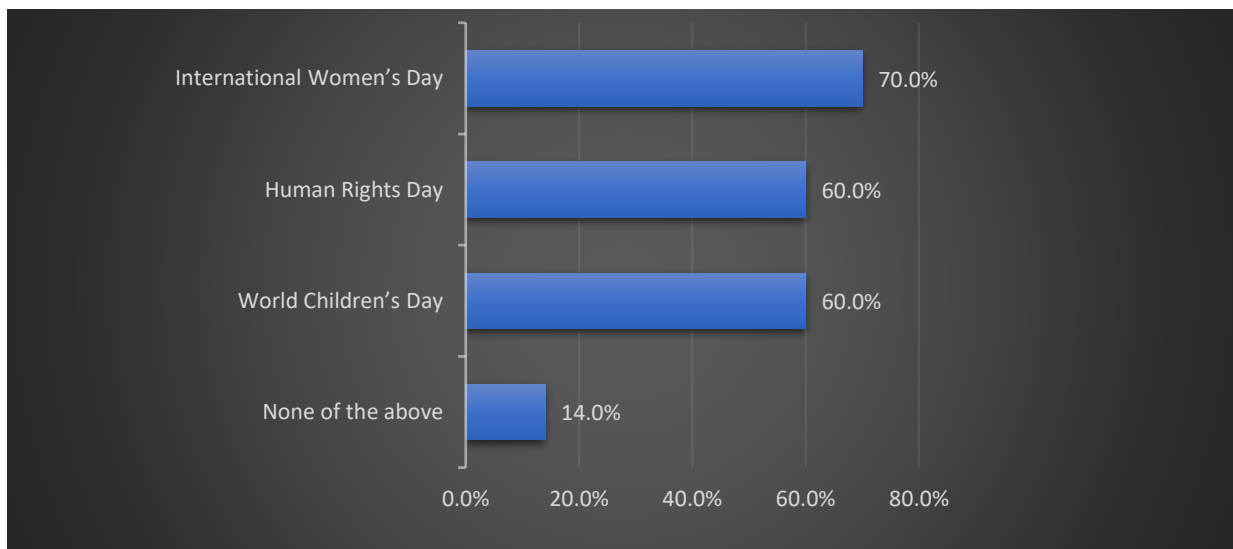


Ref: Q16 If any woman in your camp is referred to a psychological counselor due to mental health concerns, is permission sought from him/her?

#### 4.2.15 Familiarity of different events/days

In the WFS, different awareness-raising sessions or events were organized during different national or international days. The majority of the respondents could recall International Women’s Day (70%), followed by World Children’s Day (60%) and Human Rights Day (60%). There were 14% of respondents who could not recall any of the activities.

Figure 15: Familiarity of different events/days

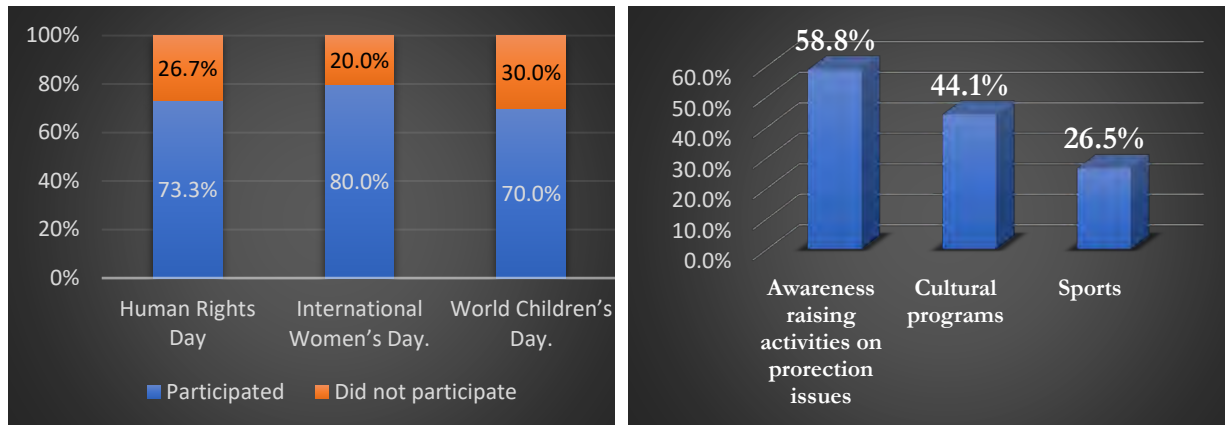


Ref: Q20. Are you familiar of the following events/days?

#### 4.2.16 Participation in different activities

The majority of the participants mentioned that they had participated in different activities on different days. The major participation was noticed on International Women’s Day where 80% of WFS members had participated. Moreover, 73.3% of WFS members participated in activities on Human Rights Day, and 70% of WFS members participated in activities on World Children’s Day. The respondents were further probed about the type of activities they have participated in, the majority of the respondents mentioned ‘Awareness activities on protection issues’ (58.8%), followed by the cultural programs (44.1%) and sports (26.5%).

Figure 16: Participation in different activities



Ref: Q21. Have you ever participated in any activities on the following days?

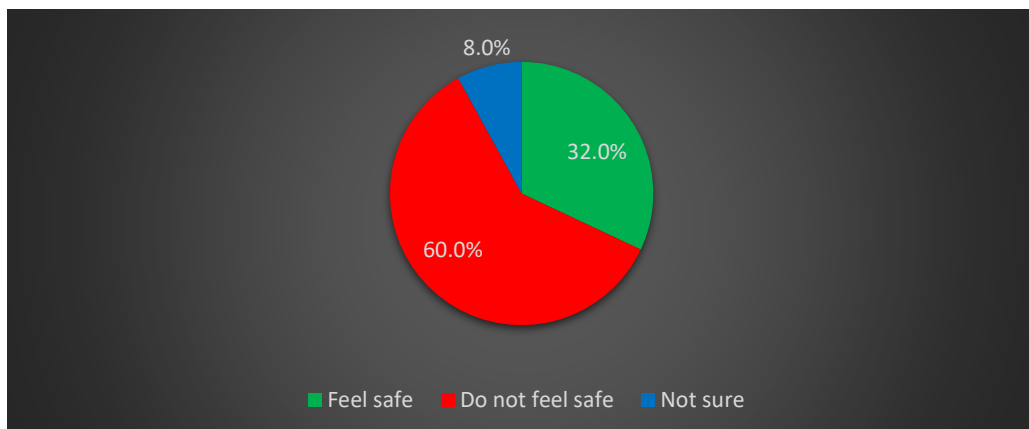
Ref: Q22. What types of activities did you participate in?

#### 4.2.17 Incidence of feeling safe to roam.

One of the important protections concerns among the women inside the Rohingya community is that they did not feel safe roaming on their own in their camp. Among the WFS members, one-third (32%) women mentioned that they felt safe to roam around, while 60% of WFS members did not feel safe to roam on their own.

*“Before the implementation of WFS, we did not feel safe to move inside the camp alone. We did not allow our children to move alone. After implementation of WFS, the situation has improved, but still, we do not feel completely safe. Some people tempt us by offering false job opportunity. Even few days ago there was a case of kidnapping. Hence still we do not feel safe” ..... WFS member.*

Figure 17: Incidence of feeling safe to roam.



Ref: Q23 Do you feel safe to roam on your own in your camp?

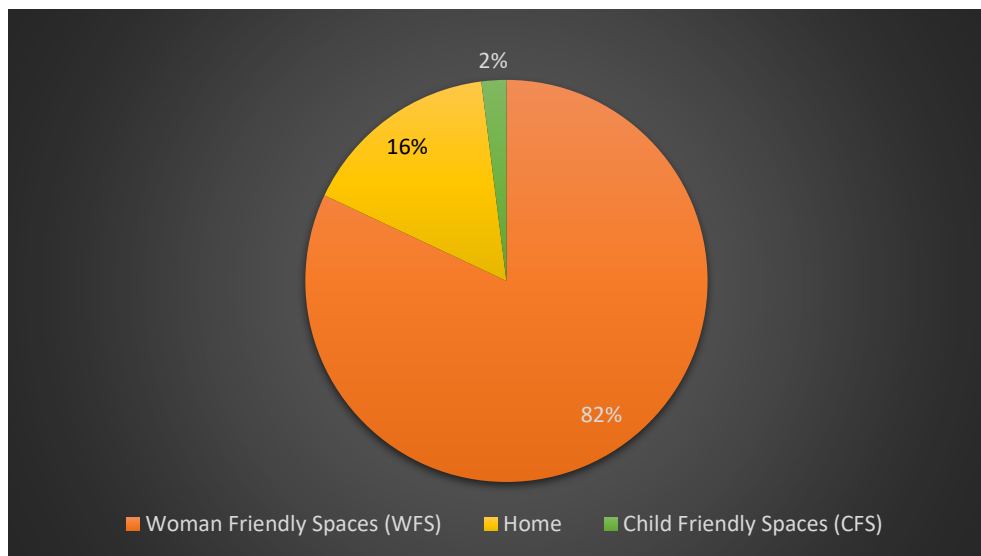
#### 4.2.18 Favorite place of the WFS members

WFS was a place that provided courses on protection risks, recreational activities for stress care, and psychosocial support by psychological counselors. The members could participate in different activities and could release their stress. Moreover, if there was any case of gender-based violence, they shared the issues with the WFS staff and received necessary first aid or psychological support. Hence, WFS was considered as their favorite place, mentioned by 82% of WFS members, while 16% of members liked their home. There were 2% of respondents (n=1) who mentioned CFS (which was implemented in the previous project) as their favorite place. Those who were interviewed under the survey, all the WFS members considered WFS a safe and secured place.

*“I love to go to WFS. We feel WFS a safer place for me and for my kids. We had to stay in a small hut, and we do not feel comfortable. We received training on handicraft, we learned may new topics. Even we can have a sound sleep at the WFS” .....WFS member.*

*“At WFS, no male above 5 years is allowed to enter. So, the male were curious to know what happened inside the building. Now they understood and allowed us to participate. We made mask for ourselves and use these. Also, there is an opportunity to participate in different games. I really feel happy here” ..... WFS member.*

Figure 18: Favorite place of the WFS members



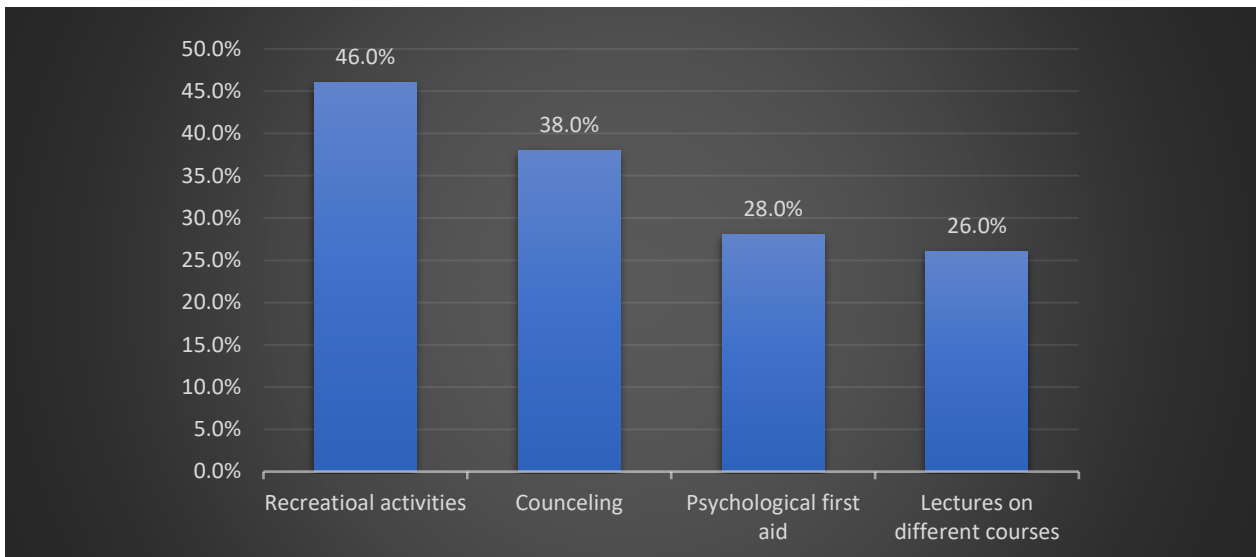
Ref: Q24 What is your favorite place?

#### 4.2.19 Type of activities they participated.

Just less than half (46.0%) of the respondents mentioned that they participated in different recreational activities which included participation in games, handicrafts, or other cultural activities. Additionally, 38% of respondents mentioned that they received counseling services when required, followed by psychological first aid (28%) and 'lectures on different courses. Recreational activities and lectures on different courses were regularly planned activities, while counseling services and psychological first aid were need-based services provided when required.'

*“I come to WFS to learn different things. I attended classes on different topics. Moreover, I learned about handicraft, sewing and many more. We made mask for ourselves and took these at home. When we feel unhappy or there are any unwanted situations, we come to WFS and share the issue with the sisters. Sometimes they give us mental support and sometimes they took necessary action as required.” ..... WFS member.*

Figure 19: Type of activities they participated.

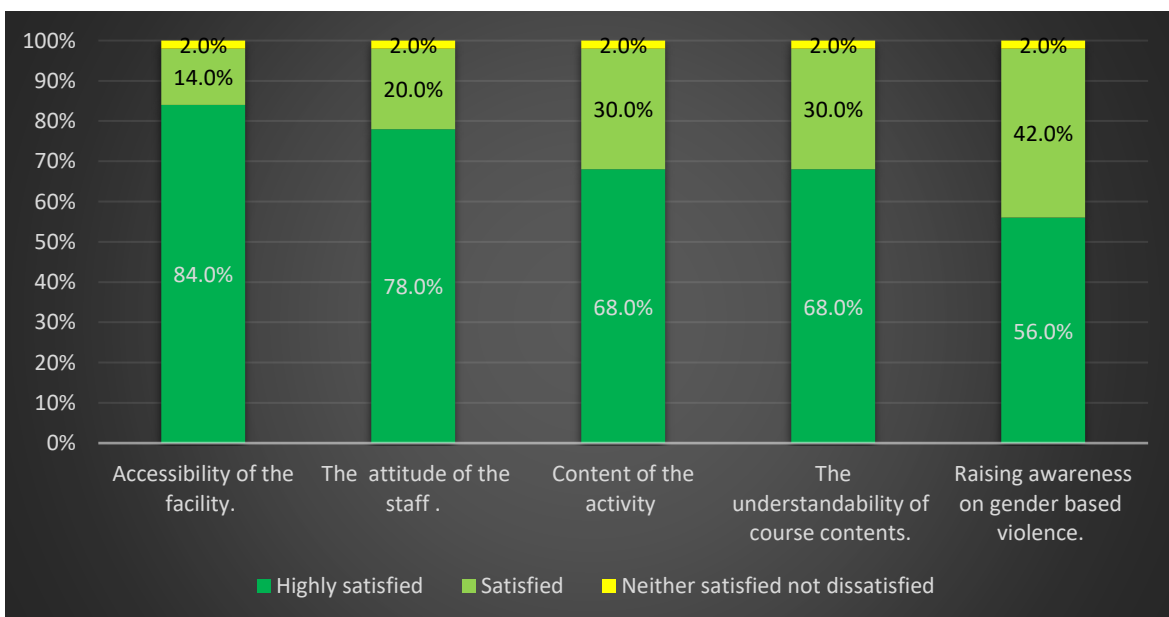


Ref: Q26. As a registered member of Woman Friendly Spaces (WFS) what type of activities did you participate in?

#### 4.2.20 Satisfaction on WFS

The WFS members were asked to rate their satisfaction on different attributes of WFS. It was found that except for one respondent, all the WFS members were satisfied with different attributes of woman-friendly space. The highest satisfaction was noted on 'Accessibility of the facility followed by 'the attitude of the staff. The respondents had access to the facility anytime and the staff of the WFS was very supportive. However, they were happy with the content of the activity or understandability of course contents but might need slight improvement in the content and made it easy for the participants. Also, they were happy with the awareness session, but there is marginal scope for improvement to make them more happy. It will increase the number of highly satisfied WFS members from the current percentage of 56%.

Figure 20: Satisfaction on WFS



Ref: Q29 How much satisfied are you on \_\_\_ of the Woman Friendly Spaces (WFS)?

#### 4.2.21 Understanding on violence against women and girls

The respondents were asked to express themselves what they understand by violence against women and girls. Over one-third of the respondents mentioned 'Physical violence', followed by psychological and emotional abuse (30%) and violence by husbands against wives (20%). Additionally, 10% of respondents mentioned 'rape / sexual assault' and 4% respondents mentioned 'forced marriage'.

Figure 21: Understanding on violence against women and girls.



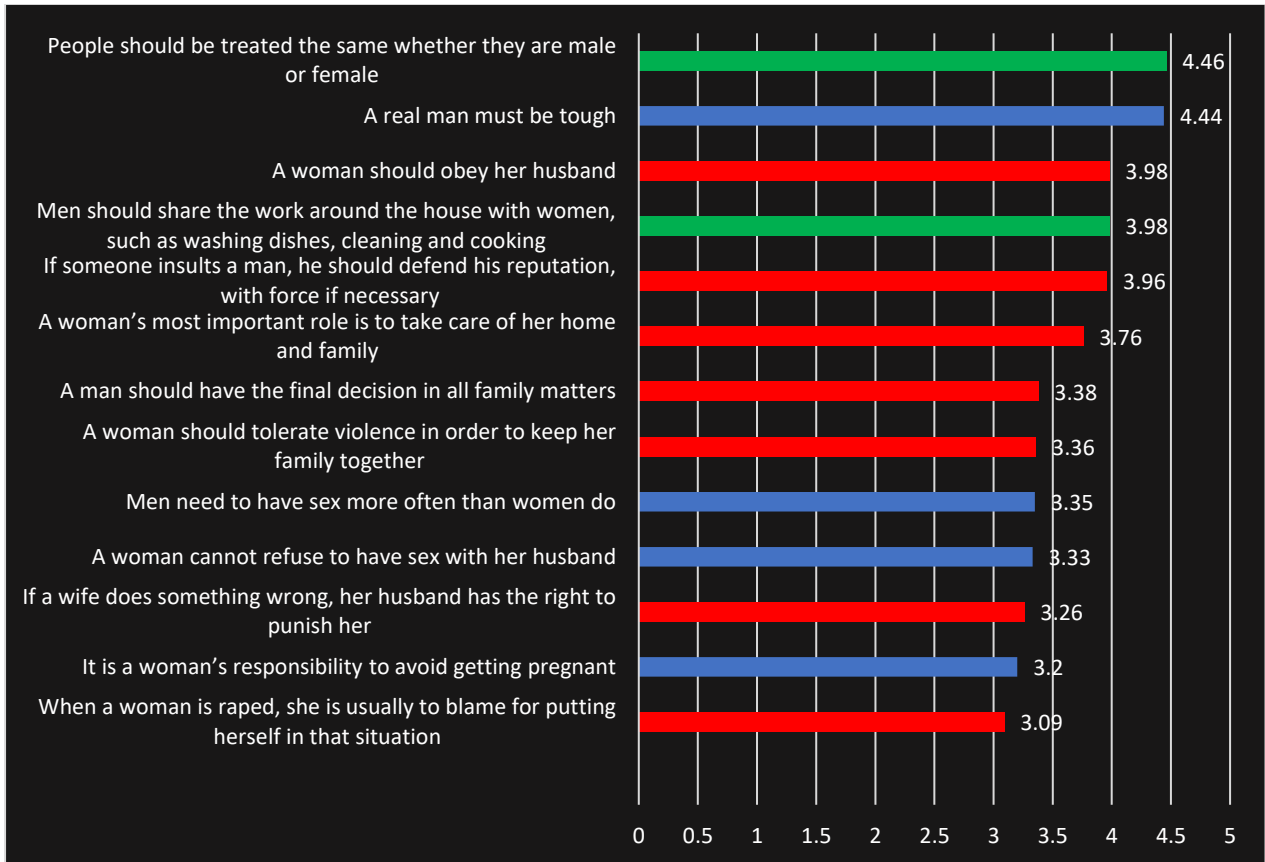
Ref: Q28 What do you think the term “violence against women and girls” means?

#### 4.2.22 Attitudes regarding gender roles and relationships

We wanted to see the attituded-on gender roles inter-being involved in the project through awareness session or through psychological support session. For this measure, we used Gender Equitable Men (GEM) scale, which designed to measure attitudes toward gender norms in intimate relationships or differing social expectations for men and women. The scale measures how equitable or inequitable people’s views are about a range of different issues related to gender norms. The responses were read some of the statements and were asked to evaluate them on a Likert scale of 1-5, with 1 representing the least and 5 the most. We kept a mix of statements with positive perception, which means the more the score is, the better the result is. On the other hand, we kept some statements which are traditional perception, and we want them to be changed. For these statements, the lower the score, the better the result is. To measure the result, overall, GEM scores for each group were calculated by averaging Likert scores across all component questions to produce a single score for each group.

From the graph below, it was found that there were some positive changes in the mindset of the WFS members, while they still considered that males should have dominance over women. It was good to see that ‘People should be treated the same whether they are male, or female had a score more than 4 (4.46) and also it was positive to see a high score for the statement ‘men should share the work around the house with women, such as washing dishes, cleaning and cooking (3.98). On the other hand, the women still perceive that they should obey their husband (3.98) and a man should have the final decision in all family matters (3.38). Even in the study, it was found that the women are visiting the WFS with due permission of their husbands or other male family members of their household. A high score in ‘man must be tough’ (4.44) and ‘defending reputation, with force’ (3.96) shows that the women still appreciated the masculinity of the men and accepted the male dominance in their society. The most worrying fact was that in case of ‘tolerating violence by a woman’ (3.36) and ‘husband has the right to punish his wife’ (3.26) still had a high score. The most vulnerable finding was that in the Rohingya community if a woman is raped, she is usually to blame for putting herself in that situation’ which has a score of 3.09. The above findings show that there are still lots of opportunities to change the perception of women and also males should be get involved to improve the situation related to protection in the Rohingya community.

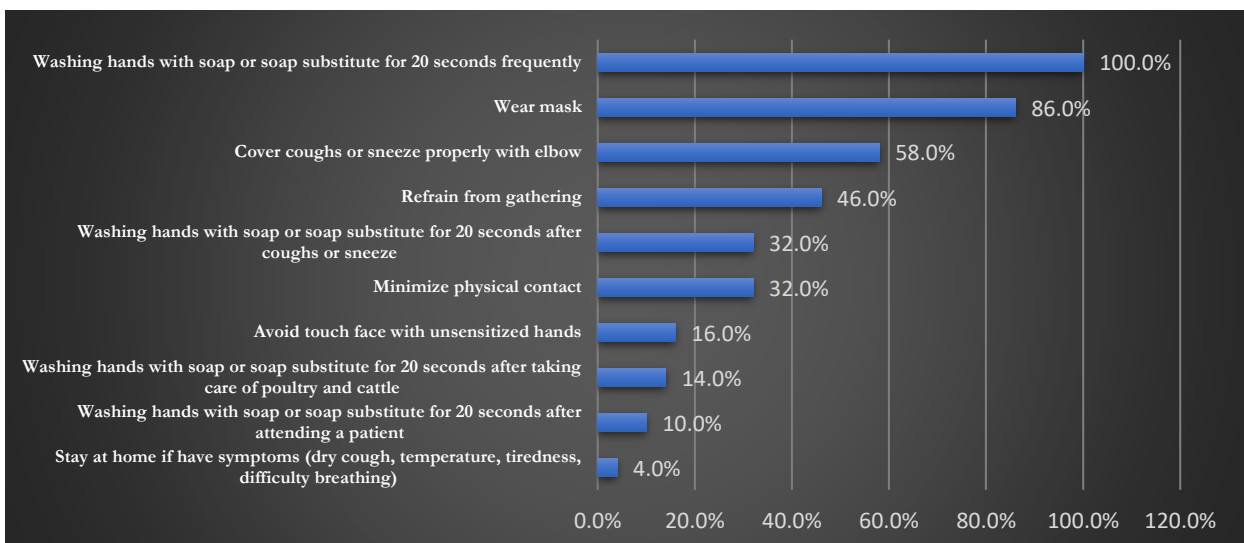
Figure 22:: GEM score for the statement (a score between 1 to 5)



4.2.23 Hygiene practices following during the current situation of corona.

During the current pandemic situation, both the Rohingya community and WFS members received some information on COVID hygiene practices. All the respondents mentioned that they received information on COVID hygiene practices. Among them, all of them mentioned washing hands with soap or soap substitute for 20 seconds frequently (100%) followed by wearing a mask (86%), the two most important COVID hygiene practices. Among other COVID hygiene practices, respondents also recalled about cover coughs or sneeze properly with the elbow (58%) and refrain from gathering (46%).

Figure 23: Hygiene practices following during the current situation of corona.



Ref: Q33 What hygiene practices are you following during the current situation of corona?

### 4.3 Study findings for Component II: Household (HH) Community of AAR Project

The component II of the project included developing access to adequate Water, Sanitation, and Hygiene (WASH) facilities. The project was implemented in the host community which targeted both adults and students. At first, the project team visited the location and decided to repair 28 toilets, 27 bathing spaces as needed. One of the WASH facilities was destroyed by the owner of the facility and constructed another establishment. The WASH facility included a mix of community WASH facilities as well as household WASH facilities. All the WASH facilities were handed over to the Department of Public Health Engineering (DPHE) and the local people who were the owner of the WASH facilities. The project also conducted awareness sessions among the households in the community, which conducted awareness sessions on COVID hygiene practice.

#### 4.3.1 Observation of toilets

Under the study out of repaired toilets, 20 toilets were selected randomly and visited for observation. Out of 20 toilets, 18 toilets were in good condition while in one case the latrine was broken by functional and in one case the latrine was not functional. In all the cases, the doors were fine, could be locked from inside, there was functional light. The major improvement area noted was there was no handwashing facility inside the latrine, and there was not sufficient space and provisions for female menstrual needs. In 10 cases there was no natural light inside the toilet.

*Table 5: Observation of toilets*

	Toilet
Latrine appears in good working order (water seal functional, and pit not clogged)	18
Latrine is not very well maintained (e.g., water seal broken but pit not clogged, and latrine can still be used)	1
Latrine is in poor condition (e.g., water seal broken, pit clogged this toilet is not functional, not usable)	1
The doors of the latrine were not broken	20
The door can be locked from inside	20
Adequate space and provisions for female menstrual needs e.g., cleaning, drying or disposal of sanitary napkins were available	8
The latrine was accessible to disabled people, elderly and pregnant women	1
The latrine was segregated by gender and was clearly marked	19
The latrine has natural light when the door is closed	10
The latrine has functional electric light	20
The latrine room can be locked from the inside	15
The latrine has hooks to hang clothes while changing	17
Hand washing facility is visible from the latrine	15
Hand washing facility is visible inside the latrine	5
<b>Base:</b>	<b>20</b>

### 4.3.2 Observation of bathing cubicles

There were 15 bathing cubicles observed under the study, and in all the cases the bathing cubicles were close to water source, had adequate drainage facility, and ensured privacy. However, these were not segregated by gender and was clearly marked. In all cases the bathing cubicle was found not accessible to disabled people, elderly and pregnant women.

*Table 6: Observation of bathing cubicles*

	Bathing Cubicle
Adequate space and provisions for female menstrual needs e.g., cleaning, drying or disposal of sanitary napkins were available	12
Located close to the water points so that people do not have to transport water long distances for bathing	15
Drainage for the wastewater was adequate	15
The latrine was segregated by gender and was clearly marked	0
Bathing Cubicle was accessible to disabled people, elderly and pregnant women	0
Bathing Cubicle ensured the privacy of the users	15
<b>Base</b>	<b>15</b>

### 4.3.3 Occupation of the Host Community household respondents

In the survey, a total of 100 people were surveyed, among them 25 (25%) were male and 75 (75%) were female from the host community households. Among the female respondents, almost all (92%) were housewives, while 4% were housemaids. Among males, 28% were unskilled labor, followed by business (24%) and skilled labor (16%). There were 16% males who were unemployed.

*Table 7: Occupation of the Respondents*

Occupation	Gender		Total
	Male	Female	
Housewife	0.0%	92.0%	69.0%
Unskilled labor	28.0%	0.0%	7.0%
Business	24.0%	0.0%	6.0%
Skilled labor	16.0%	2.7%	6.0%
Unemployed	16.0%	1.3%	5.0%
Housemaid	0.0%	4.0%	3.0%
Student	4.0%	0.0%	1.0%
Non govt. Job	4.0%	0.0%	1.0%
Farmer (other's land)	4.0%	0.0%	1.0%
Farmer (own land)	4.0%	0.0%	1.0%
<b>Base-All respondents</b>	<b>25</b>	<b>75</b>	<b>100</b>

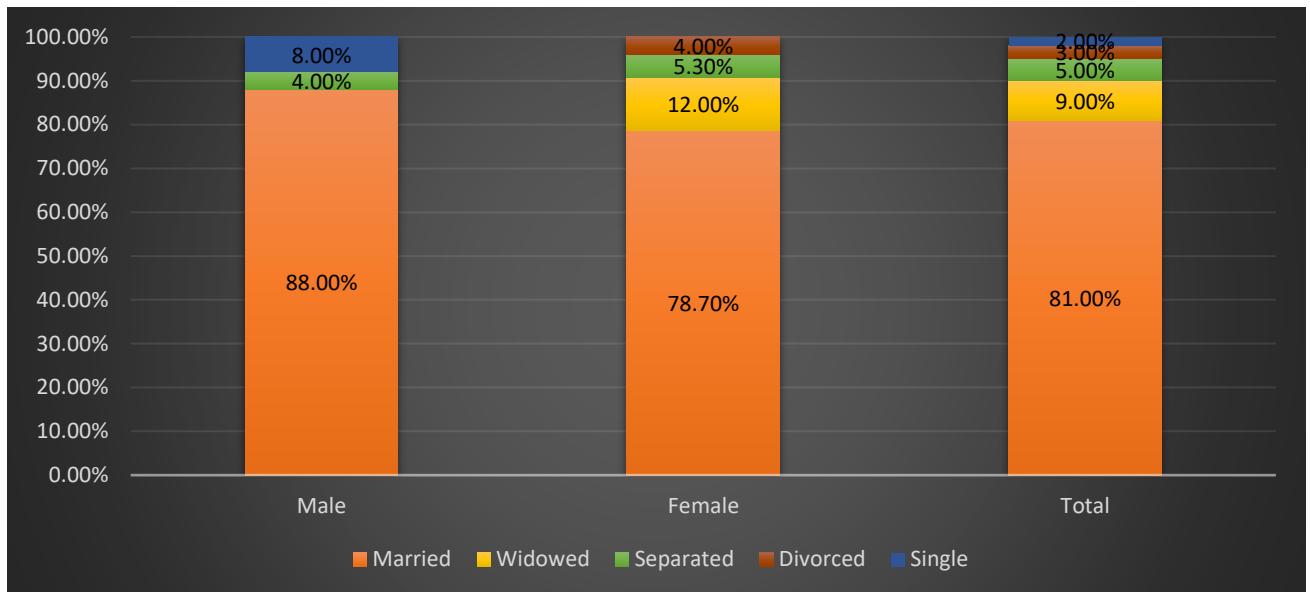
Ref: D.3 What are you doing now?



#### 4.3.4 Marital Status of the Respondents

Most of the respondents (81%) were married whereas only 02% were unmarried. Again, among the respondents 9% were widows, 5% separated and 3% divorced. It is also found that all the divorced and widowed respondents were female. The rate of separation is also found higher among the female respondents.

Figure 24: Marital Status of the Respondents

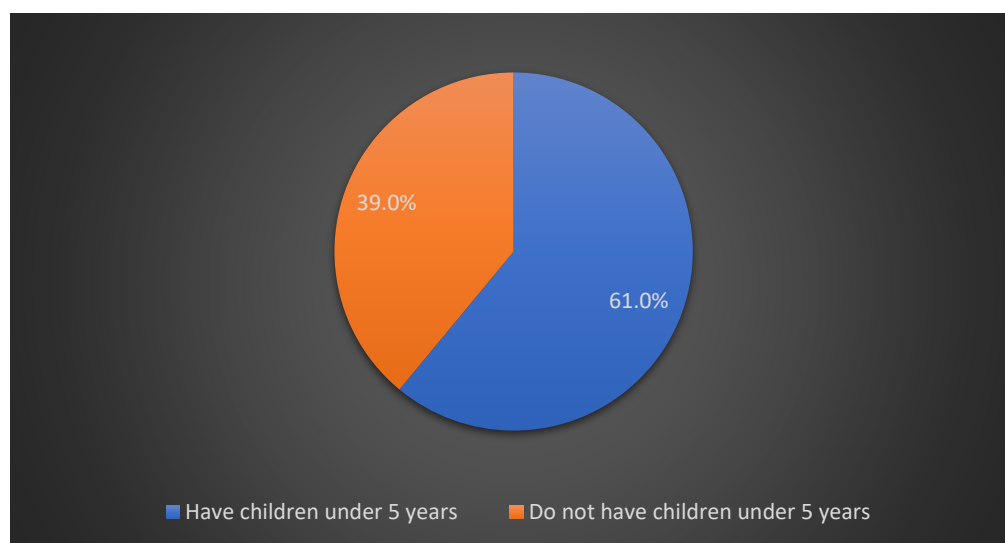


Ref: D.4 What is your marital status now: are you married; living with a partner, not married; widowed; divorced; or separated?

#### 4.3.5 Having children below 05 Years

Majority (61%) of the respondents have children below 05 years in their household whereas only 39% of them have no child below 5 years. It is also found that most of the respondents having children below 05 are between the age range of 18-25 years (35%) and 26-35 years (45%).

Figure 25: Having children below 05 Years.

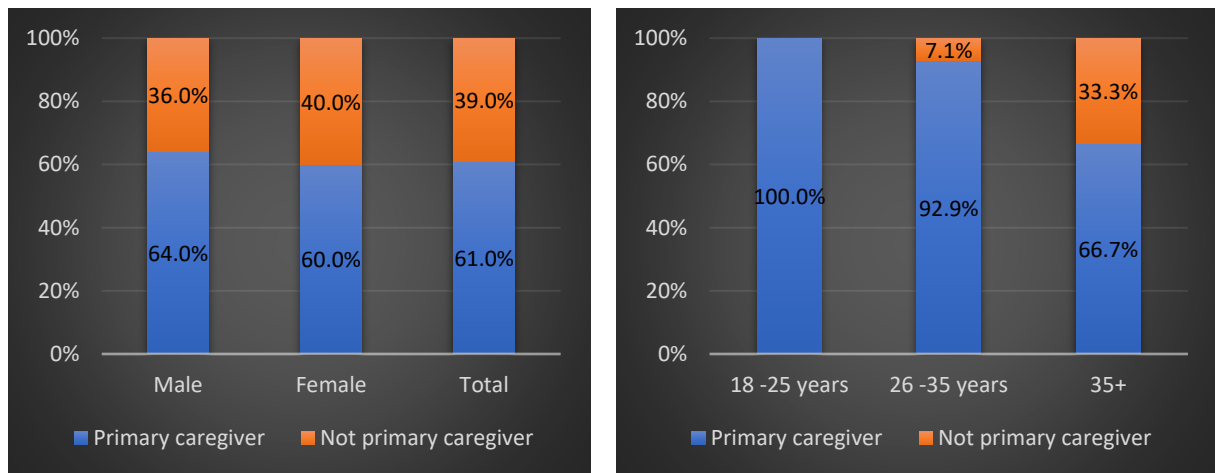


Ref: D5. Does your household have any children under 5?

#### 4.3.6 The primary caregiver of children under five years old living in the respondents' household

The majority (61%) of the respondents claimed themselves as the primary caregiver of the children below 05 years living in their household. It is also claimed by the respondents that among male respondents 64% are primary caregivers whereas among the female respondents 60% are the primary caregivers. Moreover, in terms of age, 47% of the respondents from the age range of 18-25 years are primary caregiver on the other hand, 38% are from the age range of 26-35 years and 15% are from the age range of above 35 years. In the questionnaire, there was no definition set for the primary caregiver, but it was noticed that a higher number of respondents considered themselves as the primary caregivers. It was also noted that the presence of primary caregivers was higher among relatively younger respondents.

Figure 26: The primary caregiver of children under five years old living in the respondents' household

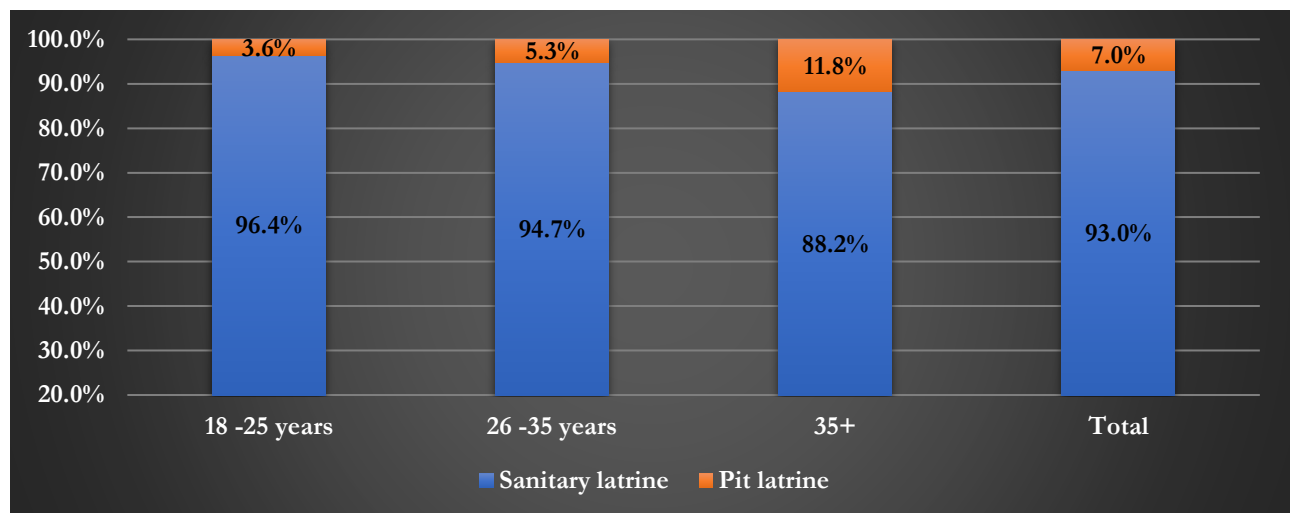


Ref: D6. Are you the primary caregiver of children under five years old living in your household?

#### 4.3.7 Types of latrine the respondents use most often.

Most (93%) of the respondents mentioned that they were using sanitary latrine whereas only 7% of them were using a pit latrine. It is also found that most of the respondents who young (between the age of 18 to 35 years) are using sanitary latrine more rather than that of the aged people (above 35 years).

Figure 27: Types of latrine the respondents use most often.

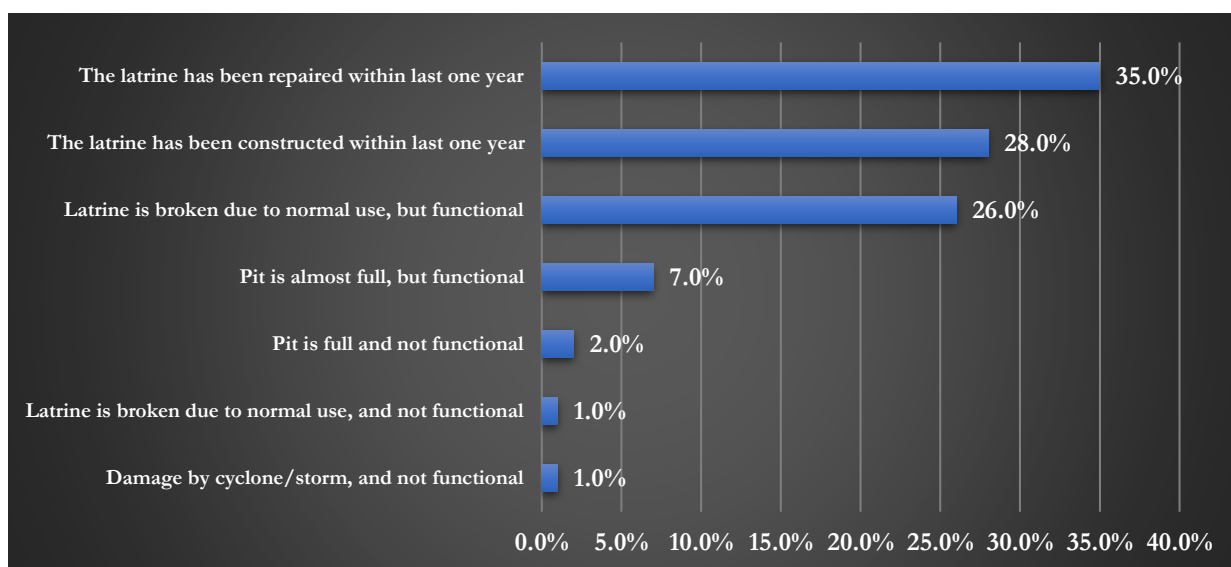


Ref: Q1. Thinking about the latrine you use most often; what type of latrine is it?

### 4.3.8 The condition of the latrine

Among the respondents, one-third (35%) mentioned regarding the present situation of the latrine that the latrine has been repaired within last one year, followed by latrine has been constructed within last one year (28%) and broken due to normal use, but functional (26%).

Figure 28: The condition of the latrine

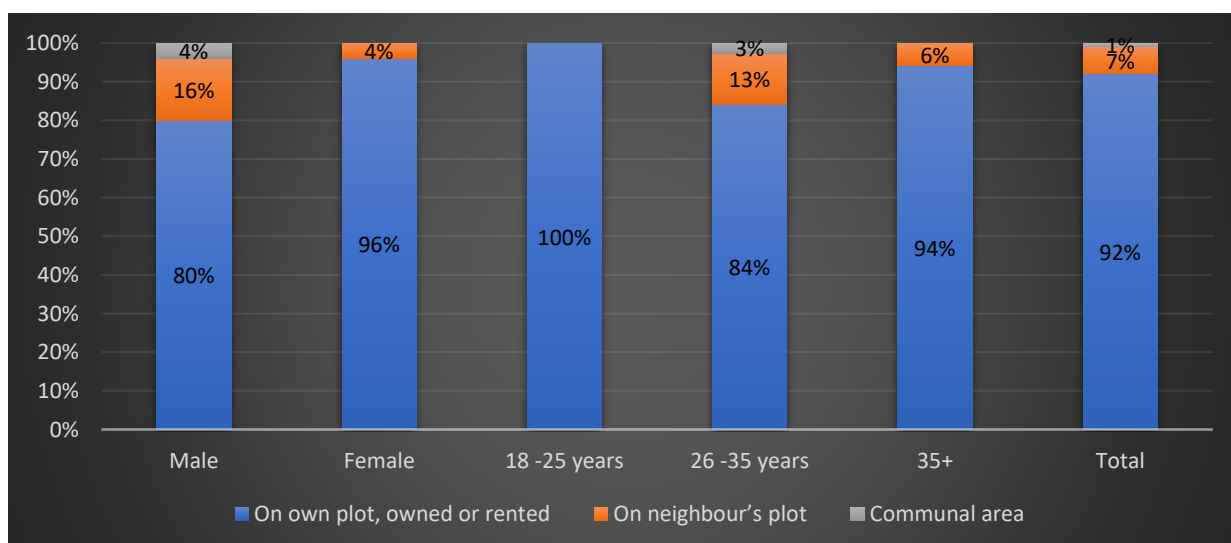


Ref: Q2. What is the current condition of the latrine?

### 4.3.9 Place of the latrine which the respondents use most often.

During the survey, the respondents were asked about the place of the latrine which they use most often. Most of them (92%) mentioned that the latrine is situated on its own plot, owned or rented. Again, 7% mentioned the place that it is situated on neighbor's plot and only 1% mentioned that it is situated on the communal area. Moreover, it is also found that 100% of the respondents from the age range 18 to 25 years; 84.2% from the age range 18 to 25 years; and 92% from the age range above 35 years have their latrine on their own plot, owned or rented.

Figure 29: Place of the latrine which the respondents use most often.



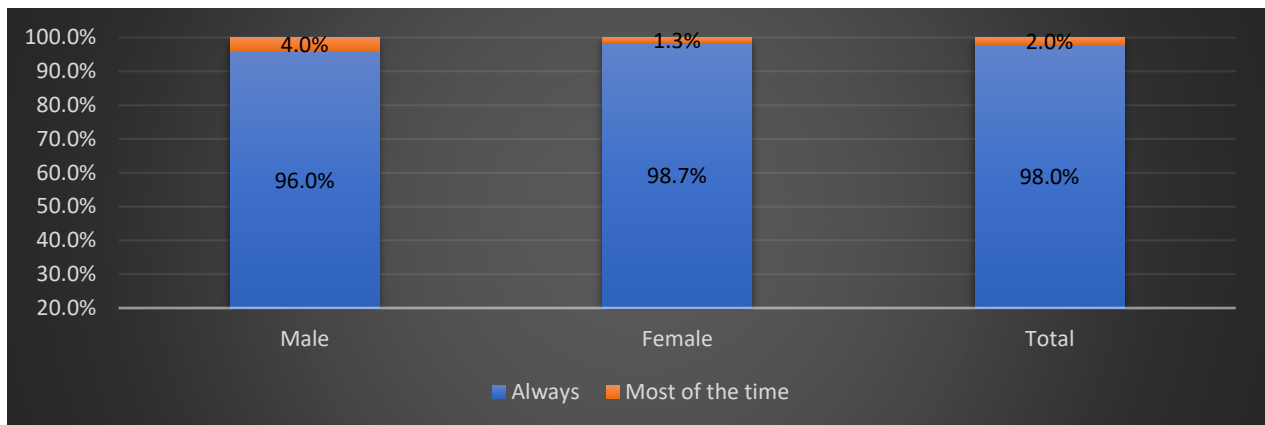
Ref: Q3. On whose land is the latrine which you use most often?

#### 4.3.10 Frequency of using the latrine when the respondents need to defecate.

The majority (35%) of the respondents mentioned that they always used the latrine when they need to defecate whereas only 02% mentioned that they used it most of the time. Moreover, in terms of gender, it is found that female (98.7%) used the latrine more frequently than that of the male (96%). The respondent who could not use the latrine all the time were asked the reason for not being able to use latrines and the following responses were collected from the respondents.

- When latrine is clogged, or pit is full mentioned by 1 female respondent aged between the range of 26-35 years.
- When surge tide occurs or during heavy rain fall, mentioned by 1 male respondent aged between the range of 26-35 years.

Figure 30: Frequency of using the latrine when the respondents need to defecate.

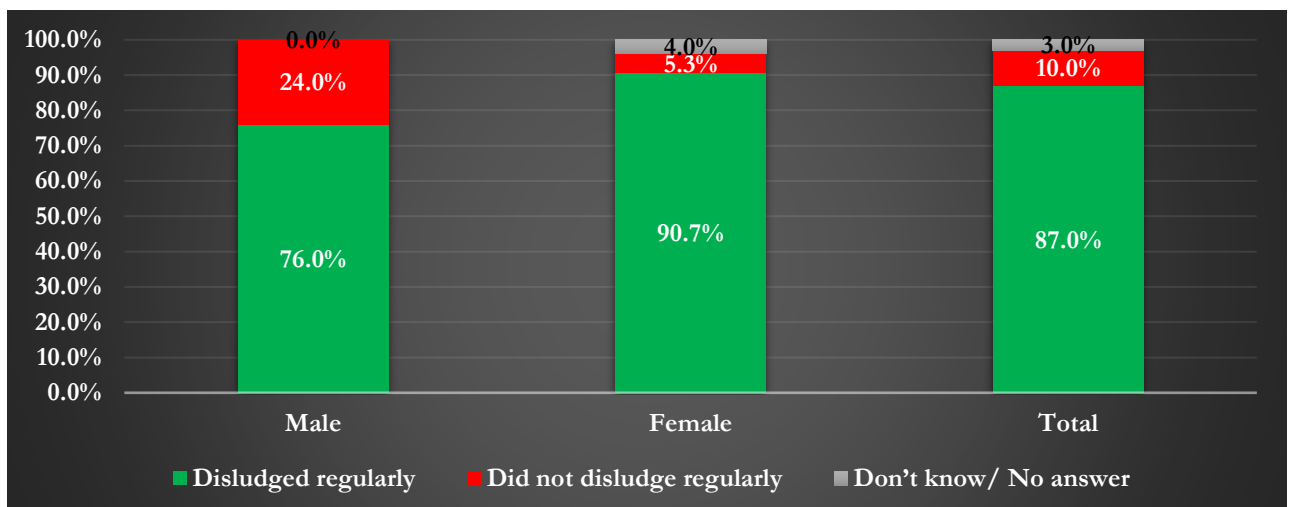


Ref: Q4. When you or your family members are at home and need to defecate, how often do you use the latrine?

#### 4.3.11 Whether the latrine is dislodged regularly

Among the respondents, the majority (87%) of them mentioned that the latrine dislodged regularly whereas only 10% mentioned that the latrine did not dislodge regularly. again, 3% of the respondents mentioned don't know/any answer. Moreover, in respect of gender, it is also found that females (90.7%) found the latrine dislodged more frequently than that of the male (76%), which implied that male respondents found the latrine full more frequently than the females.

Figure 31: Whether the latrine is dislodged regularly.

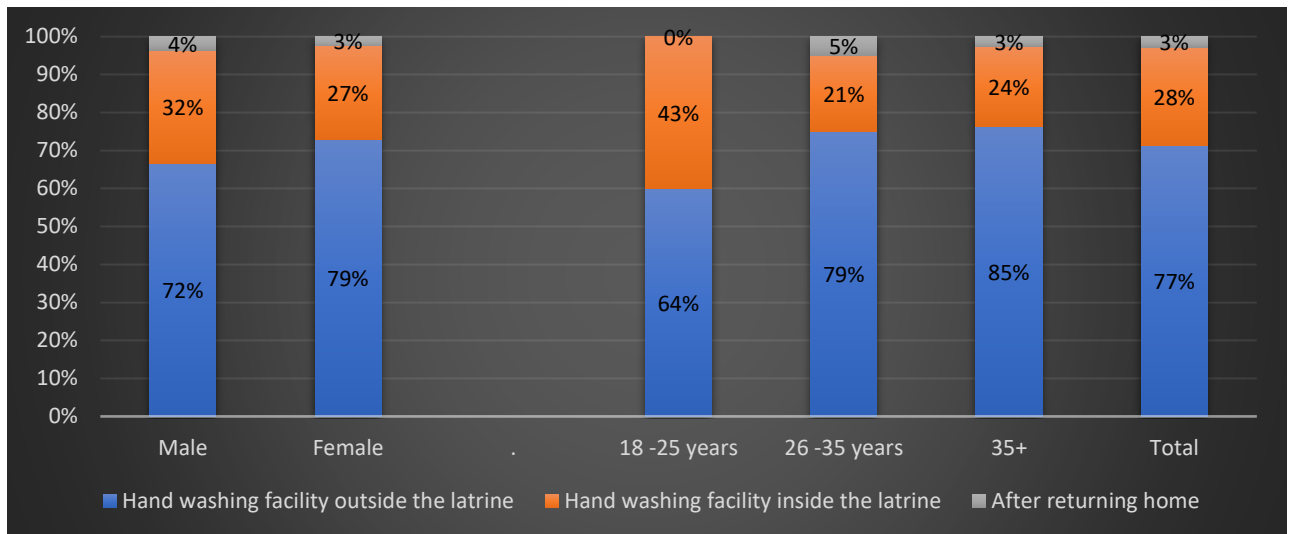


Ref: Q6. Is the latrine dislodged regularly?

#### 4.3.12 Process of washing hand after defecation

During the survey, the respondents were asked about the process of washing hands after defecation. Most of them (77%) mentioned that they have a hand washing facility outside the latrine whereas 28% mentioned that there is a hand washing facility inside the latrine and only 3% mentioned they washed their hands after returning home. In comparison to males, more females found to wash their hands outside the latrine. Moreover, it is also found that 64% of the respondents from the age range 18 to 25 years; 79% from the age range 26 to 35 years; and 85% from the age range above 35 years have the hand washing facility outside the latrine.

Figure 32: Process of washing hand after defecation

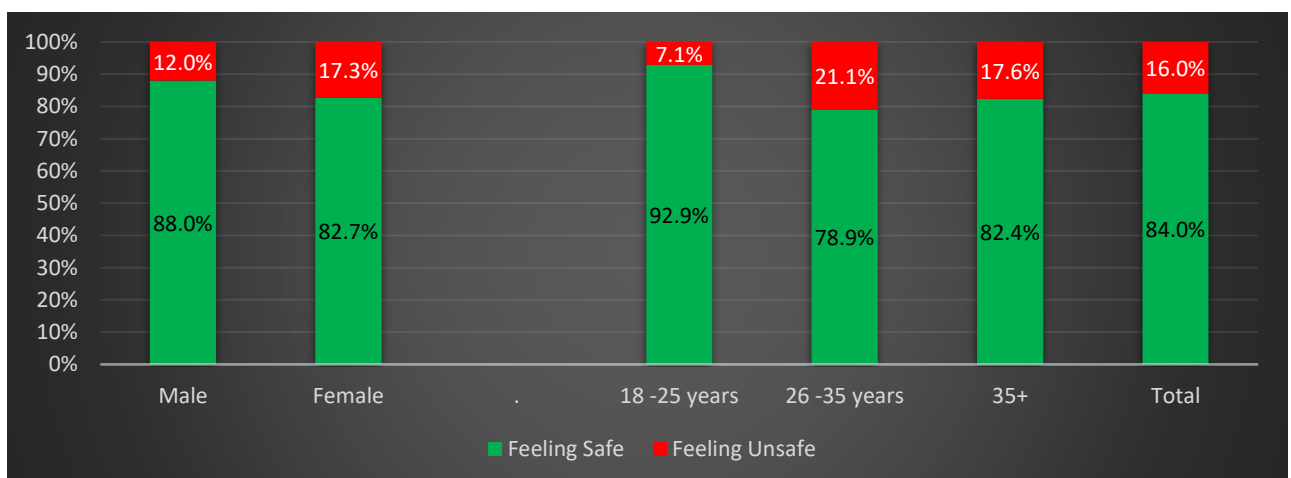


Ref: Q7. How do you wash your hand after defecation?

#### 4.3.13 Safety feeling during using the latrine.

The majority (84%) of the respondents feeling safe during using the latrine. It is also found that males (88%) are feeling safer using the latrine than females (82.7%). Moreover, in terms of age, it is found that 92.9% of the respondents from the age range 18 to 25 years; 78.9% from the age range 26 to 35 years; and 84% from the age range above 35 years are feeling safer to use the latrine. It implied that relatively younger respondents felt safer using the latrines than relatively aged respondents.

Figure 33: Safety feeling during using the latrine.

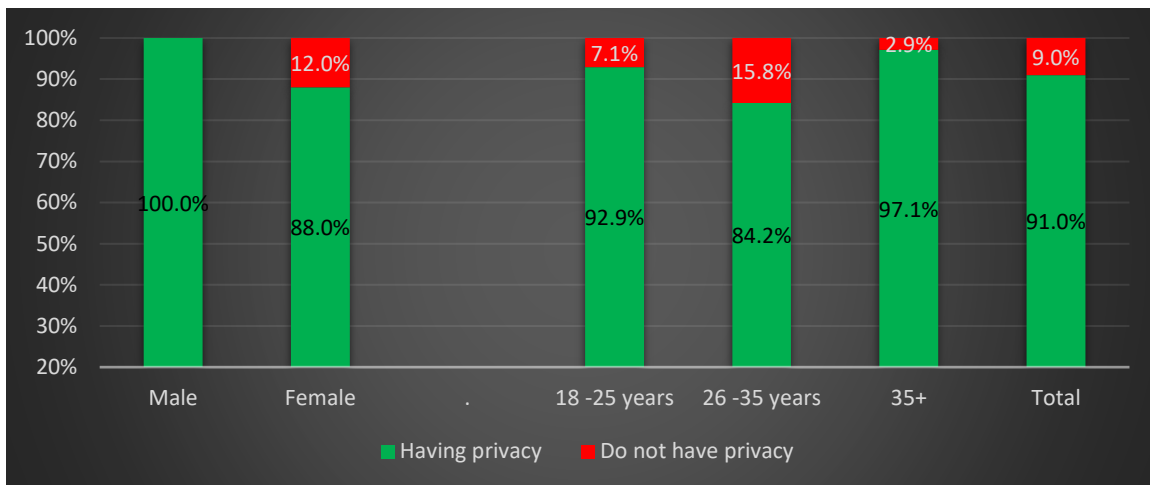


Ref: Q8. Do you feel safe using the latrine?

#### 4.3.14 Feeling regarding privacy during using sanitation facilities

Most (91%) of the respondents mentioned that they had a safe feeling regarding privacy during using sanitation facilities. Again, it was found that all males (100%) had a safe feeling regarding privacy during using sanitation facilities whereas 88% of female respondents had the same feelings. Moreover, in terms of age, 92.9% of the respondents from the age range 18 to 25 years; 84.2% from the age range 26 to 35 years; and 97.1% from the age range above 35 years mentioned that they have privacy during using sanitation facilities.

Figure 34: Feeling regarding privacy during using sanitation facilities.

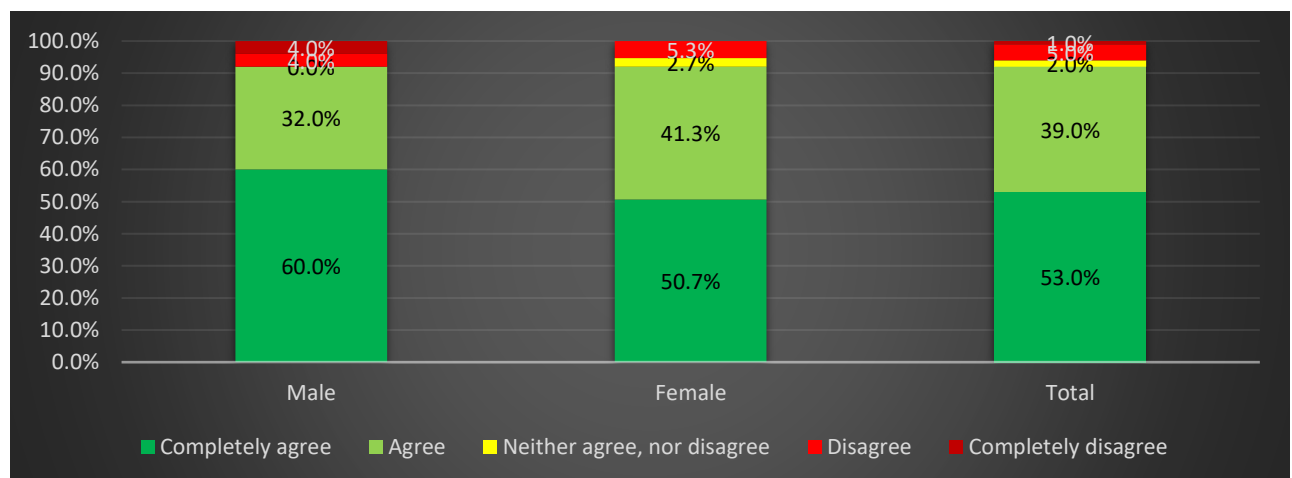


Ref: Q9. Do you feel you have privacy when you use sanitation facilities?

#### 4.3.15 Improvement of sanitation facility in last one year

The respondents were asked to understand their level of agreement regarding the improvement of sanitation facilities in the respondents' community in the last year. It was recorded on a 5-point scale where 5 means the respondents completely agree that the sanitation facility had been improved in the last year while 1 means the sanitation facility had not improved at all. Among the respondents, 53% completely agreed whereas only 1% completely disagreed with the statement. Moreover, 39% agreed that the sanitation facility had improved; 5% mentioned neither agree, nor disagree, and only 2% mentioned disagree. It is also found that more male respondents mentioned the improvement of the sanitation facility than that of the female respondents.

Figure 35: Improvement of sanitation facility in last one year

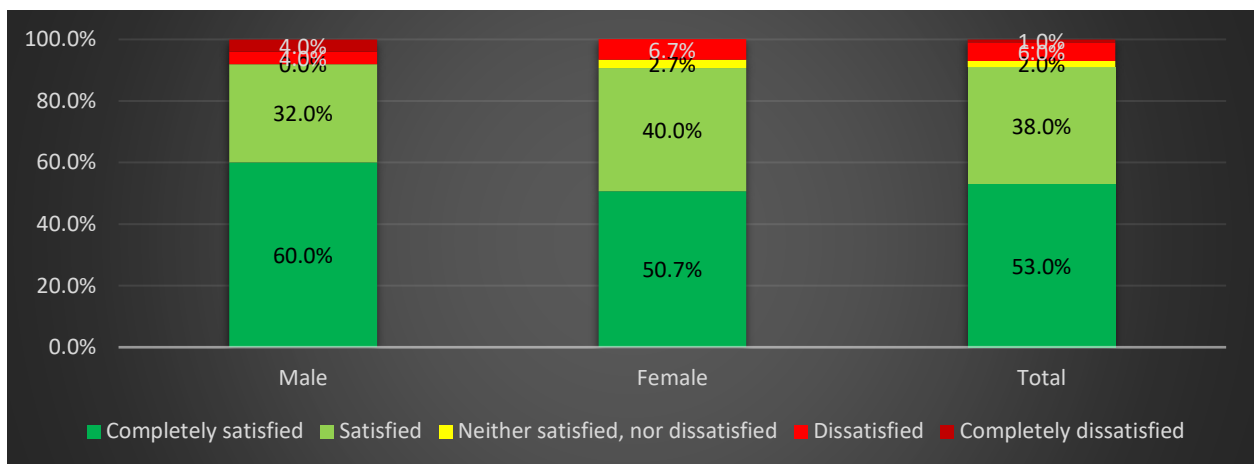


Ref: Q10. How much do you agree or disagree that the sanitation facility in your community has improved in the last one year?

### 4.3.16 Satisfaction with the sanitation facility

A question was asked the respondents to understand the level of satisfaction of the respondents with the current sanitation facility in their community. It was recorded on a 5-point scale where 5 means the respondents completely satisfied with the current sanitation facility in their community while 1 means they were not satisfied with the current sanitation facility at all. Among the respondents, 53% mentioned completely satisfied whereas only 1% mentioned completely dissatisfied. Moreover, 38% satisfied with the current sanitation facility; 6% mentioned neither satisfied nor dissatisfied, and only 2% mentioned dissatisfaction. It is also found that males respondents were more satisfied with the current sanitation facility than female respondents.

Figure 36: Satisfaction with the sanitation facility

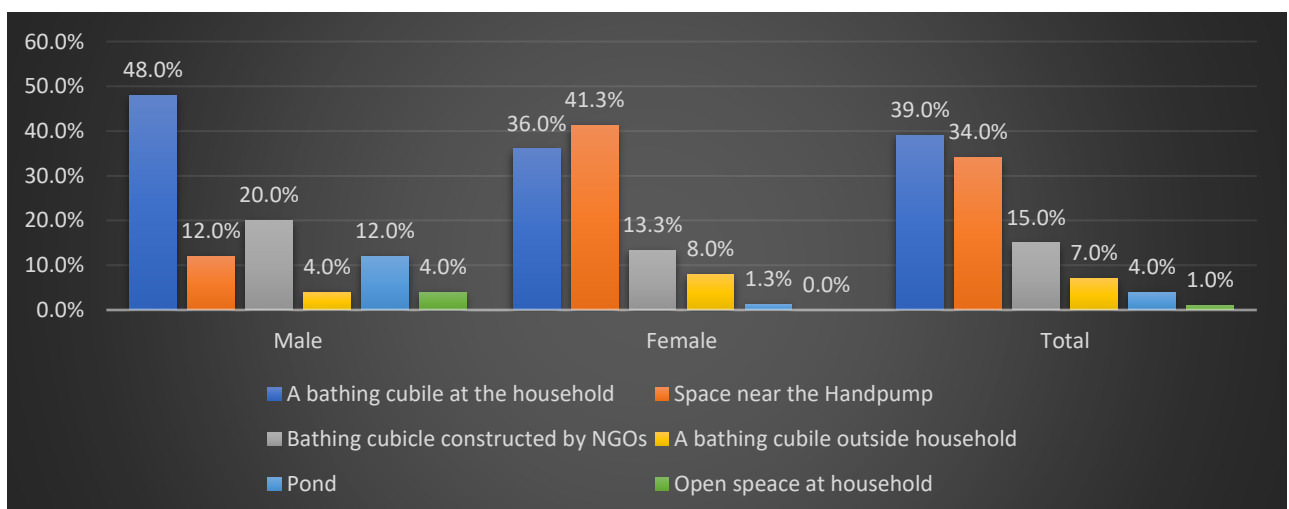


Ref: Q11. How much satisfied are you with the current sanitation facility in your community?

### 4.3.17 Place of taking bath.

The respondents were asked about the place of taking bath. The majority (39%) of the respondents mentioned that they have a bathing cubicle at the household whereas only 1% mentioned that they took bath in an open space at their household. Again, 34% mentioned space near the handpump; 15% mentioned bathing cubicle constructed by NGOs; 7% mentioned a bathing cubicle outside the household, and 4% mentioned pond as their bathing place. It is also found that most of the male respondents (48%) had a bathing cubicle in the household whereas most of the female respondents (41.3%) had to take bath in a space near the handpump.

Figure 37: Place of taking bath.

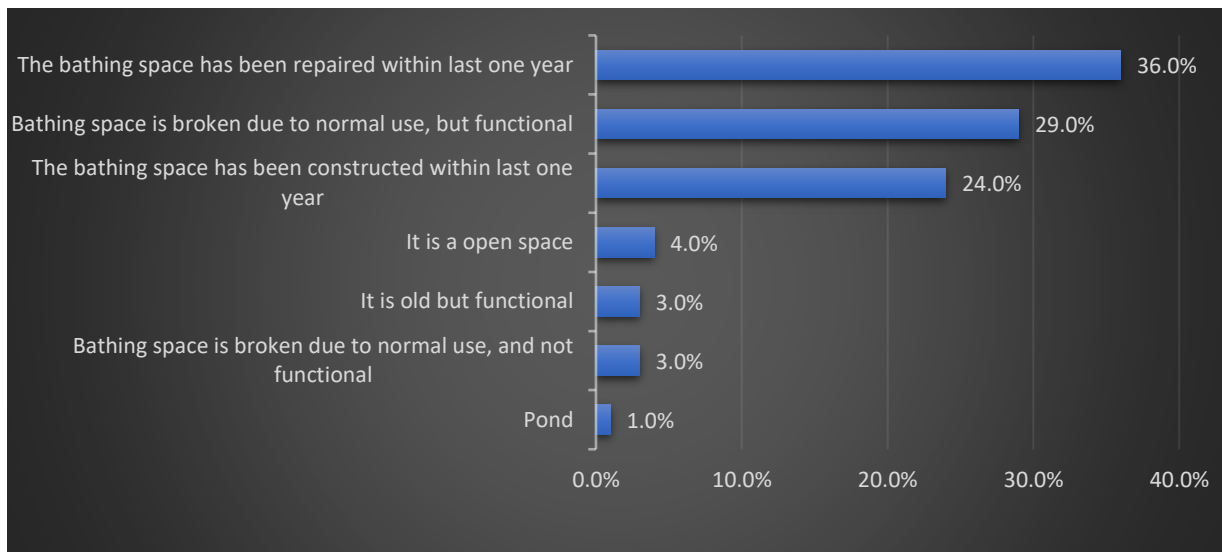


Ref: Q12. Where do you usually take a bath?

### 4.3.18 The condition of the bathing cubicle

Among the respondents, the majority (36%) mentioned regarding the present situation of the bathing space that the bathing space has been repaired within last one year. Again, 29% mentioned the bathing space is broken due to normal use, but functional; 24% mentioned the bathing space has been constructed within last one; 4% mentioned they took bath in an open space, and 3% mentioned bathing space is broken due to normal use, and not functional, and bathing space is old, but functional respectively.

Figure 38: The condition of the bathing cubicle

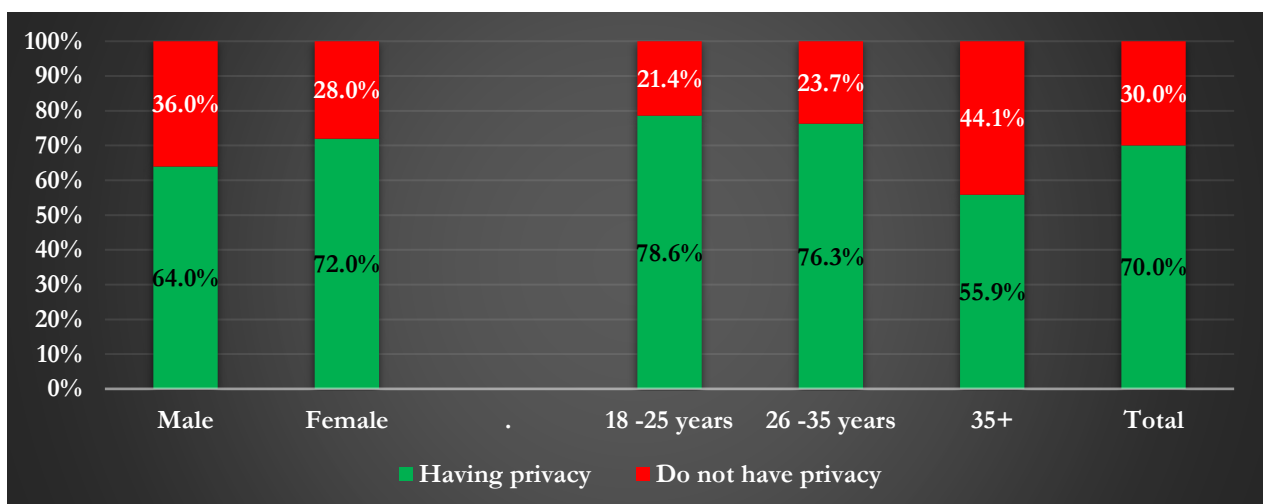


Ref: Q13. What is the current condition of the bathing space?

### 4.3.19 Privacy during using bathing facilities.

Respondents were asked a question to understand their feeling regarding privacy during using bathing facilities. Most (70%) of the respondents mentioned that they had privacy during using bathing facilities. Again, it is found that females (72%) perceived to have more privacy during using bathing facilities than that of the male respondents (64%). Moreover, in terms of age, 78.6% of the respondents from the age range 18 to 25 years; 76.3% from the age range 26 to 35 years; and 55.9% from the age range above 35 years mentioned that they have privacy during using bathing facilities. So, it can be stated that the young respondents have more privacy than the aged respondents.

Figure 39: Privacy during using bathing facilities.



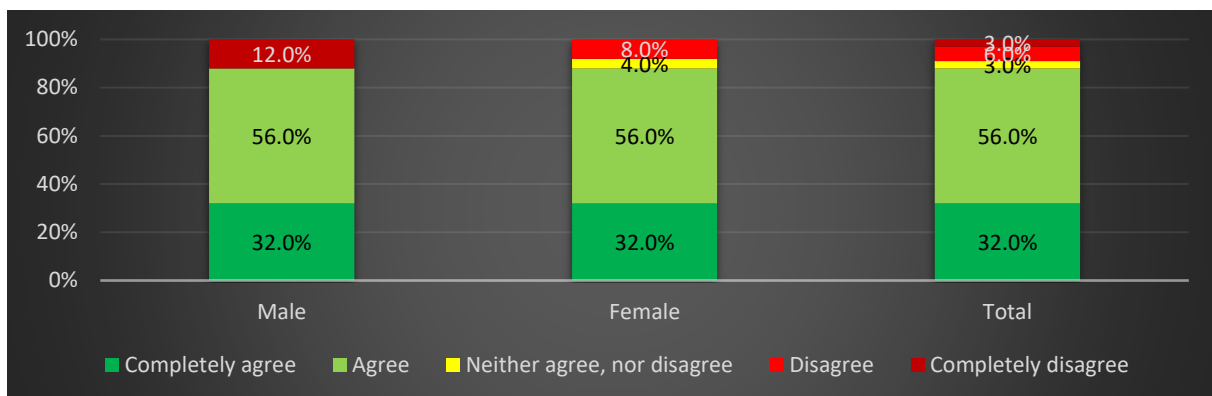
Ref: Q14. Do you feel you have privacy when you use bathing facilities?



#### 4.3.20 Improvement of bathing cubicle in the last one year.

The respondents were asked during the survey to understand their level of agreement regarding the improvement of bathing cubicles in the respondents' community in the last year. It was recorded on a 5-point scale where 5 means the respondents completely agree that the bathing cubicle had been improved in the last year while 1 means the bathing cubicle had not improved at all. Among the respondents, 56% mentioned agreeing whereas only 3% mentioned completely disagree. Moreover, 32% completely agreed that the bathing cubicle had improved; 3% mentioned neither agree, nor disagree, and 6% mentioned disagree. It is also found that both the male and the female respondents mentioned the improvement of the bathing cubicle similarly, but 8% of females disagreed with the statement while 12% of males completely disagreed with this.

Figure 40: Improvement of bathing cubicle in the last one year.

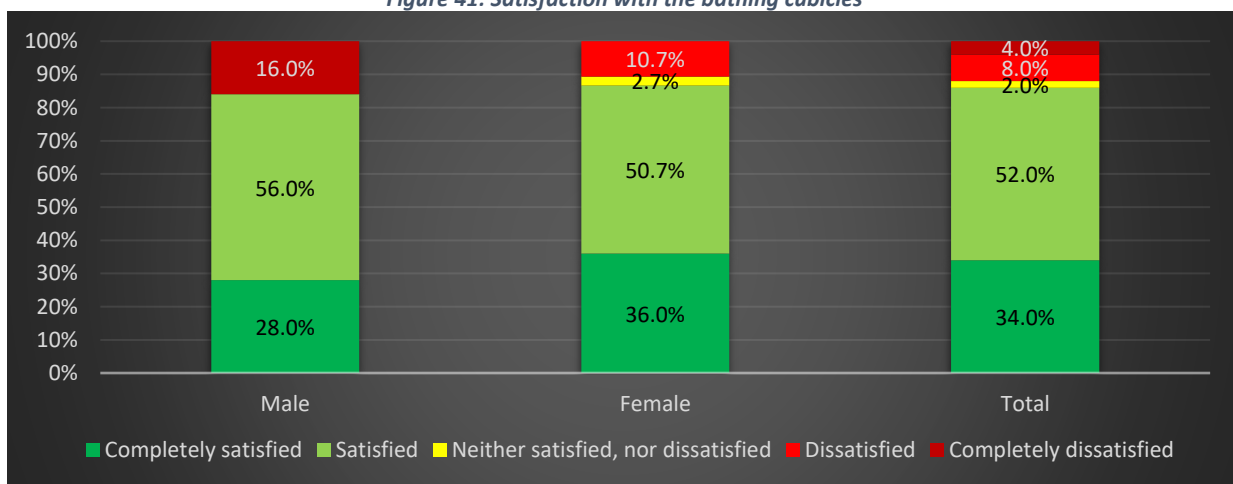


Ref: Q15. How much do you agree or disagree that the bathing cubicle in your community has improved in the last one year?

#### 4.3.21 Satisfaction with the bathing cubicles

A question was asked the respondents to understand the level of satisfaction of the respondents with the current bathing cubicle in their community. It was recorded on a 5-point scale where 5 means the respondents completely satisfied with the current bathing cubicle in their community while 1 means they were not satisfied with the current bathing cubicle at all. Among the respondents, 52% mentioned satisfied whereas only 4% mentioned completely dissatisfied. Moreover, 34% completely satisfied with the current bathing cubicle; 2% mentioned neither satisfied, nor dissatisfied; and 8% mentioned dissatisfied. It is also found that female respondents were more satisfied with the current s bathing cubicle than that of the male respondents. The following graph shows that the female respondents were more satisfied with the bathing cubicles and 16% of male respondents (n=5) were highly dissatisfied with the facility.

Figure 41: Satisfaction with the bathing cubicles



Ref: Q16. How much satisfied are you with the current bathing cubicle in your community?

#### 4.3.22 The hygiene practices during COVID 19 situation

The respondents were asked during the survey to understand whether they had heard the word COVID or coronavirus. All the respondents mentioned affirmatively that they had heard the word COVID or coronavirus. During the survey, the respondents were asked about the hygiene practices that they followed during the situation of the corona. Among the respondents, almost all (99%) mentioned that they washed their hands with soap or soap substitute for 20 seconds frequently, while 98% mentioned they refrained themselves from gathering; 53% mentioned wearing a mask, 50% stayed at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing); 33% washed their hands with soap or soap substitute for 20 seconds after coughs or sneeze, and 21% had minimized physical contact. Moreover, 17% mentioned that they covered coughs or sneeze properly with the elbow; 13% washed their hands with soap or soap substitute for 20 seconds after attending a patient; 12% avoided touch face with unsensitized hands.

*Table 8: The hygiene practices during COVID 19 situation*

Hygiene Practices	Gender		Total
	Male	Female	
Washing hands with soap or soap substitute for 20 seconds frequently	96.0%	100.0%	99.0%
Refrain from gathering	100.0%	97.3%	98.0%
Wear mask	64.0%	49.3%	53.0%
Stay at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing)	32.0%	56.0%	50.0%
Washing hands with soap or soap substitute for 20 seconds after coughs or sneeze	8.0%	41.3%	33.0%
Minimize physical contact	8.0%	25.3%	21.0%
Cover coughs or sneeze properly with elbow	20.0%	16.0%	17.0%
Washing hands with soap or soap substitute for 20 seconds after attending a patient	4.0%	16.0%	13.0%
Avoid touch face with unsensitized hands	8.0%	13.3%	12.0%
Washing hand before cooking and eating	0.0%	6.7%	5.0%
Drinking tea/drinking warm water	4.0%	4.0%	4.0%
Washing hands with soap or soap substitute for 20 seconds after taking care of poultry and cattle	0.0%	2.7%	2.0%
Wear hand gloves	0.0%	1.3%	1.0%
<b>Base-All respondents</b>	<b>25</b>	<b>75</b>	<b>100</b>

**Ref: Q18. What hygiene practices are you following during the current situation of corona?**

## 4.4 Study findings for Component II: Students

### 4.4.1 Name of the school/madrasa of the Respondents

During the design of the project, it was planned to conduct awareness session among the students of 4 selected schools, which include.

- Sufia Govt. Primary School
- Rongikhali Khadijatul Kobra Mohila Dakhil Madrasa
- Madrasa Ibne Abbas Al-Islamia
- Al-Jamiatul Islamia Darussunna Madrasa

However, due to COVID 19 situation, the schools were closed, and the awareness activities were conducted door to door. Hence students from different educational institutes were included in the awareness activities. The project visited four schools in Nhilla Union in Teknaf Upazila, the host community for Camps 25 and 27. One of the girls' schools has a bathing area in the toilets for boarding students, but with inadequate partitions and a lack of privacy. Hence, the bathing facility was repaired, which ensured better privacy for the boarding students. Also, the project repaired WASH facilities which were in poor condition.

As mentioned earlier, due to lockdown the awareness activated could not be conducted at the schools. There was accumulative reach for general sessions were 1547 students and for menstrual sessions, the reach was 475 students. In general, there were 516 listed students for general sessions (each student took 3 sessions), 193 listed students for MHM.

*Table 9: Name of the school/madrasa of the Respondents*

Name of the School/Madrasa	Male	Female	Total
Al-Jamiatul Islamia Darussunna Madrasa	25.50%	9.40%	17.30%
Rongikhali Khadijatul Kobra Mohila Dakhil Madrasa	0.00%	32.10%	16.30%
Leda Junior High School	9.80%	7.50%	8.70%
Darul Ulum Madrasah	9.80%	5.70%	7.70%
Madrasa Ibne Abbas Al-Islamia	11.80%	0.00%	5.80%
Sufia Govt. Primary School	5.90%	5.70%	5.80%
Hnila Azizia Madrasa	5.90%	5.70%	5.80%
Hnila High School	9.80%	1.90%	5.80%
Hnila Shah Mozidia Madrasa	3.90%	7.50%	5.80%
Hnila Girls' High School	0.00%	9.40%	4.80%
Leda Govt. Primary School	2.00%	7.60%	4.80%
Hnila Alfalah Academy	5.90%	0.00%	2.90%
Rangikhali Govt. Primary School	2.00%	3.80%	2.90%
Hnila Pre Cadet School	2.00%	0.00%	1.00%
Hnila Ummesalma Al Islamia Mohila Dakil Madrasa	0.00%	1.90%	1.00%
Ibne al Abbas Madrasa	2.00%	0.00%	1.00%
Jomiriya Dorul Quran Alim Madarasha	2.00%	0.00%	1.00%
Rangikali Darul Fajil Madrasah	2.00%	0.00%	1.00%
Shah Majidia Alim Madrasa	0.00%	1.90%	1.00%
<b>Base-All respondents</b>	<b>51</b>	<b>53</b>	<b>104</b>

**Ref: D4. What is the name of your school/madrasa?**

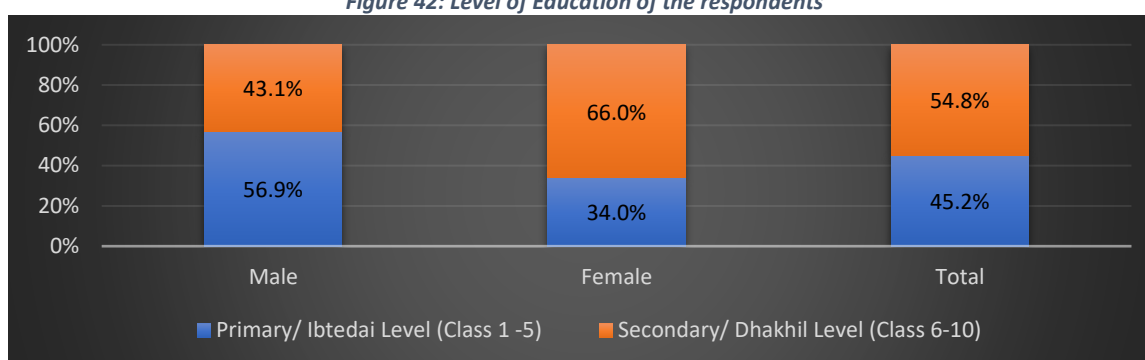
The respondents were asked about the name of their school/ madrasa. Most of the respondents (17.30%) mentioned Al-Jamiatul Islamia Darussunna Madrasa. There were 16.3% students from

Rongikhali Khadijatul Kobra Mohila Dakhil Madrasa, however, this was a girls' Madrasa. Apart from these two, 8.7% mentioned Madrasa Ibne Abbas Al-Islamia and Leda Junior High School respectively. Furthermore, 7.7% mentioned Darul Ulum Madrasah; and 5.8% mentioned Sufia Govt. Primary School, Hnila Azizia Madrasa, Hnila High School, and Hnila Shah Mozidia Madrasa respectively. Moreover, it is also found that among the respondents, most (66.6%) of the respondents are madrasa students.

#### 4.4.2 Level of Education of the respondents

During the survey, the respondents were asked about their level of education. More than half (54.8%) of the respondents were from secondary/ Dhakhil level (class 6-10) whereas 45.2% are from primary/ Ibtedai level (class 1 -5). Among the male students, 56.9% were primary/ Ibtedai level students while among female students' majority (66%) were secondary/ Dhakhil level students. During the survey, an effort was made to ensure that at least 30 female students would have started menstruation during the interview, hence some senior level female students were included in the survey.

Figure 42: Level of Education of the respondents



Ref: D5. What grade are you in?

#### 4.4.3 Types of health-related knowledge that the respondents learned at School/Madrasha.

Apart from this project, students often learn different health-related topics from their school. Hence, the respondents were asked about the types of health-related knowledge that they learned from the School/Madrasha. Among the respondents, the majority (81.7%) mentioned that they learned about regular hand wash, followed by use of soap (58.7%), use of clean water (53.8%), self-care (cleanliness) (51%), and use of sanitary latrine (36.5%). Moreover, 13.5% mentioned nutrition; 5.8% childcare; 10.6% mentioned others (drugs; tobacco; good touch-bad touch; early pregnancy; and puberty; and 8.7% mentioned child marriage; and regular physical exercise respectively.

Figure 43: Types of health-related knowledge that the respondents learned at School/Madrasha.

	Male	Female	Total
Regular hand wash	76.50%	86.80%	81.70%
Use of soap	49.00%	67.90%	58.70%
Use of clean water	47.10%	60.40%	53.80%
Self-care (cleanliness)	43.10%	58.50%	51.00%
Use of sanitary latrine	39.20%	34.00%	36.50%
Nutrition	11.80%	15.10%	13.50%
Menstrual hygiene	3.90%	18.90%	11.50%
Child marriage	7.80%	9.40%	8.70%
Regular physical exercise	11.80%	5.70%	8.70%
Didn't teach anything in school	13.70%	1.90%	7.70%
Childcare	2.00%	9.40%	5.80%
Others	11.90%	9.50%	10.60%
<b>Base-All respondents</b>	<b>51</b>	<b>53</b>	<b>104</b>

Ref: Q1. What do you learn about health at School/madrasha?

#### 4.4.4 Types of knowledge learned by the respondents from the hygiene awareness activities.

The respondents were further asked about their participation in any hygiene awareness activities in last one year. All the respondents mentioned affirmatively that they had participated in at least one hygiene awareness activities in last one year. They were asked about the types of knowledge learnt from the hygiene awareness activities. Among the respondents, the majority (87.5%) mentioned that they learned about public health whereas only 9.6% mentioned about environmental health. Again, 53.8% mentioned personal hygiene; 46.2% latrine hygiene and environmental health; 38.5% food hygiene; and 32.7% mentioned about use of sanitary latrine. Moreover, 13.5% mentioned about nutrition; 5.8% childcare; 10.6% mentioned covid-19 and handwashing; 21.2% menstrual hygiene and 13.5% mentioned hygiene of using water and water-borne acute diarrhea. It was noted that more number of male students (92.2%) were aware of public health than the female students (82%). On the other hand, more female students (58.5%) were aware of latrine hygiene and environmental health than the male respondents (33.3%). There were no male students mentioned about 'menstrual hygiene', while was mentioned by 41.5% female students. These were spontaneous response, and the students mentioned the topics they liked the most or they practiced the most.

Table 10: Types of knowledge learnt by the respondents from the hygiene awareness activities.

	Male	Female	Total
Public health	92.2%	83.0%	87.5%
Personal hygiene	54.9%	52.8%	53.8%
Latrine hygiene and environmental health	33.3%	58.5%	46.2%
Food hygiene	41.2%	35.8%	38.5%
COVID-19 and handwashing	43.1%	22.6%	32.7%
Menstrual hygiene	0.0%	41.5%	21.2%
Hygiene of using water and Water-borne acute diarrhea	5.9%	20.8%	13.5%
Environmental health	9.8%	9.4%	9.6%
<b>Base-All respondents</b>	<b>51</b>	<b>53</b>	<b>104</b>

Ref: Q3. What did you learn from the hygiene awareness activities?

#### 4.4.5 Frequency of wearing slipper during the use of toilet.

The respondents were asked about the frequency of wearing slipper during the use of toilet. All the respondents mentioned that they always wear slipper during the use of toilet.

#### 4.4.6 Times when the respondents wash their hands.

Handwashing with soap removes germs from hands. This helps prevent infections because people frequently touch their eyes, nose, and mouth without even realizing it. Germs can get into the body through the eyes, nose and mouth and make us sick. Germs from unwashed hands can get into foods and drinks while people prepare or consume them. Germs can multiply in some types of foods or drinks, under certain conditions, and make people sick. Germs from unwashed hands can be transferred to other objects, like handrails, tabletops, or toys, and then transferred to another person's hands. Removing germs through handwashing therefore helps prevent diarrhea and respiratory infections and may even help prevent skin and eye infections. Teaching people about handwashing helps them and their communities stay healthy.

Handwashing can have following impact<sup>3</sup>:

- Reduces the number of people who get sick with diarrhea by 23-40%
- Reduces diarrheal illness in people with weakened immune systems by 58%
- Reduces respiratory illnesses, like colds, in the general population by 16-21%
- Reduces absenteeism due to gastrointestinal illness in schoolchildren by 29-57%

The surveyed students were asked about the times in the day when they wash their hands. Most of them (94.2%) mentioned that they washed their hand before eating/ before meals, which was the same for both males (94.1%) and females (94.3%). Again, 68.3% mentioned they washed hands after defecating, which was relatively low among males (62.7%) than the females (73.6%). More than half male (52.9%) and female (50.9%) students mentioned that they washed their hands after eating. While mentioning hand washing practice with specifying the meal type, there was a substantial gap noticed between male and female students. Close to half (47.2%) of the female students washed their hands before touching foods, which was less than 20% among males. Culturally in Bangladesh, women perform the household chores, and in 20% to 35% of cases they washed their hands after such activities, that includes After cleaning the house (34%), after sweeping (28.3%), and after cooking (22.6%).

*Table 11: Times when the respondents wash their hands.*

Times	Gender		Total
	Male	Female	
Before eating/ before meals	94.1%	94.3%	94.2%
After defecating	62.7%	73.6%	68.3%
After eating	52.9%	50.9%	51.9%
Before dinner	58.8%	32.1%	45.2%
Before lunch	60.8%	24.5%	42.3%
Before breakfast	54.9%	20.8%	37.5%
After work	33.3%	39.6%	36.5%
Before touching food	15.7%	47.2%	31.7%
After touching food	31.4%	32.1%	31.7%
After play	41.2%	18.9%	29.8%
After cleaning the house	3.9%	34.0%	19.2%
After sweeping	0.0%	28.3%	14.4%
After cooking	3.9%	22.6%	13.5%
After returning from field	11.8%	1.9%	6.7%
After feeding the cattle	3.9%	7.5%	5.8%
After coming back from school	0.0%	1.9%	1.0%
Before study at night	2.0%	0.0%	1.0%
<b>Base-All respondents</b>	<b>51</b>	<b>53</b>	<b>104</b>

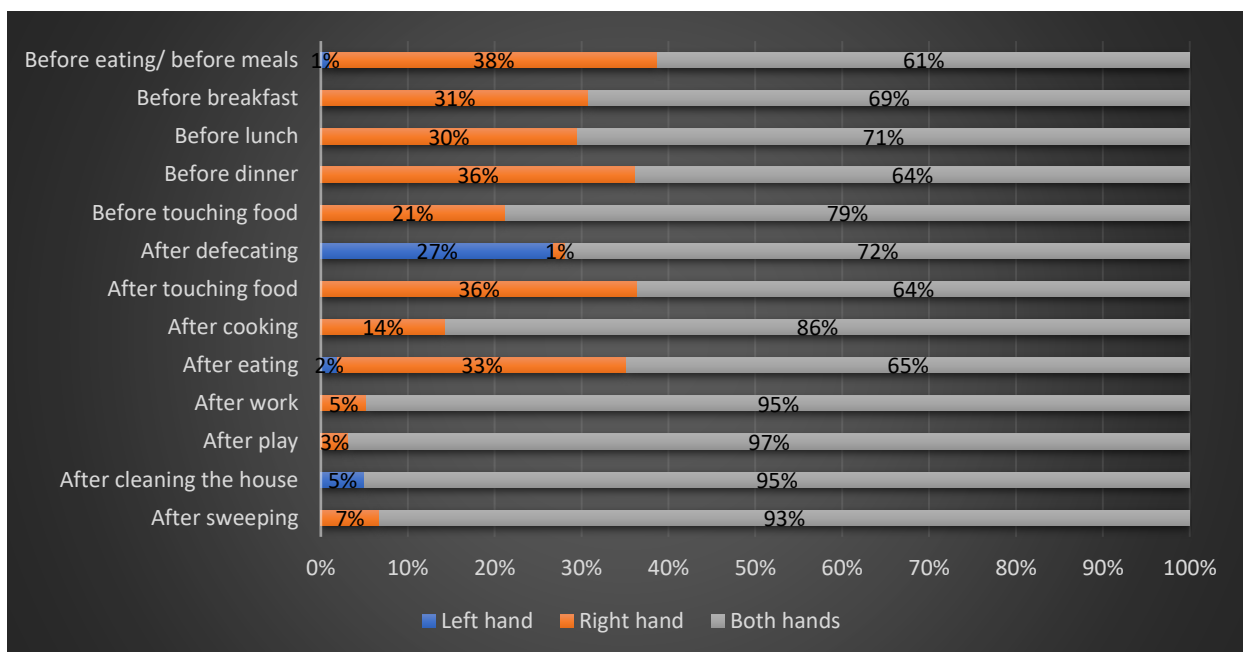
Ref: Q12. At what times in the day do you wash your hands?

<sup>3</sup> <https://www.cdc.gov/handwashing/why-handwashing.html#:~:text=Handwashing%20with%20soap%20removes%20germs,mouth%20and%20make%20us%20sick.>

#### 4.4.7 Hands that the respondents wash

In the project, it was promoted among students to wash their both hands during different critical periods. During the survey, if someone did not mention both hands, the enumerators promoted to wash both hands during different critical times. Majority of the cases the respondents washed both hands, however, a significant number of students mentioned that they used a single hand. Overall, 38% of surveyed students washed their right hands and 1% washed their left hands. Before breakfast, lunch, and dinner 31%, 30%, and 36% of students respectively washed their right hands, while the remaining respondents washed both hands. Just over one-fourth of respondents (27%) washed their left hand after defecation, while 1% of respondents washed their right hand only. Overall, 72% of students washed both hands after defecation. moreover, 36% of students washed their right hand after touching food, which was 33% after eating.

Figure 44: Specific hands that the respondents wash



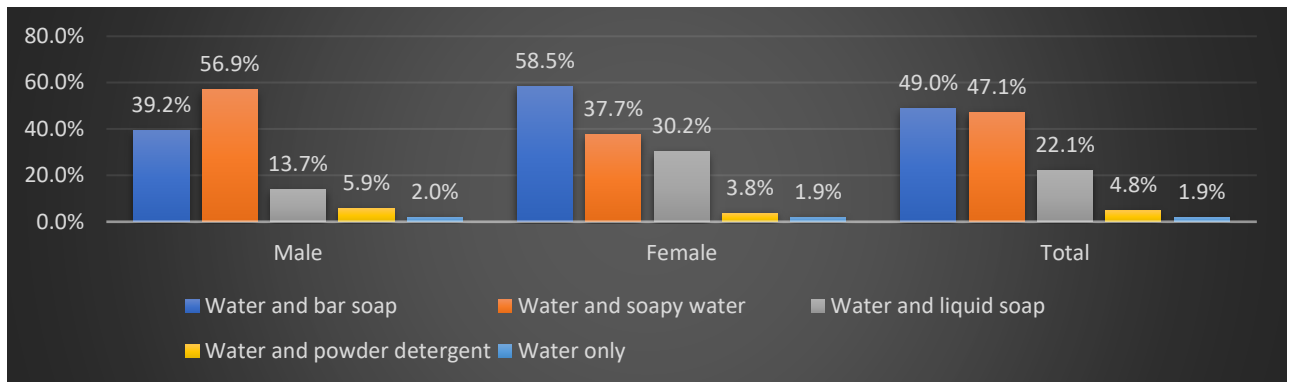
Ref: Q12.1\_A What hand do you wash \_\_\_\_\_?

#### 4.4.8 Ways of washing hands of the respondents at home

During the survey, the respondents were asked about the ways of washing hands at home. Most of them (49%) mentioned that they washed their hands with water and bar soap whereas 1.9% mentioned with water only. Again, 47.1% mentioned they washed their hands with water and soapy water; 22.1% mentioned water and liquid soap, and 4.8% mentioned water and powder detergent. It is also found that most of the female (58.3%) respondents used water and bar soap to wash their hands but most of the male (56.9%) respondents used water and soapy water to wash their hands. Moreover, it is also found that most (46.5%) of the respondents from the age range 10 to 12 years; and most (54.5%) of the respondents from the age range above 15 years used water and bar soap to wash their hands but most (63%) from the age range 13 to 14 years used water and soapy water to wash their hands.



Figure 45: Ways of washing hands of the respondents at home



Ref: 13.1 What do you use to wash your hands when you are at home?

#### 4.4.9 Types of hand washing facility of the respondents at home

The United States Centers for Disease Control and Prevention (CDC) recommends the following steps when washing one's hands for the prevention of transmission of disease:

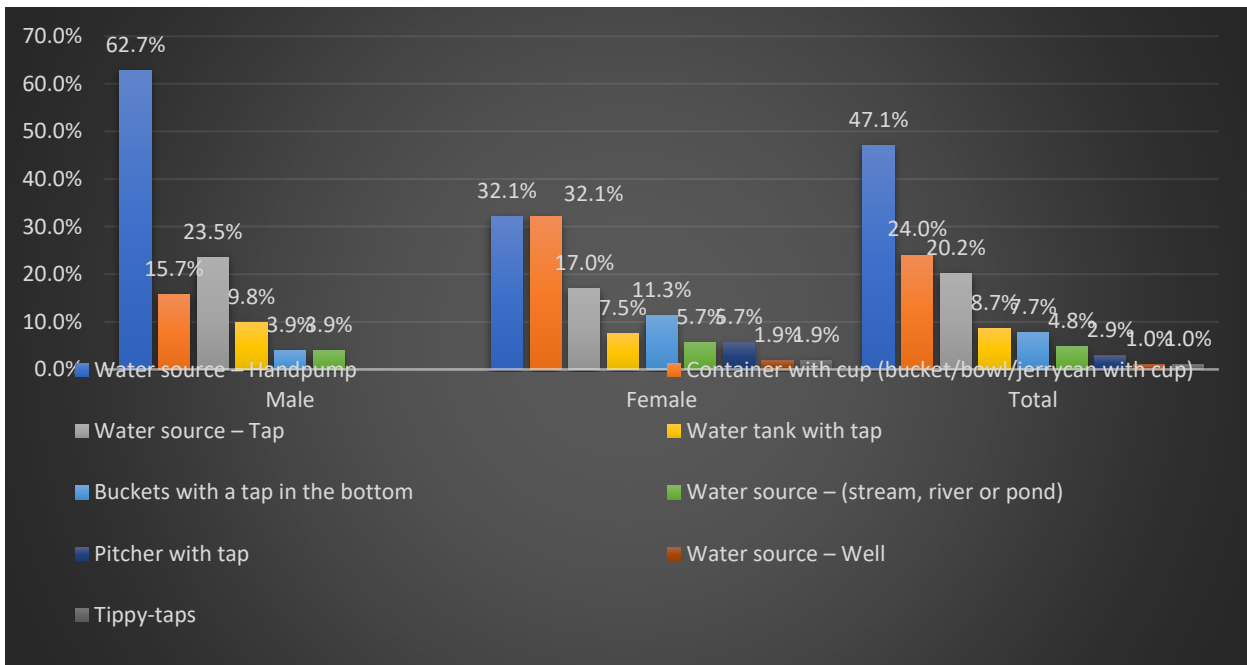
- Wet hands with warm or cold running water. Running water is recommended because standing basins may be contaminated.
- Lather hands by rubbing them with a generous amount of soap or soap substitutes, including the backs of hands, between fingers, and under nails.
- Scrub for at least 20 seconds.
- Rinse well under running water.
- Dry with a clean towel or allow to air dry<sup>4</sup>.

To maintain the steps mentioned above, the handwashing device should have the facility that the user can use it with both hands-free to use. The respondents were asked about types of hand washing facilities at home. Less than half (47.1%) of the respondents mentioned that they are using a water source – handpump. The rate was much higher among male students (62.7%) than female students (32.1%). Furthermore, 24% mentioned containers with cups (bucket/bowl/jerry can with cup) which was higher among females (32.1%) than males (15.7%). Moreover, 20.2% mentioned water source – tap; 8.7% mentioned water tank with a tap; 7.7% mentioned buckets with a tap in the bottom; 4.8% mentioned water source – (stream, river, or pond); and 2.9% mentioned pitcher with a tap as the types of hand washing facility at their home.

<sup>4</sup> "[When and How to Wash Your Hands](https://www.cdc.gov)". [www.cdc.gov](https://www.cdc.gov). 4 December 2019. Retrieved 6 March 2020.



Figure 46: Types of hand washing facility of the respondents at home

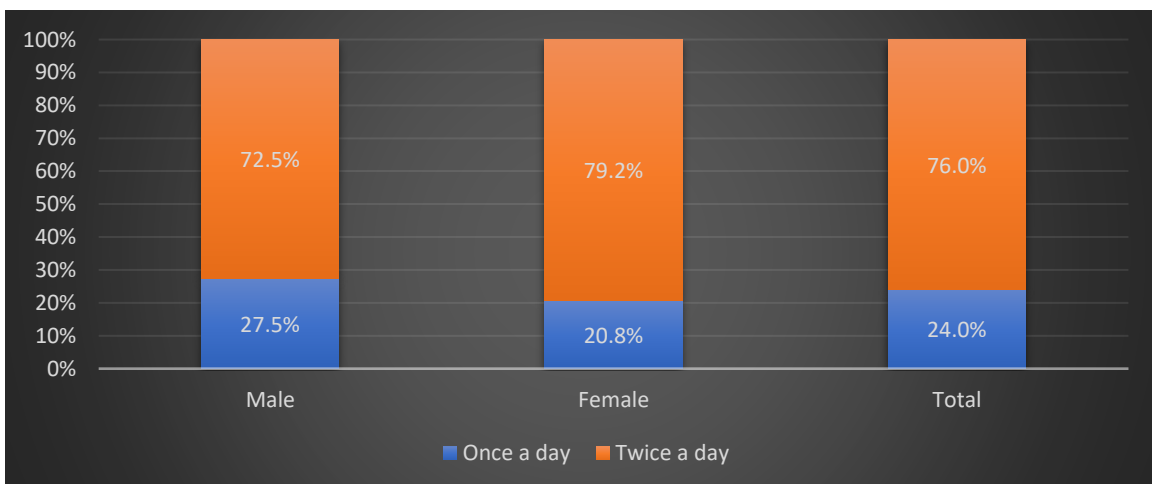


Ref: Q14.1 What type of hand washing facility is it when you wash hands at home?

#### 4.4.10 Frequency of washing teeth in past week per day

The American Dental Association recommends brushing your teeth twice a day with fluoride toothpaste for two minutes each time. When someone brushes their teeth, they help remove food and plaque — a sticky white film that forms on their teeth and contains bacteria. The majority (76%) of the respondents mentioned that they washed their teeth twice a day in the past week whereas 24% mentioned that they washed their teeth once a day. It is also found that most of the male (72.5%) respondents and most of the female (79.2%) respondents washed their teeth twice a day.

Figure 47: Frequency of washing teeth in past week per day

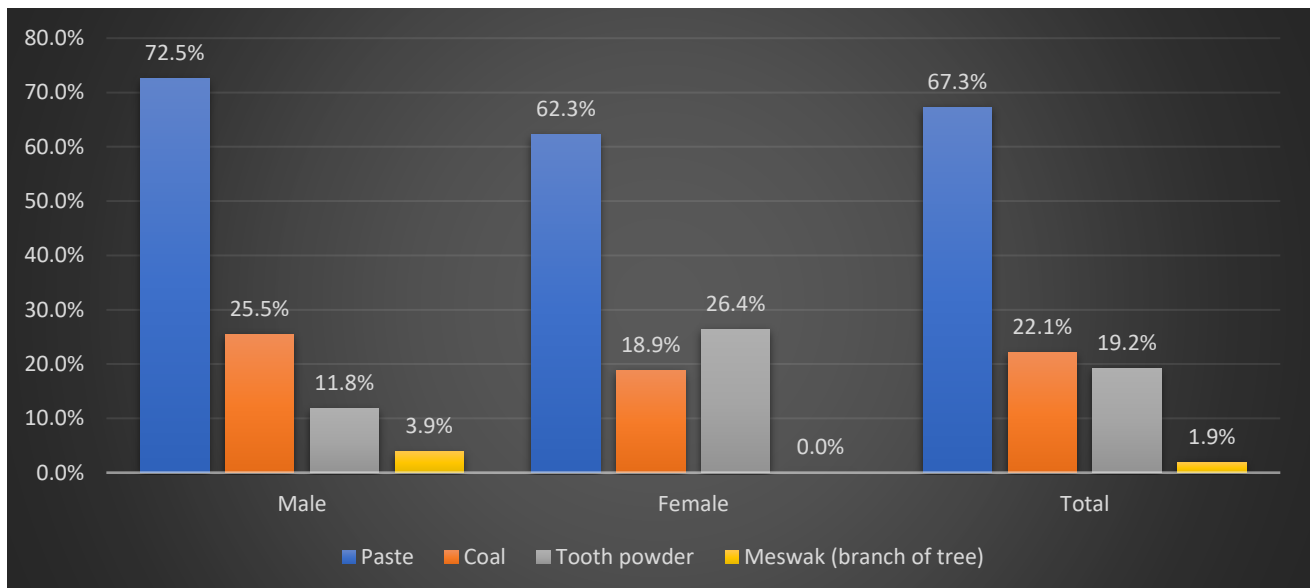


Ref: Q15. How frequently did you wash your teeth in past week per day?

#### 4.4.11 Ways of Brushing the teeth of the respondents.

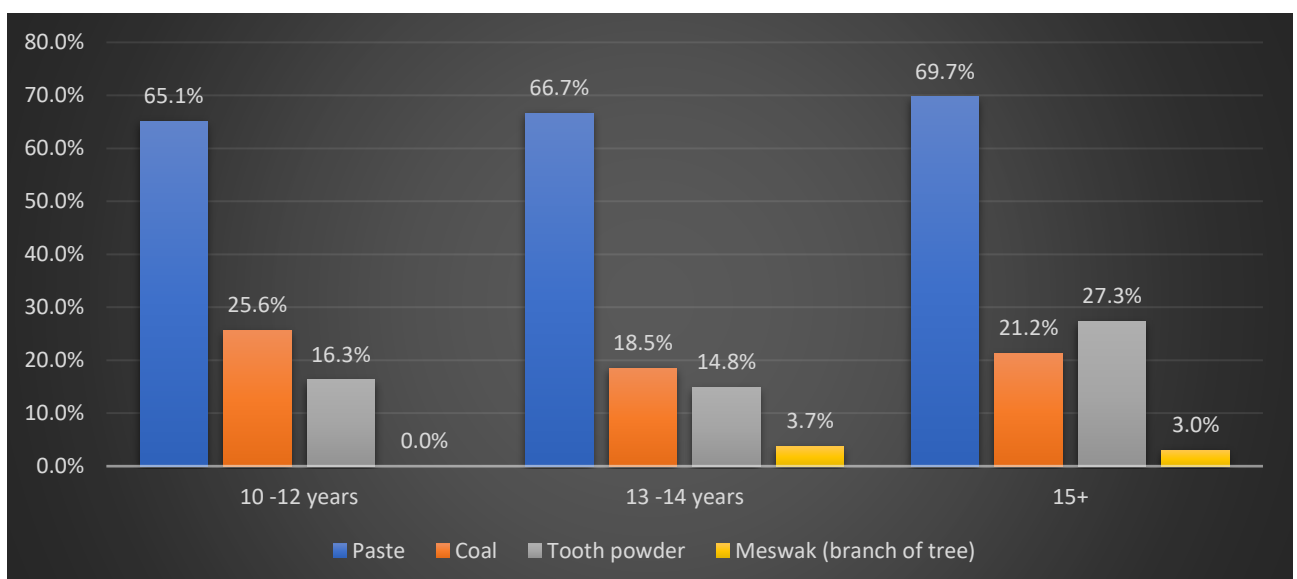
During the survey, the respondents were asked about the materials they used to brush their teeth. Most of them (67.3%) mentioned that they used paste to brush their teeth whereas only 1.9% mentioned meswak (branch of a tree). Again, 22.1% mentioned coal, and 19.2% mentioned tooth powder. It is also found that most of the female (62.3%) respondents and most of the male (72.3%) respondents used paste to brush their teeth.

Figure 48: Ways of Brushing the teeth of the respondents.



It was found that regardless the age of the students, majority of the students used paste to brush their teeth, however 27.3% respondents with age more than 27.3% used tooth powder, which was less than 20% among relatively younger students.

Figure 49: Ways of Brushing the teeth of the respondents (by age)

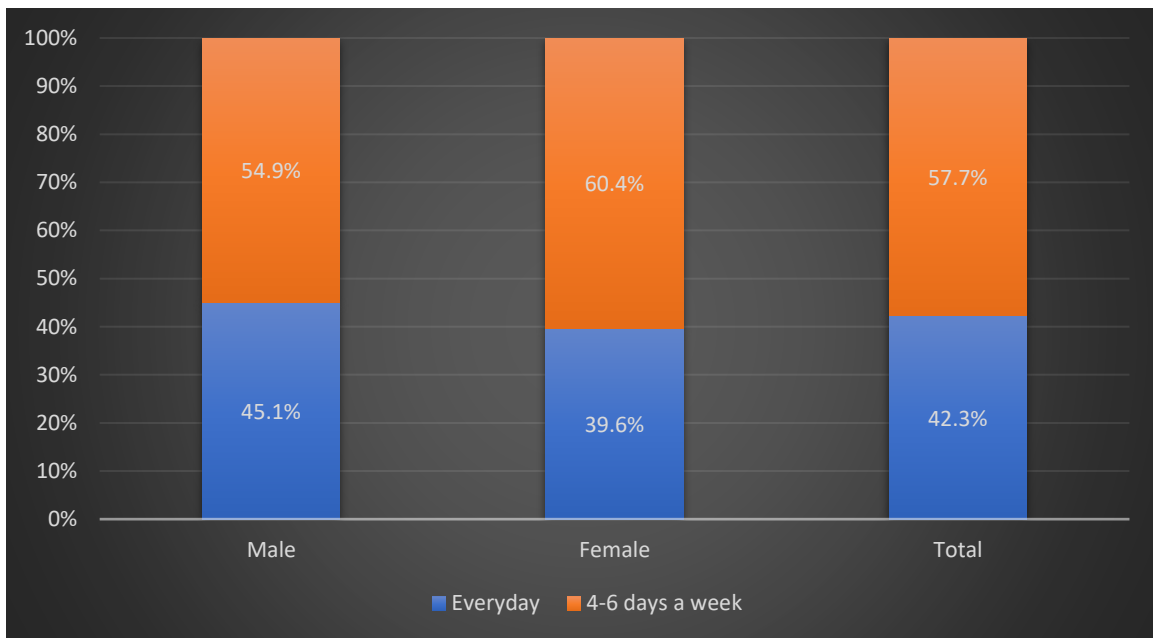


Ref: Q16. What did you use to brush your teeth?

#### 4.4.12 Frequency of taking a shower in a normal day.

The majority (57.7%) of the respondents mentioned that they took a shower 4-6 days a week whereas 42.3% mentioned that they took shower every day. It is also found that males took showers more frequently than females as 45.1% of male students took showers every day, which was 39.6% among females. There is a possibility that male students spend more time outside the home and were involved in outdoor activities, hence they took share more frequently.

Figure 50: Frequency of taking a shower in a normal day.

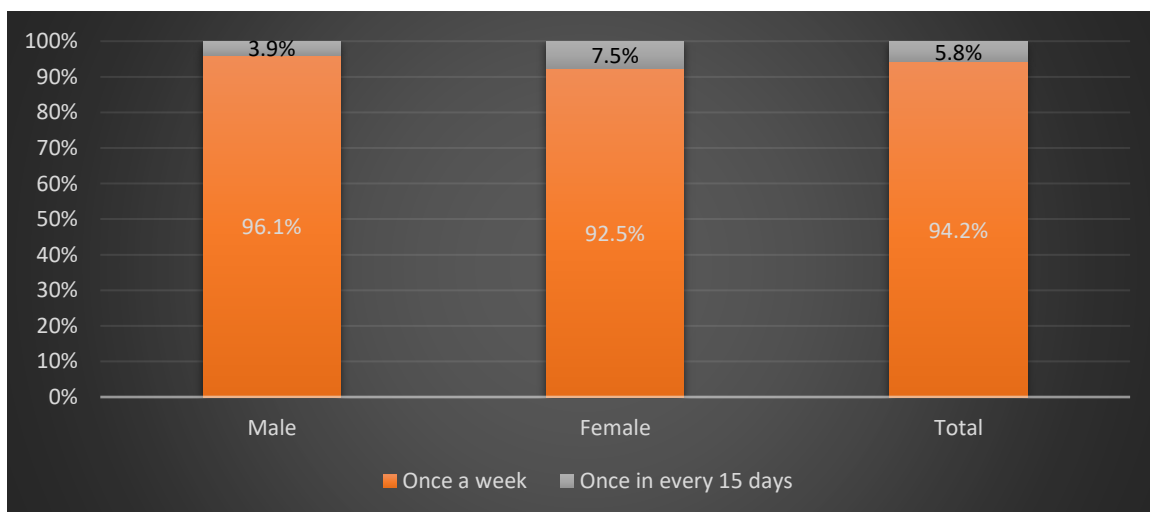


Ref: Q17. In a normal day how frequently do you take a shower?

#### 4.4.13 Frequency of cutting nails

Most of the respondents (94.2%) mentioned that they cut their nails once a week whereas 5.8% mentioned that they cut their nails once every 15 days. It is also found that males cut their nails more frequently than female students.

Figure 51: Frequency of cutting nails

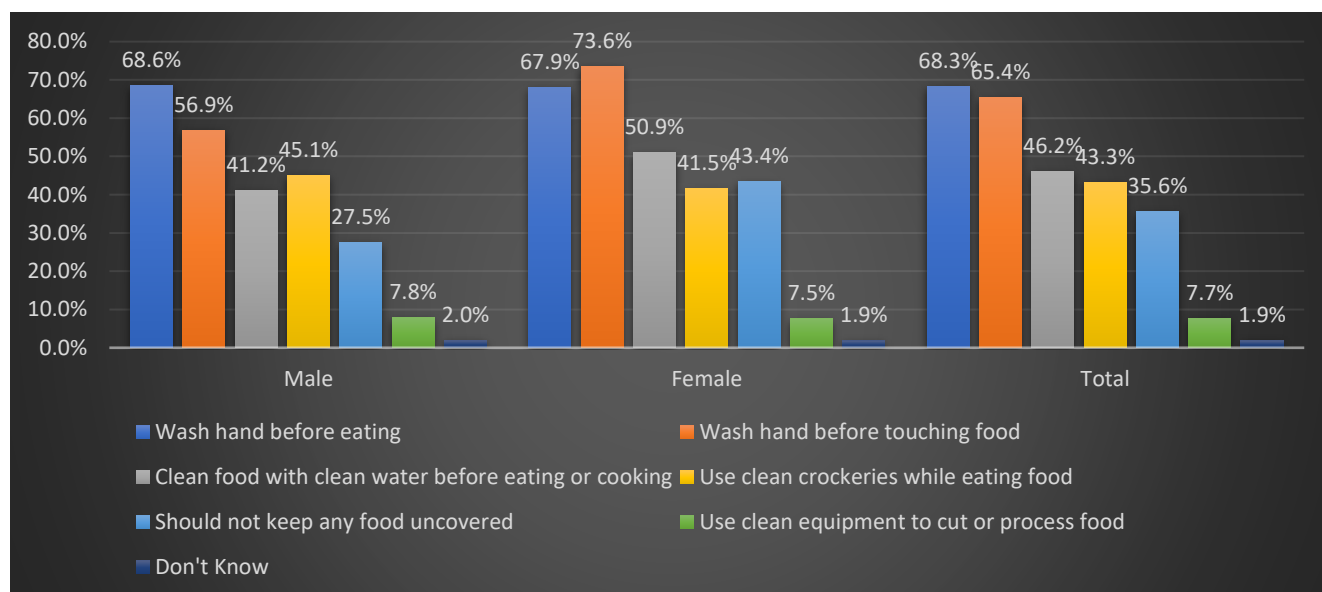


Ref: Q18. How frequently do you cut your nails?

#### 4.4.14 Opinion regarding the steps that should be taken to have safe food.

The respondents were asked about their opinion regarding the steps that should be taken to have safe food. The majority (68.3%) of the respondents mentioned washing hand before eating. Again, 65.4% mentioned washing hands before touching food; 46.2% mentioned cleaning food with clean water before eating or cooking; 43.3% mentioned using clean crockeries while eating food; 35.6% mentioned not keeping any food uncovered and 7.7% mentioned using clean equipment to cut or process food. It is also found that most of the male respondents (68.6%) mentioned washing hands before eating whereas most of the female respondents (73.6%) mentioned washing hands before touching food.

Figure 52: Opinion regarding the steps that should be taken to have safe food.

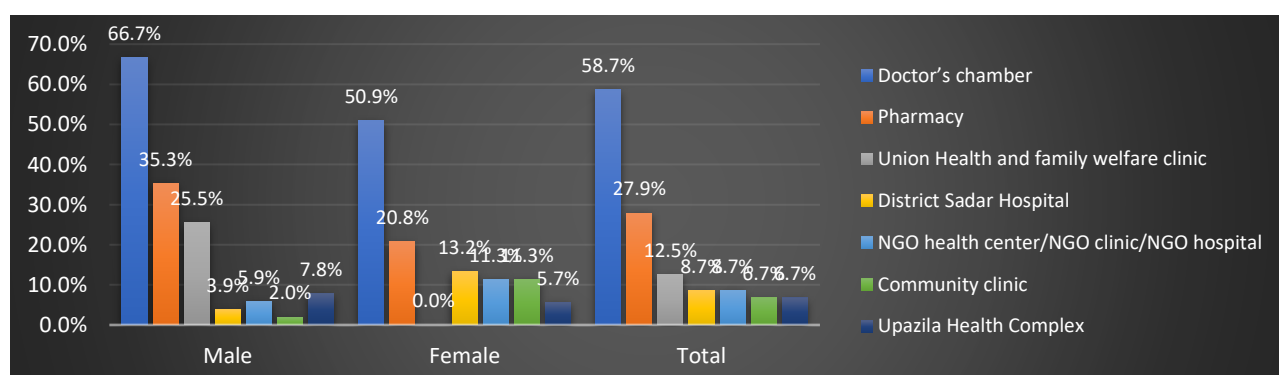


Ref: Q19. Can you tell me what steps should we take to have safe food?

#### 4.4.15 Places the respondents visited when they have any physical health concerns.

Generally, students were adolescents, and they did not go to any place for their healthcare or treatment, rather they were taken to a place by their caregivers. The respondents were asked about the places they were taken when they had any physical health concerns. Most (58.7%) of the respondents mentioned that they visited the doctor's chamber when they have any physical health concerns. Again, 27.9% mentioned pharmacy; 12.5% mentioned Union Health and family welfare clinic, and 8.7% mentioned District Sadar Hospital and NGO health center/NGO clinic/NGO hospital respectively. It was found that more males were taken to doctor's chamber 66.7%, pharmacy (35.3%), and union health and family welfare clinic than females. None of the females were taken to Union Health and family welfare clinic.

Figure 53: Places the respondents visited when they have any physical health concerns.



Ref: Q20. Where would you go if you have any physical health concerns?

#### 4.4.16 Places the respondents visited when they have any mental health concerns.

Most (31.7%) of the respondents mentioned that they were not taken to anywhere when they have any mental health concerns, while 28.8% mentioned that they talk to family/friends. Moreover, 11.5% mentioned that they visited the doctor's chamber; 8.7% mentioned that they remained at home, and 3.8% mentioned that they slept and visited District Sadar Hospital respectively. More females mentioned that they were taken to the doctor's chamber (15.1%) against that of males. Moreover, in terms of age, 27.9% of the respondents from the age range 10 to 12 years; 25.9% from the age range 13 to 14 years; and 39.4% from the age range above 15 years mentioned that they did not visit anywhere when they have any mental health concerns.

*Table 12: Places the respondents visited when they have any mental health concerns.*

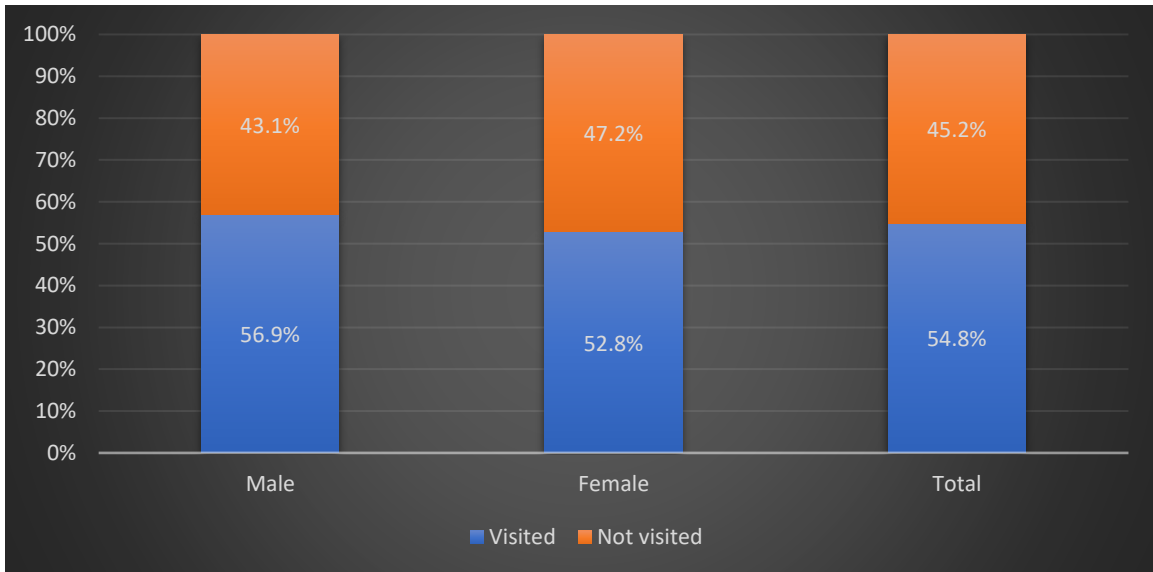
Places	Gender		Age			Total
	Male	Female	10 -12 years	13 -14 years	15+	
Nowhere	25.5%	37.7%	27.9%	25.9%	39.4%	31.7%
Talk to family/friend	25.5%	32.1%	16.3%	40.7%	36.4%	28.8%
Doctor's chamber	7.8%	15.1%	18.6%	3.7%	9.1%	11.5%
Will stay at home	17.6%	0.0%	9.3%	3.7%	12.1%	8.7%
Will play	13.7%	0.0%	9.3%	3.7%	6.1%	6.7%
District Sadar Hospital	0.0%	7.5%	7.0%	3.7%	0.0%	3.8%
Will sleep	3.9%	3.8%	9.3%	0.0%	0.0%	3.8%
Upazila Health Complex	5.9%	0.0%	4.7%	3.7%	0.0%	2.9%
NGO health centre/ NGO clinic/ NGO hospital	2.0%	3.8%	4.7%	0.0%	3.0%	2.9%
Mosque/religious leader	5.9%	0.0%	0.0%	11.1%	0.0%	2.9%
Will stay joyous	0.0%	5.7%	0.0%	3.7%	6.1%	2.9%
Union Health and family welfare clinic	3.9%	0.0%	0.0%	7.4%	0.0%	1.9%
Will hear song	3.9%	0.0%	2.3%	0.0%	3.0%	1.9%
Pharmacy	2.0%	0.0%	0.0%	3.7%	0.0%	1.0%
<b>Base-</b>	<b>51</b>	<b>53</b>	<b>43</b>	<b>27</b>	<b>33</b>	<b>104</b>

Ref: Q21. Where would you go or what would you do if you have any mental health concerns?

#### 4.4.17 Whether the respondents visited a health facility in the past one year for their own treatment

More than half (54.8%) of the respondents mentioned that they have visited a health facility whereas 45.2% mentioned not visited. Again, it is found that male respondents (56.9%) had visited a health facility more frequently than that of the female respondents (52.8%).

Figure 54: Whether the respondents visited a health facility in the past one year for their own treatment.

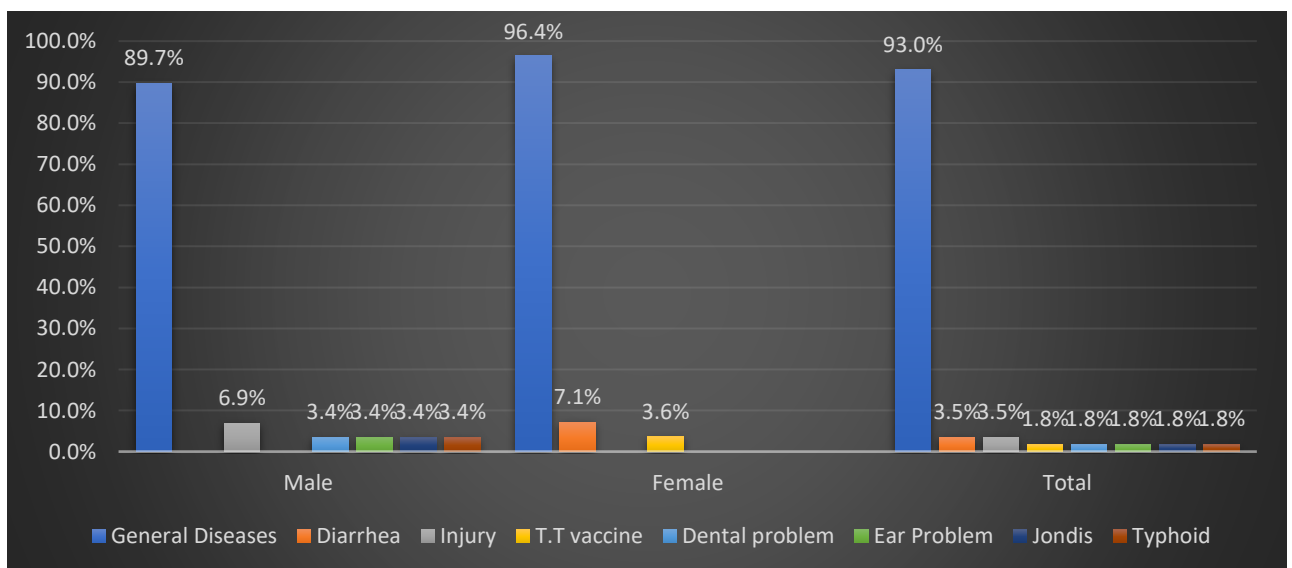


Ref: Q22. Have you visited a health facility in the past one year for your own treatment?

#### 4.4.18 Types of services for which last time the respondents visited a health facility.

The respondents were asked about the types of services for which last time they visited a health facility. Among the respondents, almost all (93%) mentioned for general diseases and other disease type was rarely mentioned. There were 6.9% cases the males were taken to a health facility for injury, while 7.1% of female respondents were taken to a health facility due to diarrhea.

Figure 55: Types of services for which last time the respondents visited a health facility.



Ref: Q23. For what services last time did you visit a health facility?

#### 4.4.19 The hygiene practices that the respondents followed during the situation of corona.

All the respondents mentioned affirmatively that they had heard the word COVID or coronavirus. Among the respondents, almost all the students (93.3%) mentioned that they washed their hands with soap or soap substitute for 20 seconds frequently, followed by refraining themselves from gathering (92.3%). Other practices were not very regular as only 32.7% mentioned wearing a mask, 29.8% mentioned staying at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing); 15.4% mentioned washing their hands with soap or soap substitute for 20 seconds after coughs or sneeze, and 11.5% mentioned about minimizing physical contact. Less number of female respondents (17%) mentioned wearing masks, while it was mentioned by half of the male respondents (49%). Apart from washing hands for 20 seconds or social distancing, the students less than 12 years old rarely could mention other hygiene practices.

Figure 56: The hygiene practices that the respondents followed during the situation of corona.

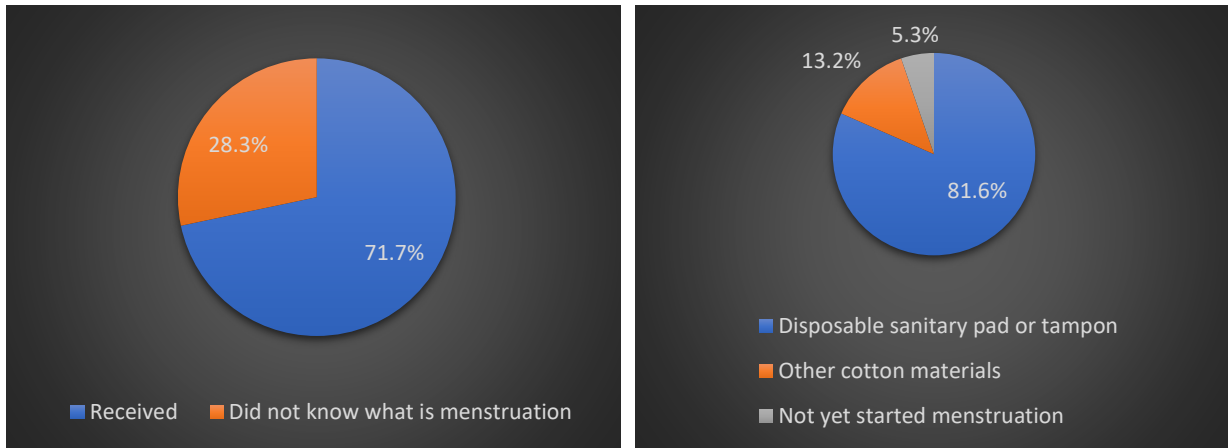
Hygiene Practices	Gender		Age			Total
	Male	Female	10 -12 years	13 -14 years	15+	
Washing hands with soap or soap substitute for 20 seconds frequently	88.2%	98.1%	95.3%	92.6%	90.9%	93.3%
Refrain from gathering	94.1%	90.6%	93.0%	88.9%	93.9%	92.3%
Wear mask	49.0%	17.0%	23.3%	40.7%	39.4%	32.7%
Stay at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing)	25.5%	34.0%	16.3%	33.3%	45.5%	29.8%
Washing hands with soap or soap substitute for 20 seconds after coughs or sneeze	15.7%	15.1%	4.7%	33.3%	15.2%	15.4%
Minimize physical contact	7.8%	15.1%	7.0%	14.8%	15.2%	11.5%
Washing hands with soap or soap substitute for 20 seconds after attending a patient	3.9%	7.5%	4.7%	3.7%	9.1%	5.8%
Cover coughs or sneeze properly with elbow	5.9%	3.8%	2.3%	3.7%	9.1%	4.8%
Washing hands with soap or soap substitute for 20 seconds after taking care of poultry and cattle	3.9%	1.9%	0.0%	7.4%	3.0%	2.9%
<b>Base-All respondents</b>	<b>51</b>	<b>53</b>	<b>43</b>	<b>27</b>	<b>33</b>	<b>104</b>

Ref: Q27. What hygiene practices are you following during the current situation of corona?

#### 4.4.20 Whether the respondents receiving adequate information on menstruation

For those who had not started menstruation during the survey, 28.3% of the respondents did not know what menstruation is. This is a worrying fact since the interviewed respondents were more than 10 years old and soon, they would be started menstruation. However, those who have started menstruation, everybody received information on the topic. There were only 5.3% of females who did not start menstruating but received information on the topic. Most of the students (81.6%) mentioned that they use disposable sanitary pads whereas 13.2% of female students mentioned that they use other cotton materials to manage their menstruation.

Figure 57: Whether the respondents receiving adequate information on menstruation



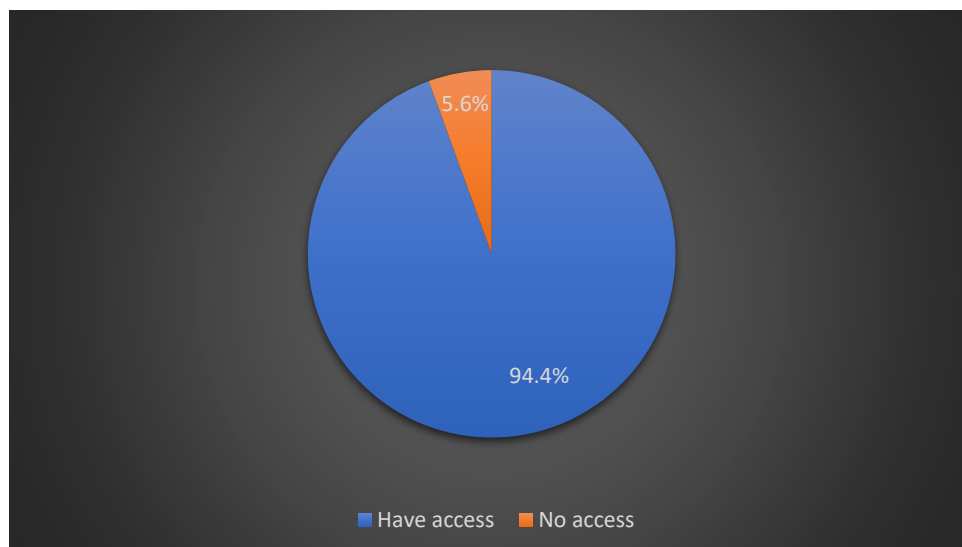
Ref: Q28 Are you receiving adequate information on menstruation?

Ref: Q30. What do you use to manage your menstruation?

#### 4.4.21 Enough access to sanitary product

The female respondents were asked about their access to the items that they use to manage their menstruation. Almost all the respondents (94.4%) mentioned that they had the access to the items that they use to manage their menstruation whereas 5.6% mentioned that they didn't have access.

Figure 58: Enough access to sanitary product



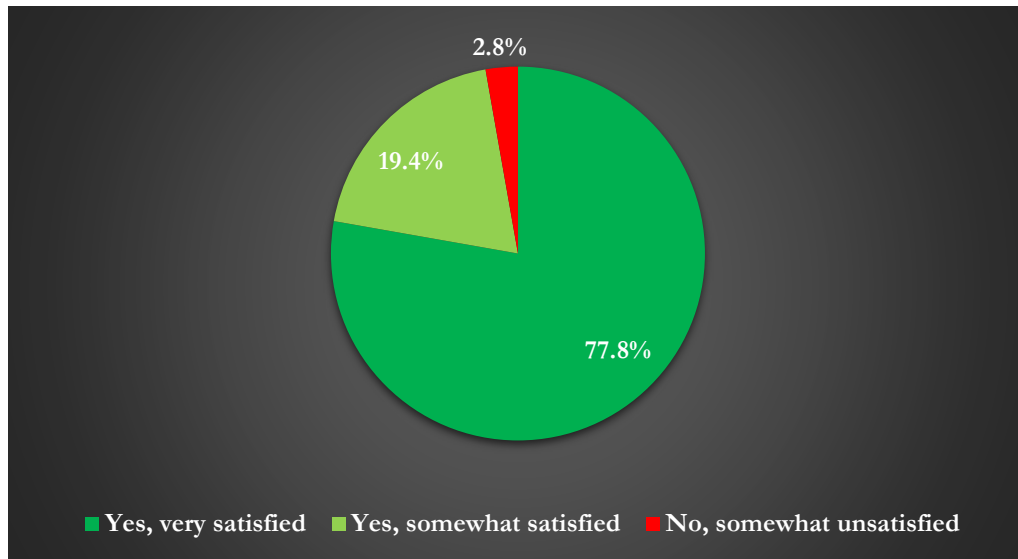
Ref: Q31. Do you have access to enough of (choice from question on what is used to manage menstruation)?



#### 4.4.22 Level of satisfaction of the respondents with the items that they use to manage menstruation.

Among the respondents, 77.8% mentioned affirmatively that they were very satisfied whereas 2.8% mentioned negatively that they were somewhat dissatisfied. Again, 19.4% mentioned affirmatively that they were somewhat satisfied with the items that they use to manage menstruation.

Figure 59: Level of satisfaction of the respondents with the items that they use to manage menstruation.



Ref: Q32. I would like to know, are you satisfied with the quality of (choice from question on what is used to manage menstruation)?

## 5. Achievement of project outputs and outcomes against indicators in the log frame.

Outputs (Measures of evaluation)	Project Findings
<b>Component 1. Establish protective environments for women and children</b>	
1. Out of 400 women registered in WFS and 200 children registered in CFS, 80% each answer that WFS/CFS is a safe and secure place in the camp.	<ul style="list-style-type: none"> <li>Due to COVID 19, there was no children registered in CFS. There were 184 registered members at the WFS. All the surveyed respondents marked WFS as a safe place and 82% surveyed respondents marked WFS as their favorite place</li> </ul>
2. Improvement of understanding of WFS / CFS users for appropriate Responses to human trafficking, Domestic violence, early marriage,	<ul style="list-style-type: none"> <li>53.7% respondents <i>completely agreed</i>, and 41.5% respondents <i>agreed</i> that their knowledge on trafficking has been increased.</li> <li>48.9% respondents <i>completely agreed</i>, and 51.1% respondents <i>agreed</i> that their knowledge on early marriage has been increased.</li> <li>52.3% respondents <i>completely agreed</i>, and 47.7% respondents <i>agreed</i> that their knowledge on domestic violence has been increased.</li> <li>There was no CFS member this year</li> </ul>
3. WFS / CFS program users' Satisfaction rate: 70%	<ul style="list-style-type: none"> <li>98% respondents were highly satisfied or satisfied on different attributes of WFS.</li> <li>There was no CFS member this year</li> </ul>
4. Provision of psychosocial support or referral for women and children in need: 100% (counselor records and referral records)	<ul style="list-style-type: none"> <li>68% members of WFS sought psychosocial support from the WFS and all (100%) of them received psychosocial support or referral for women and children in need</li> </ul>
5. Information provision by the outreach team: 700 households	<ul style="list-style-type: none"> <li>As of February 28<sup>th</sup>, 1053HH was reached</li> </ul>
6. Provision of case management: 10 GBV cases, 40 other cases (case management records by case workers)	<ul style="list-style-type: none"> <li>As of February 28<sup>th</sup>, there were 40 case managements</li> </ul>
<b>Component 2. Develop Access to adequate Water, Sanitation and Hygiene (WASH)</b>	
1. Every month, 95% of the 55 latrines and bathing cubicles can be in usable condition (repair and operation records)	<ul style="list-style-type: none"> <li>During the survey 96% latrines and 97% bathing cubicle was functional</li> </ul>
2. 95% of the users of latrines and Bathing cubicles responded that they were satisfied with the facility (interview-type follow-up survey)	<ul style="list-style-type: none"> <li>53% respondents were completely satisfied, and 38% respondents were satisfied (total 91%) with the latrines and bathing cubicles</li> </ul>
3. 20 points improvement in hygiene Knowledge of students who participated in hygiene awareness activities (KAP survey)	<ul style="list-style-type: none"> <li>There was visible improvement in hygiene Knowledge of students who participated in hygiene awareness activities. However, points were not decided for the survey</li> </ul>

## 6. Evaluation based on CHS.

The Core Humanitarian Standard on Quality and Accountability (CHS) sets out Nine Commitments that organizations and individuals involved in humanitarian response can use to improve the quality and effectiveness of the assistance they provide. The CHS places communities and people affected by crisis at the center of humanitarian action. As a core standard, the CHS describes the essential elements of principled, accountable and high-quality humanitarian aid. It is a voluntary and measurable standard. The CHS is the result of a global consultation process. It draws together key elements of existing humanitarian standards and commitments<sup>5</sup>.

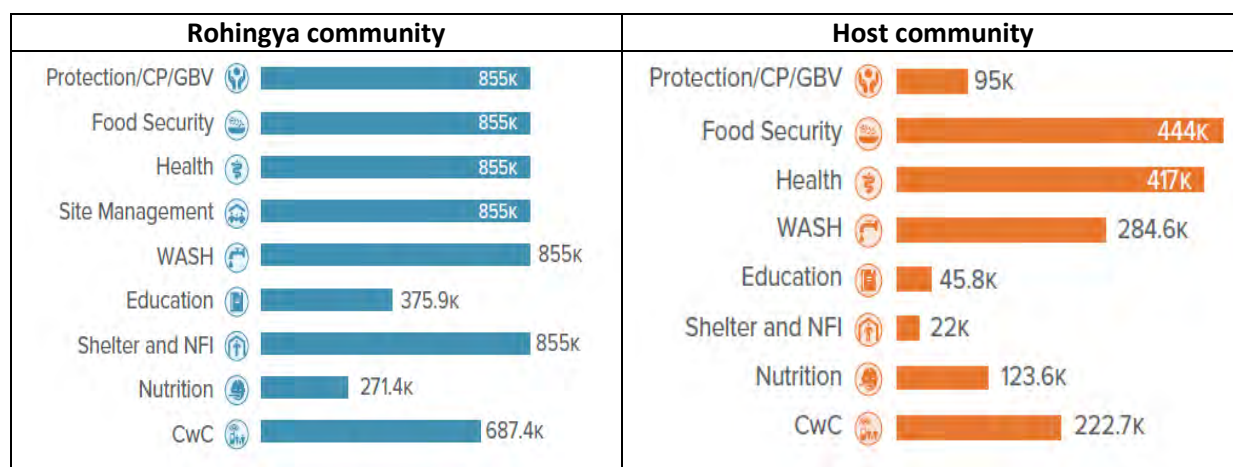
### CHS1: Communities and people affected by crisis receive assistance appropriate to their needs.

CHS1 requires that the project is committed to providing assistance based on the needs and capacities of communities and people affected by crisis. The needs of the affected people can be assessed by conducting need assessment or by utilizing learning from the past. The project target should be set considering the diversified needs of the wider community including disadvantaged or marginalized people. Also, the project should be designed in a way that it does not harm anyone both physically and mentally.

### Need of the Communities and people affected by crisis in light of JRP.

The project has two components, protection and WASH. The protection project was implemented among the Rohingya community and the WASH project was implemented in host community. As per joint response plan (JRP) 2020, all the Rohingya community people were targeted from protection, food security, health, site management, WASH and Shelter & NFI. On the other hand, in the host community, all the people were targeted under food security, closely followed by health sector. Third highest number of people in the host community was covered under WASH sector (284.6k).

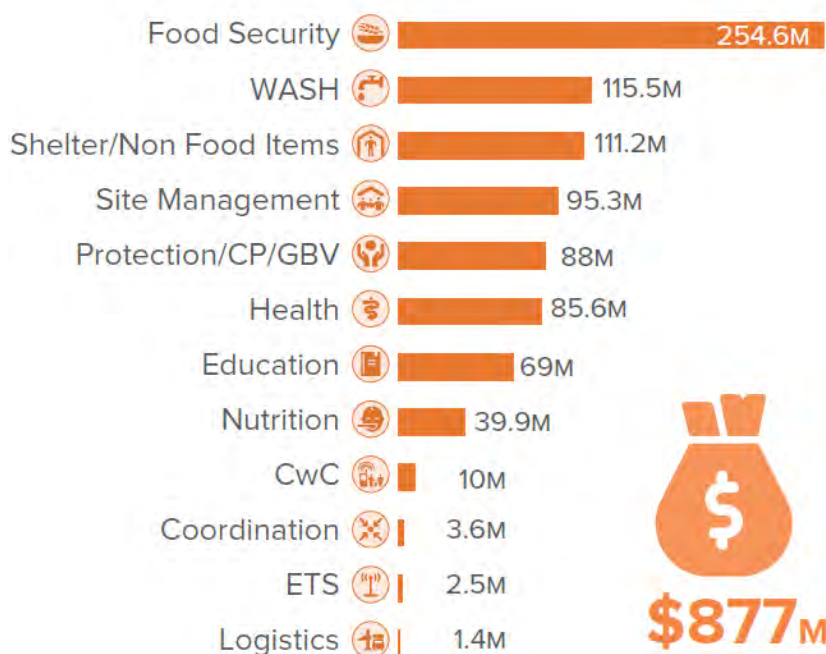
Figure 60: People targeted by sector.



<sup>5</sup> <https://corehumanitarianstandard.org/>

According to the JRP, there was a budget requirement of USD877M for different sectors for both in the camp and in host community. Highest budget was required for food security, which was 254.3M, which is 29% of the total budget requirement. WASH sector had the second highest budget requirement which was 115.5M. for protection, the budget requirement was 88m.

Figure 61: Breakdown of budget requirement



## Component I: Protection

### Needs of Rohingya refugees

In the JRP, protection crisis was referred as one of the core crises among the refugees. The concern aroused from the previous experience that occurred during forced displacement from Myanmar and worsened by the harsh living conditions. They were found stressed and worried about their uncertain future. The movement of the Rohingya refugee were restricted and they did not have access to their basic rights or requirements. Since they were not the citizen of the country, they did not have access to formal justice mechanism. This uncertainty has exposed them to trafficking risks, child protection issues and gender-based violence. It was found that one-third of the population were vulnerable people and they needed community based and individualized protection support services. The protection sector was divided into two main sub-sectors; child protection and gender-based violence.

- Child Protection:** As per the JRP 2020, boys and girls represented 55 percent of all Rohingya Refugees, the majority of whom needed child protection services. Both community based and individual protection support service were essential for these boys and girls. There were some boys and girls who were severely affected needed psychosocial support and access to effective Mental Health and Psychosocial Support (MHPSS). In the camp, there were some incidences of abuse, exploitation, violence, including sexual violence and neglect was reported. Child marriage was another issue identified very common among the Rohingya people: two-thirds of Rohingya households considered it a normal practice, while the remaining one-third viewed it as a coping strategy either to protect girls or reduce economic burdens on the household.<sup>6</sup> The

<sup>6</sup> July 2019 UNHCR SPP 5 and 2019 Joint Multi Sector Needs Assessment, ISCG, May 2019.

perceived risk of abduction and trafficking remains high, with households reporting fear of kidnapping of boys and girls at 49 percent and 44 percent respectively.<sup>7</sup> Reported child labor involves children as young as 7 years old; 3 percent of children 5 to 17 year old children are reportedly working; with 51 percent of those working exposed to the worst forms of child labor.<sup>8</sup> By September 2019, 8,596 unaccompanied and separated children were identified and deemed to be facing multiple child protection risks.<sup>9</sup> Access to education for adolescent boys and girls was also found a challenge, especially for girls. After the spread of Covid-19 pandemic access to education disrupted further. Out-of-school children may also be exposed to further risks such as exploitative labor, drugs, and criminal activities.

- **Gender Based Violence (GBV):** The JRP identified Gender-Based Violence as a constant threat, especially to women and girls in the camps. The reported GBV incidents included rape, physical assault, sexual violence, forced marriage, denial of resources, and psychological abuse. According to the GBVIMS data, domestic violence constitutes 76 percent of total reported GBV cases<sup>10</sup>. However, in different survey, it was found that GBV is often less reported. Adolescent girls, who are more vulnerable to child/forced marriage, trafficking, and sexual violence face heightened obstacles to access services.
- In an assessment of Rohingya refugee households in the camps, 57 percent were unable to identify any of the GBV service points, while 85 percent mentioned Majhis as their preferred point of referral <sup>11</sup>for cases of sexual violence.<sup>76</sup> These findings raised concerns given that the Majhi system is highly male dominated and often criticized for being exploitative. And hence, upscaling awareness-raising on GBV services and safe referral points and intensifying behavioral change programmes to address sociocultural barriers to accessing GBV services remain a priority.

### Needs addressed by AAR/NGO Forum

As per the needs identified in the JRP documents, there was a clear necessity for community based and individual protection support services. The severely affected needed psychosocial support and access to effective Mental Health and Psychosocial Support (MHPSS). Under the project AAR and NGO forum are operating Woman Friendly Spaces (WFS) provide courses on protection risks, recreational activities for stress care, and psychosocial support by psychological counselors. Though COVID-19 hygiene related awareness session was not included in the initial plan, AAR and NGO forum made the changes that was required for the beneficiaries. In both the cases the beneficiaries found the project relevant to them. The women felt stressed staying in under a small shed. They did not feel comfortable roaming inside the camp and due to COVID 19 situation there was some restriction on movement. Even due to the violence they faced in their own country (Myanmar) they are traumatized. They did not have any option to release their stress. When they joined the WFS, they participated in different awareness session, which helped them to gain more confidence. Moreover, they received training on different handicraft and able to produce handicrafts at their own. Under the work therapy, they produced mask which they made and used themselves.

*“I come to WFS to learn different things. I attended classes on different topics. Moreover, I learned about handicraft, sewing and many more. We made mask for ourselves and took these at home. When we feel unhappy or there are any unwanted situations, we come to WFS and share the issue with the sisters. Sometimes they give us mental support and sometimes they took necessary action as required.” ..... WFS member.*

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<sup>7</sup> July 2019 UNHCR SPP 5 and 2019 Joint Multi Sector Needs Assessment, ISCG, May 2019.

<sup>8</sup> Joint Multi Sector Needs Assessment, ISCG, May 2019.

<sup>9</sup> Child Protection Sub-Sector 5W and CPIMS Plus, September 2019.

<sup>10</sup> Women’s Refugee Commission (WRC), 2018: “It’s Happening to Our Men as Well” : Sexual Violence Against Rohingya Men and Boys.

<sup>11</sup> Joint Multi Sector Needs Assessment, ISCG, May 2019.

*"Their needs are met within the services we provide. They come to us for peace of mind and get peace of mind from here.".....Project staff.*

The WFS members participated in different awareness sessions, which include early marriage, domestic violence, and trafficking, which as per JRP were essentials in the context of both child project and gender-based violence. They were more aware of their rights and also learned how to protect themselves. They were aware of the negative impact of child marriage, the definition of trafficking, the reason for trafficking, and how to protect themselves from trafficking. It gave them the opportunity to discuss the protection-related concerns with their intimate partners and secured their rights. They also communicate with their children about trafficking and made them alert from going to unknown places or meeting unknown people. It also helped them to become more resilient on protection point of view.

As identified in the JRP, 57 percent were unable to identify any of the GBV service points, while 85 percent mentioned Majhis as their preferred point of referral for cases of sexual violence, which was a male dominated system. After implementation of the project, it was found that 59.5%, 63.6%, and 72.7% of WFS members discussed the issue of domestic violence, early marriage, and trafficking issues respectively at the WFS. Reporting to Majhis were less than or close to 40% in terms of the protection related complaints. From the findings it can be stated that the WFS members had found a GBV service point of referral for cases, but the number of members were too low in comparison to the refugees living in the camps.

*"In our camp, there are some people, who lure us by offering different jobs or facilities. Now we are alert, and we do not fall into the trap. Even I convinced my children not to go any unknown place alone or talk to strangers." .....WFS member*

*"We have often seen or heard that the young children are missing in the camp. Later the dead bodies were found somewhere. The situation was scary. However, now we can go to the WFS, seek suggestion from the sisters at WFS. Now we know what to do" .....WFS members.*

*"in our camp, people used to take children almost every year. After getting the session on reproductive health, the women talked to their husbands. The husbands agreed to accept family planning methods. The situation is increasing gradually" .....WFS members*

*"I have received information on protection and child marriage. A girl should not get married before their age of 18. If they get married under their minimum age, they will not learn how to maintain a family. After implementing this project, people cannot arrange any marriage without the permission of CiC. If there is any incidence of child marriage, CiC protects it" .....Majhi*

Those who participated in the awareness session on COVID-19 hygiene practices, also found the project relevant to them. After participating in the awareness session, they changed their hygiene practices based on the information they received. The changes included maintaining social distance, keeping clean, washing hands with soap / or sanitize after returning home, using masks, caring for children, covering food.

*"I used to come from outside and eat without washing my hands. Now after hearing this information, fear came in my mind. So, I abide by the information." .....Male Refugees in Target Area*

*"After doing any household chores I wash my hands and also force the children to wash their hands. I try to wear mask when I need to go out" .....Female Refugees in Target Area*



There was no doubt that the project was relevant and appropriate to their needs, but it could have been more relevant if the male partners of the women are also involved in this project. As per JRP, several studies also found that Rohingya men and boys were subjected to different forms of sexual violence and the multifaceted impact of violence<sup>12</sup>. Moreover, there were cases that the husbands of the WFS members did not allow the women to visit WFS and were suspicious about the activities inside the WFS. Hence, it could have brought better result if males could also be included in the project.

*“Our husbands always want us to stay at home and do the households chores. When we used to go to the WFS, they were very suspicious and wanted to know the activities at the WFS. They talked to other people as well. However, the project staff convinced them. Now they allow us to visit the WFS.”  
.....WFS member*

## **Component II: WASH**

### **Needs of Rohingya refugees**

The WASH project was implemented in the host community close to camp 25 and 27. As per the JRP, 89 percent households in the host communities access water from tube wells/handpumps, with 68 percent reporting collection times of less than 5 minutes. Overall, 18 percent households used surface water during the dry season to meet household demand<sup>13</sup>.

From the JRP document it was found that eighty-six percent of households used household latrines, while 11 percent reported using shared latrines. Three percent of households reported practicing open defecation and 14 percent reported the presence of human faeces around their accommodation.

The WASH component of the project repaired the WASH facilities as required which included household latrines, shared latrines and bathing cubicle. However, not all the households interviewed used the repaired WASH facilities. There was light at all the WASH facilities, but in the qualitative survey, some respondents mentioned that the WASH facility they used, did not have light inside the latrine. In the survey, it was also observed that the majority of the women use the hand pump to take a bath. We tried to validate the information and found that the bathing facilities were for community people or there was one bathing cubicle for both males and females. The females do not feel very comfortable using the community bathing cubicle. Moreover, they need to wash their clothes after taking the bath, which they feel more comfortable at the hand pump than in the bathing facility.

There were some other NGOs working in the area on WASH facilities. AAR identified the WASH facilities for which repairing was essential, but no other agencies repaired, which marked the project more relevant. It addressed the need of the people in the host community who used individual latrine, shared latrine or open defecation. However, the as revealed from JPR document, 14 percent reported the presence of human faeces around their accommodation. It could be the faeces of children under 5 years old, who could not use latrine or the aged or disabled population who can not go to latrines. Hence, the project should include the awareness session on disposal of faeces for those who cannot use latrines.

*“There was no light at the latrine, hence we cannot use them at night.” ....household in the host community.*

The host community household acknowledged that they received information on COVID 19 hygiene practices, and these were very useful for them. From different media they received similar information, but they did not understand the important of COVID 19 hygiene practices. They became more aware and alert on the issue.

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<sup>12</sup> Women’s Refugee Commission (WRC), 2018: “It’s Happening to Our Men as Well” : Sexual Violence Against Rohingya Men and Boys.

<sup>13</sup> Joint Multi Sector Needs Assessment, ISCG, September 2019

*“I have received such information from the TV but did not understand the importance of COVID 19 hygiene practices. Now I know what to do and why this is important. We need to wash our hands frequently, maintain social distance and wear mask. I wear mask when I go out. It is not very difficult to follow.” ....household in the host community.*

The students also agreed that the information which they received on Personal Hygiene, COVID-19 and Handwashing, Water Hygiene and acute Watery Diarrhea (AWD), Sanitation Hygiene, Environmental Hygiene and Food Hygiene from NGO Forum was relevant to them. They believed this would be beneficial for them. They would use this information in their life. They have also received information related to COVID 19 hygiene practices. They learned that they should not go out unless necessary, not to touch their faces and/or nose when outdoor, they need to wear masks whenever they go out and keeping their hands clean by washing frequently. They find these safety measures easy to apply. The girls mentioned that they received information on menstrual hygiene (MHM) which was new to them.

*“When I go outside, I wear mask and do not touch my nose, mouth or eyes” ....Student, host community, male*

*“I used sanitary napkin but did not know that misuse of sanitary pad can be harmful for me. My mother did not allow me to go to school. Now the schools are closed and hence we cannot go to school, but if the schools are open, I will go to school even during menstruation” ....Student, host community, female*

*“We did not consider the space of WASH facilities. We learned that girls need larger space to change their sanitary pad at school. When NGO Forum wanted to repair the WASH facility, they shared the issue with us, and we agreed to the requirement.” .....Teacher at host community*

As per JRP document, there were 18 percent households used surface water during the recent dry season to meet household demand. The Local Government Officials also mentioned that there was shortage of pure water. Since 89 percent households in the host communities access water from tube wells/handpumps, it was clear that ground water was at a comfortable level to extract water by using tube wells/handpumps. Hence, in the future, the project might consider the construction of tube wells/handpumps in the host community.

*“There are always some needs in this area. After the arrival of Rohingya people the need has increased. NGO forum came to me with their plan and I approved it. However, there are different organizations working on toilets. Hence repair of toilet was not very much necessary. There is shortage of water and some NGOs need to work to ensure the supply of pure water” ..... Local Government Officials.*

**CHS 2: Communities and people affected by crisis have access to the humanitarian assistance they need at the right time.**

### **Component I: Protection**

Under CHS2, the programs need to be designed in a way that can address constraints so that the proposed action is realistic and safe for communities. The humanitarian response should be in a timely manner, making decisions and acting without unnecessary delay. Also, the program should meet relevant technical standards and good practice should be employed to plan and assess programs. Moreover, the project should have timely decision-making with resources allocated accordingly.

Based on the survey result, the survey it was found that the project was implemented in a timely manner. When the project was implemented, the prevalence of COVID was seen and there were restrictions on movement among the people inside the camp. Due to the restriction on the movement of people, men were forced to stay at home. As a result, domestic violence / intimate partner violence increased during



this time. Moreover, the aid of different NGOs was reduced due to the restriction imposed by the authority during the COVID situation, many Rohingya males lost the jobs they used to do for the NGOs. As a result, they were depressed, and the intimate partner violence had increased. Furthermore, when the restriction on movement was imposed, the parents of girls became worried about the security of their female children. Hence the tendency of child marriage also increased.

In this situation, some of the women registered themselves as a member of WFS. They learned about domestic violence and how to tackle them. In some cases, the survivor was getting appropriate psychosocial support and referral services, able to spend some time with peer groups, and participating in different activities, which help them to gain mental stability. Also, they learned about the negative impact of child marriage. Hence, when they saw any incidence of child marriage, they used to share the issues with WFS staff. The WFS authority takes necessary action to stop child marriage. It was also found that, due to restriction of movement, the children could not go to the learning centers, but it was difficult to control them. Hence some interviewees said they visited different places where they were supposed not to go and became victims of trafficking or were sexually abused.

*“Due to spread of COVID 19, there was movement restriction and the males who used to work as volunteers with different NGOs lost their jobs. Hence, they were depressed and as a result the gender-based violence increased. We convinced the members not to argue when husbands became angry. It might case increase of violence. Rather keep calm, handle the situation and convince the husband later” ..... Project staff*

*“When my husband abused me, I felt upset and could not sleep at home. I visited the WFS and had a sound sleep. I also learned how to convince my husband on domestic violence related issues. Now my husband is also more compassionate to me” ..... WFS member.*

*“It is really difficult that children would stay at home. They move here and there. Now I call them after sometimes to see they are close to the house. Also, I instructed them not to go away or not to talk to the strangers. The project sisters recommended us to keep in touch with the children. If there is any incidence of missing child, we need to inform the Majhi, Head Majhi or CiC immediately. WFS sisters assured us that they would provide required support if any such issue occurs”.....WFS members*

There were some limitations also identified from the current project. Due to spread of COVID 19, the Learning Centers (LCs) were closed and the children had nothing to do. During the period, the registration of CFS was also closed. So, the children had no activities to do and they became restless. They visited some places which was not safe for them. After the spread of COVID 19 there was some increase of child marriage and missing children. Child marriage was controlled with the support of CiC and site management, but people among Rohingya community were worried about kidnapping or trafficking. Hence, the local people highly recommended to open the CFS and increase the capacity of CFS. However, the protection sector focal in the camp recommended to close the CFS due to the spread of COVID-19. Like other educational institutes, the government and other authorities were concern about the safety of the children. Hence the LCs were also closed after identification of COVID-19 patient in the country. The authority of the camp and protection focal agency hence decided to keep the CFS closed until further notice. The local leaders and community people urged AAR to find alternative solution to address the issue.

*“We are worried about child lifting. The child lifters roam around for opportunities. Now days children cannot go the LCs and do not want to stay at home all the time. Hence, we are vey much worried. If the CFS was open, they would visit the place, play with the children of their age and would stay safe. It would also be a relief for us. I think, CFS should be opened and the capacity of CFS should be increased” ..... Refugees in Target Area, Female*

## **Component II: WASH**

Under CHS 2, the project can be divided into three parts. The first part includes repairing the WASH facilities. These types of activities had a regular demand and always had a need for repairing the WASH facilities. The second part included awareness activities among students and teachers. The project was implemented in a remote location and access to information was not very common among the general population in the area. Most of the beneficiaries marked the information as new and much needed. The third part of the project included an awareness-raising session on COVID 19 hygiene practices. Though the information was received by the beneficiaries from different mass media, however, they failed to understand the importance of hygiene practices. Hence the information was considered timely and was delivered at the right time. Moreover, the project distributed handwashing devices along with soap, which was very helpful during the COVID 19 pandemic. It reminded them to wash their hands and maintain COVID 19 hygiene practice.

*“I must say, I received the information on time. Otherwise, I might get affected by corona virus and my whole family can suffer from the deadly diseases.” ....household in the host community.*

*“Our schools are closed, and we do not like to stay at home. Before attending the awareness session, I did not like to wear mask. Now I wear mask and encourage my friends to wear mask” ....Student, host community, male*

*“We prepared a list of WASH facilities which needed repairing support. When we get request from the local people, we take it under consideration and take necessary action without any delay” .....Project staff.*

**CHS 3: Communities and people affected by crisis are not negatively affected and are more prepared, resilient and less at-risk as a result of humanitarian action.**

## **Component I: Protection**

CHS 3 ensures that the program is built on local capacities and it ensures improving the resilience of communities and people affected by the crisis. It also helps to enable local leadership, which eventually makes the project sustainable in the long run. It also prevents programs from having any negative effects, such as exploitation, abuse, or discrimination by staff against communities and people affected by the crisis.

By reviewing project documents and conducting the survey among the beneficiaries, project staff, and local key stakeholders, it was clearly identified that the beneficiaries were aware of their rights, knew what to do, and were more confident. They were more aware of different topics related to protection, which they shared with their husbands. The WFS members were found to be more resilient after participating in the awareness sessions or activities at WFS. Before the implementation of the project, they did not feel comfortable going to the CiC to lodge a complaint or to share any incident related to protection. After the implementation of the project, they were more confident to share the issues with the WFS project staff and they were sure that necessary actions would be taken.

*“Before the implementation of the project we had to go to the CiC for any issue. We were not comfortable to talk to them. Now for every issue, we can visit the WFS, talk to the sisters who provide us necessary recommendation, support us and sometimes help us to share the issue with the CiC. Now we are more assured about receiving support we need” .....WFS member*

Moreover, the people staying inside the camp felt more resilient to fight against the corona virus. They participated in different awareness sessions and learned about hygiene practices to protect themselves

from the deadly virus. They have changed their hygiene behavior, washed their hands with soap for 20 seconds, wear masks, sneeze by covering their face with their elbow.

*“When someone visits our house, we do not meet them immediately. We request them to wash their hands. We do not embrace them or sit close to them. We wash our hands more frequently, after every task we wash our hands. We wear mask and keep distance from other people. We cover our face with our elbow when we sneeze.” ..... Refugees in Target Area, Female*

*When we go anywhere, we use to maintain a minimum distance. We do not visit a person who is suffering from fever and have cough. We do not spend much time at the tea stalls. Without mask we do not go anyplace. Even when we need to collect relief, we use to wear mask. We consume warm water. These are not difficult to follow. However, if we did not attend the session, we would not know about these practices.” ..... Refugees in Target Area, Male*

*“The information obtained from the project will help us to survive not only in Corona but also in various diseases.” ..... Refugees in Target Area, Female*

The project identified some negative issues as well. As per one of the beneficiaries and the project staff, it was found that the males did not have access to the WFS. Hence the males were suspicious about the activities inside the WFS. They were not very much interested to allow their wives or daughters to visit or spend time at the WFS. To resolve the issue, in some cases the project staff had to allow the males to inspect the WFS when there was no presence of female registered members. They were convinced, but still, some of the males were not very optimistic about WFS. Moreover, the males wanted their daughters or wives to stay at home and do the household chores. Hence the project needs to include the males, highlight the project features or components and explain the benefit of the project. Though the project planned outreach sessions including males as stated in project plan, but could not implement the session due to COVID-19 outbreak. The project included males for GBV awareness session conducted in CFS in small groups. However, considering the project need, it was recommended to involve males on a broader scale.

*“At the very beginning when we started to register as a member of WFS, my husband was very suspicious about the activities inside the WFS. They talked to the sisters inside who are responsible to the WFS and talked to their neighbors. Now they are convinced and allow us to visit the WFS.” .....Members*

*“In the Rohingya community, males try to dominate the females. Females must seek permission from their fathers or husbands if they must perform any activity. When the women in the camps wanted to register into the camp, their husbands were suspicious about the activities at WFS. Since males were not allowed to enter the WFS, they became more suspicious. Hence, we invited them to visit our WFS when there was no member available. Thus, they were convinced and gave permission to their wives to visit the WFS. There are some males who still want their wives to stay at home and do the household chores.” .....Project staff.*

## **Component II: WASH**

The information disseminated related to water, sanitation, and hygiene (WASH) would help to strengthen communities and local capacities. It is believed that the local people will follow the hygiene practice in the future. Most importantly, students were considered as the future generation, hence the topic they learned would use in the future. The girls in the community would not miss their classes due to menstruation. Even in their professional life, they would be able to better manage their MHM practices. The teachers who have learned the information would disseminate those among their students. Before the workshop, the teachers never considered MHM practice in their policy or plan. They became aware of the rights of girls related to MHM and promised to keep this in mind during their future plan. However, no one in the host community thought that the project. Contribute to ease the tension

between host communities and Myanmar refugees because their influx has a negative impact on the social environment as well as on the country's economy. Even they considered some restriction on their movement since they need to carry their NID to move from one location to another.

*"I know my right about MHM practice. I will talk to my teacher if I need any support from them. Even I will talk to my parents and will never miss my classes due to menstruation. I hope, menstruation will never be a problem for me if I find a job for me" ....Student, host community, female*

*"This project will never ease the tension between host communities and Myanmar refugees. The Rohingya people are staying among us. They are taking benefit as a refugee and also getting employed just like a Bangladeshi citizen. For them, our movement has been restricted. We need to carry NID all the time if we want to go to the town." .....host community teacher.*

**CHS4: Communities and people affected by crisis know their rights and entitlements, have access to information and participate in decisions that affect them.**

### **Component I: Protection**

CHS 4 includes providing information to communities and people affected by crisis know about the organization, the principles it adheres to, how it expects its staff to behave, the programs it is implementing, and what they intend to deliver. The communication languages, formats, and media should be easy to understand, and the communications should be respectful and culturally appropriate for different members of the community, especially vulnerable and marginalized groups. It also requires ensuring representation is inclusive, involving the participation and engagement of communities and people affected by crisis at all stages of the work.

The project team always appreciates the opinions of the beneficiaries. They try to understand the challenges they had faced in the past and the support they require. The WFS included the implementation of lectures and events. The content of activities, courses were reviewed by asking questions in an interview format to determine user needs. Based on their need the content of activities, courses were redesigned. Also, from the interview, the members who needed psychological counseling and/or referral were separated. The consent of the relevant woman, child, or the child's guardian was obtained before the information was provided to a third party other than AAR and the local cooperative body for the psychological support and/or referral as required. In the event of a referral, efforts were made to ensure that the relevant woman, child, or the child's guardian were in charge of making decisions at every stage including information provision and access to medical services.

*"The beneficiaries were able to provide their feedback on the lectures and events. The case manager was able to customize the psychological counseling or case management based on the need of the beneficiaries." .....Project Staff*

*"If the survivor was a pregnant woman and she needed treatment, we referred her to the health post. If she requires some additional support (e.g. ultra-sonography), which was not available at the camp, we paid the transport cost for the survivors." .....Project staff*

The project was very much aware of the language barriers, hence recruited the case manager or case worker who can communicate in the language of the refugees, which includes local language or Chittagong dialect. The project recruited volunteers from the Rohingya community, hence they were very much familiar with the culture and language of the community. They also understand the needs of the beneficiaries very well.

## Component II: WASH

During the implementation of the project, the implementation team visited different locations. NGO forum talked to the local community people, identified the WASH facilities which required repairing services, and prepared a list. They shared the list with the DPHE and UNO and received recommendations from the local authority.

The community people knew their rights very well and they were free to express their opinion. They guided the project team to identify the WASH facilities that needed to be repaired. The most important part was that the female students considered MHM practice as one of their basic rights and they were interested to discuss it with their parents and teachers in the future. The teachers who have received information on MHM have agreed that there were some topics very new to them and the workshops have helped them to enhance their knowledge on the topic. The teachers promised that they would disseminate the information they learned among the students, which would ensure better access to information on MHM among the students.

*"In our area different type of NGOs work. BRAC is also working in this area, but they never talk to us. NGO forum visited our location, talked to us and selected the latrines for maintenance" .....household in the host community.*

*"I know my right about MHM practice. I will talk to my teacher if I need any support from them. Even I will talk to my parents and will never miss my classes due to menstruation. I hope, menstruation will never be a problem for me if I find a job for me" ....Student, host community, female*

*"From the workshop I definitely learned something new about MHM. I will disseminate the information among other teachers and the students if required. I am sure, the students would manage their menstrual hygiene better in the future" ....Teacher, host community*

There was a representative from the local government was interviewed and he mentioned that he was not consulted during the implementation of the project. he also added that if he was consulted, he would have shared his recommendation that could have met the community's needs better.

*"I have not seen where the project was implemented and whether the project was implemented at all. In a WASH project, the issue with women and people with disability should always give the priority. If women and people with disability is kept in consideration, then paved way to the washroom must be constructed for both latrine and bathing cubicles. If the project team had ever consulted with me, I could have given better suggestion that could have addressed the need of wider community."..... Local government representative at host community.*

### **CH55: Communities and people affected by crisis have access to safe and responsive mechanisms to handle complaints.**

This standard requires to have a formal and informal mechanism for complaint. The project should welcome and accept complaints and need to address these complaints in a timely, fair and appropriate manner.

NGO Forum and AAR have their own Compliant and Response Mechanism (CRM) to receive and response complaints from the beneficiaries including community people. Beneficiaries were able to inform any kind of complaint and feedback and they should be viewed as a positive way to identify issues, improve services, and build trust between service providers and beneficiaries. This CRM will be updated as needed at the discretion of NGO Forum and AAR Japan.

Below were the stakeholders who could provide feedback and complaints:

- Beneficiary using project's services
- Volunteers acting for project
- Majhi/Site management/CiCs/WASH & Protection focal agency
- UP members/Chairman

The project followed the structured process for CRM which included the following.

- Phone call (Hotline): Every day, from 09.00 AM to 05.00 PM (except Friday, Saturday and others govt. Holidays), this number was open and handled by authorized personnel from AAR Japan and s/he was handling and receiving the complaints and feedback from the community and refer to relevant person who handled this. If s/he was not available, other staff answered the phone. The Hotline information and number was shown in sticker of each facility and was notified to beneficiaries.
- Complaint box: Each WFS/CFS had a complaint box with two keys. The box was handled by authorized personnel from NGO Forum. It was opened bi-weekly. Monitoring officer of NGO Forum and Protection Assistant, AAR Japan, opened the box along with at least 1 WFS/CFS staff as witnesses. If these staff were not available, other staff were present on behalf of her/hm.
- Face to Face: Verbal feedbacks and complaints were received by any staff of NGO Forum and AAR Japan to whom the beneficiaries had access to and trusts upon. As the children and women had less access to phones and difficulties in writing, many complaints could be communicated verbally. Any staff who should listened carefully, encouraged the person, and showed understanding of the situation.

### **Component I: Protection**

There was one case that the beneficiaries raised their concern about the host community people who used to create some noises and required steps were taken. Apart from these, the beneficiaries mainly shared their experience on domestic violence. There were no major complaints lodged by the beneficiaries.

*"There were some Bangladeshi drug addicted people used to come inside the camp. We informed this with the WFS management. They consulted with the CiC and a police outpost was placed at the camp. I have never seen these types of incidences again. ".....WFS member*

*"I did not see any complaint against the agency. If there was any complaint it could be resolved very easily. I found the project staff very reasonable and efficient." .....Local opinion leader*

*"Beneficiaries had no complaints or observations during the implementation of the project. They were happy with everything.".....Project staff*

### **Component II: WASH**

In the WASH project, there was a poster pasted on the door of WASH facility where the name of donor and implementation partners were written, and a hotline number was given to share any complaint. The project team did not receive any complaint from anyone, but they received some feedback from the community people in the project area. They requested to install light inside the WASH facilities, hence solar light was installed at the facilities.

*“I have seen a poster on the door of the toilet. The name of NGOs was written on the poster. There was a number to lodge a complaint. I never had any complaint and I have never seen anyone to lodge any complaint” ..... household in the host community.*

*“During need assessment, we talked to the beneficiaries. They requested us to install light inside the WASH facilities. Hence, we installed solar lights, especially for women and girl” .....project staff.*

## **CHS6: Communities and people affected by crisis receive coordinated, complementary assistance.**

### **Component I: Protection**

While implementing a project involving different stakeholders with different roles. The project goal can be achieved if all the stakeholders perform their own responsibility. CHS 6 requires identifying the roles, responsibilities, capacities, and interests of different stakeholders under the project. It also requires ensuring humanitarian response complements that of national and local authorities and other humanitarian organizations. It is essential to share necessary information with partners, coordination groups, and other relevant actors through appropriate communication channels.

The project included stakeholders with different roles and responsibilities. To perform their roles and responsibilities, it requires different skill sets. New staff was recruited based on some specific criteria that best match the project requirement. The roles and responsibilities are clearly defined, and all the staff was accountable for their responsibility. The case managers, caseworkers, and volunteers were recruited following the appropriate recruitment process. The project staff had gone through some training and orientation programs so that they could serve the beneficiaries as per their requirement.

The project had a provision of referral service as and when required. Some of the beneficiaries required professional services by mental health and psychosocial support (MHPSS). Also, some beneficiaries required medical support or services. Hence, AAR and NGO Forum requires regular coordination with them to refer the beneficiaries who required referral services.

There were some other organizations that were also implementing similar projects inside the camp. In each camp, there was a focal person who divides the area of the project for each NGO. The implementation partners need to follow the service map assigned by the focal agency and implementation agencies need to follow the service map. AAR and NGO Forum were successfully implementing the project following the service map.

*“There are other NGOs implementing similar projects in the project area. For every kind of project there are individual focal person who determines the project implementation area for each NGO. The NGOs need to follow the plan and responsibility assigned by the focal person” .....local opinion leader.*

*“There are different NGOs implementing projects here like BRAC, DSK, NGO Forum. They are working on different topics. Participants do not face any confusion, which project they should join in this regard. However, I personally prefer NGO Forum for joining any program.” ..... Refugees in Target Area, Male*

*“There are different NGOs, but they do not have WFS. I like to spend my time at WFS since I find peace here” .....WFS member.*

### **Component II: WASH**

In the host community when AAR and NGO Forum wanted to implement the project, they visited the location and identified the locations where aid was required. Moreover, they visited different schools, talked to the teachers, inspected the WASH facilities, and selected the schools and WASH facilities under the project. When the COVID 19 pandemic started and the health risk increased, the project changed its



plan and include COVID 19 hygiene practice both for households and schools. Moreover, since the schools were closed, the project tried to reach the students at the household level. It was also found that the implementation partners talked to government authorities during their plan and sought their permission. Once the project was completed, all the WASH facilities were handed over to the DPHE, school authorities, and respective households.

*“They came to me and I asked them to bring their plan. They prepared a list of WASH facilities and shared with us. We had a meeting with the (Upazila Nirbahi Officer) UNO.<sup>14</sup> The UNO gave the permission to implement the project. NGO Forum also invited me to inspect a WASH facility at a school” .....Local Government Officials*

*“We conducted some need assessment, and we visited some schools. Some of the schools already received support from other agencies both physical support and awareness support. We selected those schools which did not receive any aid from any agencies” .....project staff*

*“We conducted some need assessment and talked to the local governments. With the support of the local governments we identified the vulnerable population in the community, who had never received any aid and selected the household from the community” ..... project staff*

**CHS7: Communities and people affected by crisis can expect delivery of improved assistance as organizations learn from experience and reflection.**

### **Component I: Protection**

Every organization has their own specialization or expertise, and it is expected that the organization will utilize their experience and learning to deliver improved assistance to the communities and people affected by crisis.

This is the 3rd phase of the project. The implementation partners gained enormous experience from their previous phases and tried to implement their learning in the current project. Based on their experience they had a plan to increase the number of registered members for WFS and CFS. Unfortunately, due to COVID 19 pandemic, they could not increase the registered members for CFS, but the project has increased the number of registered members for WFS. Moreover, the implementation team is improving their events and lectures based on their previous learning from their project.

*“We are continuously learning from the project. This is our 3<sup>rd</sup> phase of the project and we have learned a lot during the implementation of the project. We have increased the number of registered members in both the camps. We had a plan to increase the members at the CFS as well but could not implement this due to the spread of COVID 19. We often try to collect feedback from the beneficiaries and try to improve the events or activities at the WFS. The beneficiaries wanted sewing machine and allowance, which is not possible due to regulations inside the camp. We are looking for some alternatives so that they are happy” .....Project staff.*

### **Component II: WASH**

The project was also conducted in the past and the project team had enormous experience in the WASH sector. The project team tried to implement their past learning into the current project to ensure improved support and assistance. During the implementation of past projects, it was identified that it was difficult to conduct the awareness session for males in mass groups. The majority of the males in the project location stayed outside the home during the daytime for their livelihood activities. It was not

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<sup>14</sup> The chief executive officer of an Upazila (subdistrict) and a mid-level officer of the Bangladesh Civil Service (Administration Cadre), known as Bangladesh Administrative Service.



possible to reach them during the day. On the other hand, it was not a very secure place to conduct the awareness session at night. Hence the project was designed in a way that one member from one household participates in the session so that the participants share their learnings with other family members.

### **CHS 8: Communities and people affected by crisis receive the assistance they require from competent and well-managed staff and volunteers.**

#### **Component I: Protection**

CHS 8 required that people affected by crisis receive assistance from the skilled staff and resources. Also, it is essential that the staff work according to the mandate and values of the organization and to agreed objectives and performance standards. It is also required that the staff adhere to the policies that are relevant to them.

The project recruited the staff (case managers and caseworkers) with the qualification that the person had the knowledge on protection and are very much familiar with the norms of the Rohingya community. The volunteers were recruited from the Rohingya community who understood the needs of the beneficiaries very well and helped to design the program accordingly. All the volunteers went through an orientation program, which focused on the easiest way that would be convenient for them to understand. Following that, the session was designed lecture methods, demo sessions, question-answer, and at the end feedback receiving to ensure the learning.

The psychological counselors recruited for the project, all of them were with psychological backgrounds and had previous experience of conducting counseling. Also, they were very much familiar with the local language and Rohingya culture. Moreover, they went through some extensive training before launching the project. The project management sought feedback from the beneficiaries who available for the psychological counseling service. There were some amendments made based on the feedback from the beneficiaries.

*“There were four psychological counselors under our project. Two of them were working for CFS and two of them were working for WFS. They received extensive training before launching the project. We talked to the beneficiaries and most of the cases they were happy with the services they received. We also obtained some feedback from the beneficiaries and made necessary improvement upon the feedbacks we received” .....Project staff.*

#### **Component II: WASH**

As it was mentioned earlier, the NGO forum had enormous experience in the WASH sector. Hence while developing the materials the project team utilized their experience to make the facilities durable and cost-efficient. To conduct training among the recruited volunteers, the project required some experienced resources and NGO Forum supported a lot by engaging their experienced resources in this project.

### **CHS 9: Communities and people affected by crisis can expect that the organizations assisting them are managing resources effectively, efficiently, and ethically.**

#### **Component I: Protection**

The projects that are being implemented to assist the people affected by the crisis are mostly the aid received from the donor agencies, which were allocated to support the vulnerable and marginalized people. Hence, it is essential that the organizations assisting them are managing resources effectively, efficiently, and ethically. As per the requirement of CHS 9 the programs and implement processes needs

to be designed in a way that ensures the efficient use of resources, balancing quality, cost, and timeliness at each phase of the response. Also, it is important to manage and use resources to achieve their intended purpose, minimizing waste.

AAR and NGO Forum were accountable to JPF regarding spending the budget. The project attrition rate was 89%. AAR has to spend and manage their resource wisely to achieve maximum output. The final audit was not conducted before the survey, but AAR and NGO Forum maintained all the documentation for the audit purpose and future reference. However, AAR perceived that if they had received more budget or resources, they could have served more beneficiaries.

*“With the budget we have for the project, we could afford only one case manager and two case workers. If we had more budget, we could afford to recruit more case manager and case worker, thus could have provide more case management support” .....Project staff*

### **Component II: WASH**

The resources were utilized efficiently. There were some changes made in the project plan and AAR and NGO forum tried to accommodate it as per the project budget. There were some savings from the project budget, the project team included some additional activities with due permission from JPF. NGO forum maintained proper documentation on all the expenditure so that when the audit team conducted the audit, the NGO forum could share the evidence against their expenditure.

## 7. Recommendations

### 7.1 Recommendations to the NGO member

**Proactive Registration Process:** The main component of the project was implemented in reactive nature. The members of the WFS were recruited on the basis of self-registration, which means those who visited the WFS at the time of registration, an awareness-raising officer explained the activities and utilization of the facility. If the women wished to register themselves as members of WFS, the registration process was completed, and ID cards were given to the members. However, considering the protection related situation in the camp, the program should be proactive, where some volunteers need to visit the households at the camp area, talk to potential survivors and recruit them as a member of WFS. The self-registration also should continue.

**Number of Beneficiaries should be increased:** If the number of beneficiaries is taken into account in comparison to the number of populations in the camp, it was too low. As per the UNHCR population fact sheet, as of December 2020, the total population of camp 25 and camp 27 was 22,759, while the project was able to reach 1,053 households for outreach activities on COVID 19 awareness session. For WFS, there were 400 registered members from previous projects and 184 registered members under the current project. Based on the survey we found that both domestic violence and kidnapping or trafficking were present in the camp. Hence, the scale of the project needs to be increased to make the project more effective. Moreover, the project can follow a collective approach by forming partnerships with other implementation NGOs in the camp to achieve a larger objective.

**Inclusion of males under the project:** The projects include mostly the females and children inside the camp. Even due to COVID the project could not register any child at the CFS. However, males were identified as the main source of domestic violence, and also, they were the main decision-maker to make decisions regarding the marriage of their children. Even if we consider the reproductive health-related concerns, it was not possible for the women to take the decision alone. Though the project planned outreach sessions including males as stated in project plan but could not implement the session due to COVID-19 outbreak. The project included males for GBV awareness session conducted in CFS in small groups. To make the project more relevant to the refugees and appropriate to their needs, it is strongly recommended to include more males under the protection component.

**Recommendation to open CFS:** There were some limitations also identified from the current project. Due to the spread of COVID 19, the Learning Centers (LCs) were closed, and the children had nothing to do. During the period, the registration of CFS was also closed. So, the children had no activities to do and they became restless. They visited some places which were not safe for them. After the spread of COVID 19, there was some increase in child marriage and missing children. Child marriage was controlled with the support of CiC and site management, but people among the Rohingya community were worried about kidnapping or trafficking. Hence, the local people highly recommended opening the CFS and increase the capacity of CFS. However, due to restriction from RRRC and Child Protection Sub-Sector (CPSS) the CFS was remained close to protect the children from COVID-19. Considering the effectiveness and usefulness of CFS, it is recommended to open CFS as soon as the restrictions are withdrawn. In the meantime, it is recommended to find alternative of CFS to ensure the protection right of the children.

**Inclusion of Religious leaders under the project:** Moreover, the project failed to develop local leadership. The project beneficiaries were completely dependent on the project staff. If the project is closed, the activities will also stop until or unless some other agencies take over and continue similar activities inside the camp. It was found that the people inside the camp are religiously superstitious and obey their religious leaders. The religious leaders had a good influence over the Rohingya people. Hence, if the religious leaders were trained and given the role of awareness program, it would help to bring behavioral change among the community people and the project will be more sustainable in the long

run. However, to meet the continuous need AAR sustained four centers with some staff and Rohingya volunteers with their own budget.

*"Child marriage is happening even after repeated awareness programs. Many women think that husband can beat them, because the wife's heaven is under the husband's feet.".....Project staff.*

*"Sometimes we arrange meeting with the local stakeholder and the local opinion leaders which include Majhis or Imams. In a meeting one of the parents stated that it was in the Shariah Law to get their child married as soon as they can. A religious leader was present in the session and mentioned that one should follow what the Shariah Law says that one must respect and abide by the law of the state s/he lived in. After that the local people was convinced"..... Project staff.*

#### **Video demonstration should be introduced.**

There were some recommendations to conduct the sessions through video demonstration with real life example. It was also recommended that if the community people themselves can take part in the street play, it would be helped to get some source of entertainment and also would be able to reach higher number of people. However, before designing such activities, the project team also need to assess the COVID 19 situation in the camp and ensure COVID hygiene for the participants or the target group.

#### **Both project components should be integrated**

Since the project has two separate components, both the components can be integrated. The WFS members come to the WFS and making some handicraft. Through work therapy they were already making mask. Similarly, if through the WFS the beneficiaries can be trained on making sanitary napkin, or soap, these items can be distributed in the areas where WASH project is being implemented.

In the WASH project at the host community, the project was implemented as per a pre-decided plan. Though there was some need assessment conducted before planning the project, but it was already decided that under the project some WASH facilities would be repaired. There were some bathing cubicles was constructed, but majority of the women were found to take a bath at their hand pump. Moreover, the government official mentioned that, the project was planned before and need assessment was conducted later based on their plan. However, if the project team conducts the need assessment first and prepare the plan based on the result of the need assessment report, it would serve the purpose of the community people in a better way.

#### **The location of the hand washing devices should be specified.**

Though the project distributed the hand washing devices among beneficiaries, but the location of the devices was not specified. In the survey it was found that 31.7% students did not wash their hands after defecation. Hence it is recommended to place or construct handwashing devices/facilities inside or just outside the latrines, so that it works as a reminder for the people.

#### **Construction of tube well/handpump**

From the JRP report, it was found that at the host community, 14% people use surface water during dry season and 89 percent people have access water from tube wells/handpumps. The ground water level was in a position that water can be extracted using tube wells/handpumps. Hence, the project can construct tube wells/handpumps in the host community to meet the need of pure water.

## 7.2 Recommendations JPF

### **Focus on the CFS should be given.**

Overall, the project beneficiaries mentioned that the domestic violence inside the camp has increased after the COVID 19 pandemic. Also, there was cases of kidnapping and trafficking. Since the schools were closed, the children had nothing to do and became more stressed. Hence it is highly recommended to focus the project more on CFS if CPSS Sector allows to expand services hopefully in the near future.

### **Continuation of support to the CFS and WFS**

Both CFS and WFS requires continuous support. Gap between different phases might have a negative impact on the beneficiaries. The beneficiaries might feel more stressed if they find a break between the phases. Therefore, the study suggests continuing the project without gap.

### **The number of case management service should be increased.**

The number of case management service provided under the project was not sufficient. Within the budget it was not possible to increase the case management support. Hence it is recommended either to scale up the project or to collaborate with other similar agencies to ensure maximum reach of case management service under the project.

## Appendix

### Appendix 1: TOR

The Japan Platform (hereinafter referred to as "JPF") is an international emergency humanitarian aid organization which offers the most effective and prompt emergency aid in response to humanitarian needs, focusing on issues of refugees and natural disasters. JPF conducts such aid through a tripartite cooperation system where NGOs, business communities, and the government of Japan work in close cooperation, based on equal partnership, and making the most of the respective sectors' characteristics and resources. JPF serves as an intermediary support organization providing various types of assistance to member NGOs in Japan to deliver quick and comprehensive aid on their own. JPF has supported aid activities of 44 member NGOs, each with its own set of diverse strengths. It has delivered humanitarian assistance to 55 nations and regions about 1,500 projects, with a total financial contribution of 60 billion yen. JPF has built a strong reputation based on trust by promoting cooperation among private sectors and NGOs and by accurately reporting all of its activities.

The purpose of this request for proposals (RFP) is to solicit competitive offers for the provision of Third-party project evaluation services for ongoing 4 JPF projects which are being funded by JPF and implemented by member NGOs in Cox's Bazar, Bangladesh. JPF seeks to contract a TPM entity to accurately capture information, verify activities and analyze data on these project activities. JPF will use the outcome of this evaluation to improve the current and future projects and programme. The evaluation reports will be made available to public as a part of JPF's activity to ensure accountability to the donor and public.

The main objectives of evaluation is.

- To verify actual outputs and if possible, outcomes of the project with the available data
- To verify that the humanitarian principles and standards including Core Humanitarian Standards (CHS) are respected.
- To understand the beneficiary satisfaction
- To provide feedback and recommendations to the future projects and programme improvement for both JPF and member NGOs
- To provide contextual information on the target sectors
- The criteria of value used for this evaluation is CHS and therefore it is essential that the selected contractor possesses a good understanding of this standard and past experience in conducting evaluation using CHS. Moreover, the selected contractor, and in particular the assigned team, is expected to be competent on conducting evaluation activities below.
- Desk review of the implementing partner's project documents; including but not limited to approved project proposal, project log frame, needs assessments, beneficiary selection criteria, latest project progress report and any other relevant document.
- Sample selection methodologies
- Beneficiary surveys to measure project outcomes, through tools such as Post Distribution Satisfaction and household visits.

## A – INSTRUCTIONS TO BIDDERS

In submitting a tender, the bidder accepts in full and without restriction the special and general conditions governing this contract as the sole basis of this tendering procedure, whatever his own conditions of sale may be, which hereby waives.

Bidders are expected to examine carefully and comply with all instructions, forms, provisions and specifications contained in this tender dossier. Failure to submit a tender containing all the required information and documentation within the deadline specified will lead to the rejection of the tender.

No account can be taken of any reservation in the tender as regards the tender dossier; any reservation will result in the immediate rejection of the tender without further evaluation.

Tender procedures will be conducted by authorized Japan Platform personnel and the decision will be given by the tender committee. If requested, representatives from the back door or partner organizations can attend to the tender committee as an observer.

### 1. Preamble:

The Japan Platform (hereinafter referred to as "JPF") is an international emergency humanitarian aid organization which offers the most effective and prompt emergency aid in response to humanitarian needs, focusing on issues of refugees and natural disasters. JPF conducts such aid through a tripartite cooperation system where NGOs, business communities, and the government of Japan work in close cooperation, based on equal partnership, and making the most of the respective sectors' characteristics and resources.

JPF serves as an intermediary support organization providing various types of assistance to member NGOs in Japan to deliver quick and comprehensive aid on their own. JPF has supported aid activities of 44 member NGOs, each with its own set of diverse strengths. It has delivered humanitarian assistance to 55 nations and regions about 1,500 projects, with a total financial contribution of 60 billion yen. JPF has built a strong reputation based on trust by promoting cooperation among private sectors and NGOs and by accurately reporting all its activities. Please find attached JPF Information Leaflet as Annex 1. More information on JPF can be found at <http://www.japanplatform.org/E/>.

### 2. Purpose of the Request for Proposals

The purpose of this request for proposals (RFP) is to solicit competitive offers for the provision of Third-party project evaluation services for ongoing 4 JPF projects which are being funded by JPF and implemented by member NGOs in Cox's Bazar, Bangladesh.

JPF seeks to contract a TPM entity to accurately capture information, verify activities and analyze data on these project activities. JPF will use the outcome of this evaluation to improve the current and future projects and programme. The evaluation reports will be made available to public as a part of JPF's activity to ensure accountability to the donor and public.

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- To provide contextual information on the target sectors

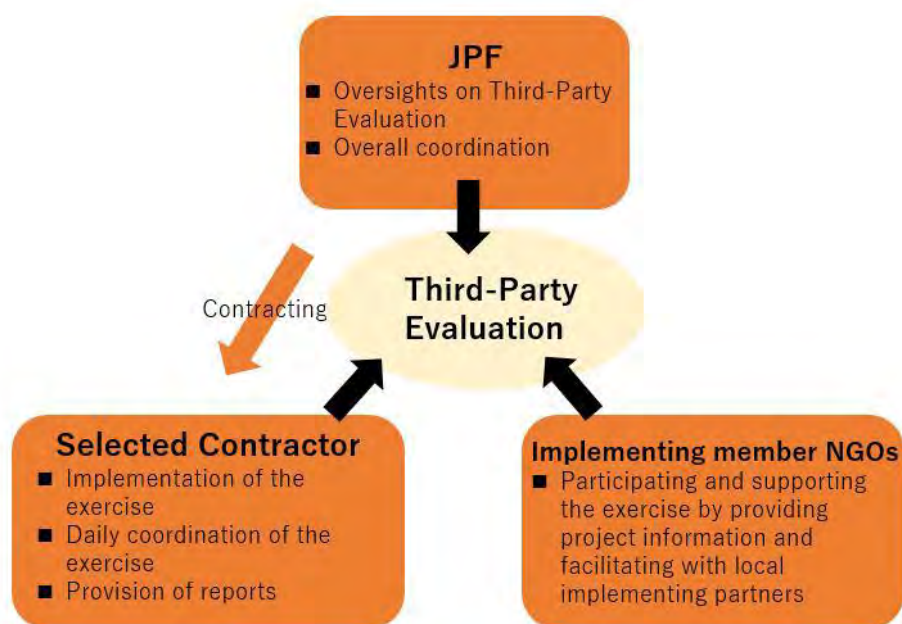
### 3. Scope of Services

This RFP encompasses the evaluation of ongoing 4 projects as part of JPF accountability and learning initiatives for quality improvement. Prior to the start of data collection for evaluation activities, the selected contractor will closely collaborate with JPF to develop tools, field visit protocols, data presentation and reporting formats. JPF will provide the contractor with relevant documentation, including projects proposals and approved amendments. The member NGOs will provide more project specific documents pertaining to the evaluation exercise. Key project documents are in English, however, inherently some of documents are in Japanese and the selected contractor are expected to use google translation and triangulation technique to confirm contents. All documentation shared with the contractor is considered confidential and a data protection protocol will be signed as part of the agreement.

The project brief information and project specific evaluation scope can be found as an Annex 2 – Project Summary 1 to 4 to this document. The field data collection for evaluation are expected to be conducted during the month of January and February 2021.

All four projects above are implemented inside Myanmar refugee camps in Cox’s Bazar, besides, two out of four projects also have activities in host communities. Due to the outbreak of COVID-19 in Bangladesh including the refugee camps where the access from the outside is restricted, the methodology and procedure of this evaluation activity is in conformity with COVID-19 preventive measures imposed by the government of Bangladesh and authorities concerned. The successful contractor is expected to undertake evaluation activities respecting do-no-harm principles and where possible, to adapt alternative means of factual identification such as telephonic interviews. The detailed methodology and tools shall be discussed with each member NGO at the inception meetings and the contractor is expected to adjust the work plan accordingly.

#### Implementing Structure of the Third-party Evaluation





The criteria of value used for this evaluation is CHS and therefore it is essential that the selected contractor possesses a good understanding of this standard and past experience in conducting evaluation using CHS. Moreover, the selected contractor, and in particular the assigned team, is typically expected to be competent on conducting evaluation activities below.

Desk review of the implementing partner's project documents; including but not limited to approved project proposal, project log frame, needs assessments, beneficiary selection criteria, latest project progress report and any other relevant document.

#### Sample selection methodologies

Beneficiary surveys to measure project outcomes, through tools such as Post Distribution Satisfaction and household visits.  
Project Site visits and verification of project activities  
Individual Observations of the surveyor  
Key Informant Interview  
Focus Group Discussions

#### Country and sector context analysis

In order to assess the competency and consideration of the individuals and institutions submitting proposals with regards to COVID-19 preventive measures, this RFP is requiring a submission of one to two-page plan of free format stating organization policy toward preventive measure against COVID-19 together with other required documents. The plan should inform the approach to the data collection and any other information deemed necessary to demonstrate the ability to conduct data collection with much consideration on COVID-19 outbreak in general.

#### **4. Expected Activities and Deliverables**

For all tasks, specific tools and templates will be developed and agreed to between JPF and the contractor following signing of the contract. It is expected that the reports provided by the contractor will adhere to the agreed upon templates. For all remaining tasks, general approaches will be developed and agreed to between JPF and the contractor, upon signing of the contract.

It is expected for the selected contractor to perform below activities.

To organize 4 separate inception meetings with JPF and project implementing NGOs to discuss the details of the evaluation objectives, scope, targets, data processing and analyzing, allocated team and reporting.

To provide a draft inception report specific per project with a detailed work plan including data collection tools and methodology, proposed schedule of site visits and sample beneficiary and key informant selection strategy and list of data to be collected.

To develop data collection tools and methodology specific for each project to implement the work plan.

To submit periodic updates with reference to agreed work plan.

To submit final evaluation reports, separate for each project including raw-data and visuals collected per project as well as a bridge report with cross-cutting finding across programme and recommendations for JPF as per the agreed format.

To organize 4 separate debriefing meetings and present details, findings and recommendations of the exercise to JPF, member NGOs and project implementation NGOs. (The debriefing meetings should be conducted by 20th March 2021)

In the face of outbreak of COVID-19 worldwide, all discussions will be undertaken online.

## 5. Call for Tenders Schedule

	DATE	TIME*
Tender publication date	18 November 2020	
Deadline for request for any clarifications from JPF	27 November 2020	17:00
Last date on which clarifications are issued by JPF	30 November 2020	17:00
Deadline for submission of tenders (receiving date, not sending date)	6 December 2020	17:00
Notification of award to the successful tenderer	20 December 2020	
Signature of the contract	25 December 2020	

\* All times are in the local time of Tokyo, Japan.

## 6. Questions and Clarifications

If JPF, either on its own initiative or in response to a request from a prospective bidder, provides additional information on the tender dossier, such information will be communicated simultaneously in writing to all the bidders.

Bidders may submit questions in writing to the following address by email before the deadline for request for any clarifications, specifying the tender reference number.

Contact Person:

Name / Surname	Title	E-Mail Address
-	Procurement Department	<a href="mailto:procurement@japanplatform.org">procurement@japanplatform.org</a>

Any explanation or amendment to be made regarding the tender dossier shall also be shared with all applicants simultaneously. Bilateral negotiations will not be held with the institutions applying during the tender.

## 7. Meeting with the Institutions / Company Visits

No clarification or bilateral meeting will be held with the entities applying during the tender. Company visits will not be conducted. However, a meeting will be held with the winning entity prior to the signing of the agreement.

## **8. Eligibility Documents Required for the Bidders**

Participation in tendering is open on equal terms to all natural and legal persons or companies or firms that can provide the required documents by this tender. If the required document is in another language than English, then an English translated copy should be provided along with the original.

8.1. Organizational Profile Document providing detailed information on the capacity of the organization and services provided (such as previous and ongoing works, relevant experiences, registration details, establishment year, number of offices, number of full/part time staff, experts, surveyors and etc.)

8.2. Valid company registration documents including licenses obtained from the relevant governmental institution.

8.3. Submission of the most recent original and valid tax documents

8.4. Providing address declaration for notifications (phone and e-mail address information). Please indicate if you have an office in Bangladesh.

8.5. Signature declaration or list of authorized signatures indicating that they are authorized to submit bids.

8.6. Please provide detailed list of any ongoing or past activities of your organization in Bangladesh, especially in Cox's Bazar along with organization and contact person for reference check. (Demonstrating past experience in conducting evaluation using CHS is strong assert. As a reference, the past reports of JPF project evaluation using CHS in another programme can be found below).

[https://www.japanplatform.org/programs/pdf/JPF\\_afghanistan2018\\_report1\\_SVA.pdf](https://www.japanplatform.org/programs/pdf/JPF_afghanistan2018_report1_SVA.pdf)

[https://www.japanplatform.org/programs/pdf/JPF\\_afghanistan2018\\_report3\\_CWS.pdf](https://www.japanplatform.org/programs/pdf/JPF_afghanistan2018_report3_CWS.pdf)

[https://www.japanplatform.org/programs/pdf/JPF\\_afghanistan2018\\_report4\\_PWJ.pdf](https://www.japanplatform.org/programs/pdf/JPF_afghanistan2018_report4_PWJ.pdf)

8.7. Written commitment to not carry any of the "reasons for exclusion from the tender" under clause 21 of the tender dossier.

### ***8.8. Technical Proposals should include.***

8.8.1. Evaluation design and methodology

8.8.2. Monitoring and Evaluation targets for field visits, household surveys, focus group discussions and key informant interviews should be indicated separately for each project.

8.8.3. Evaluation Implementation Work and Time Plan

8.8.4. Provide information on your network and access to the target locations.

8.8.5. Safety, Security and Covid19 related policy and procedures that will be applied.

8.8.6. Confidentiality and Data Protection Policy and Procedures that will be applied.

8.8.7. Information on the data collection tool and methodology of how the data analyzed.

8.8.8. Provide the list of personnel who will be assigned to contract, detailing the tasks of each and provide CVs for listed key personnel. At least 50 percent of field monitors must be female and in the evaluation of bids gender equality in the project team will be recognized.

8.8.9. Sample questionnaire and report

8.8.10. Indicating the deliverables

8.8.11. Provide an alternative methodology and activities if the proposed activities cannot be conducted due to COVID-19 limitations and restrictions.

**8.10. Financial Proposal should include.**

8.10.1. All the tax and costs

8.10.2. The cost of each project and the final total of 4 projects

8.10.3. Payment conditions

**9. Bidding format and content**

Bid proposal should consist of separate sub-folders as administrative documents, technical and financial proposals.

Bidding Documents should be in the same sequence as listed in clause 8. All the documents should be scanned and submitted via e-mail or a link should be provided to be downloaded. The bidder must be aware of the followings.

Indicating that the tender dossier is fully read and accepted,

The price quoted must be clearly written in accordance with the numbers and the written text, There shall not be any scratches, erosion or correction on the documents.

If the bidder is a real person, the name and surname of the bidder, if a legal entity, then the trade name must be fully written and shall be signed by the authorized persons.

The tender reference number JPF-BGD-20-008 must be specified on the e-mail and on the file names.

Bidders who bid as a joint venture must sign bids by all partners or by persons authorized to bid.

In the tender letters who will bid as a consortium, the price that the consortium partners offer for the parts of the business that require their expertise will be written separately. The sum of the prices that the consortium partners offer shall constitute the consortium's total bid price.

All the bid letters submitted by the joint venture must be signed by all partners or by the representatives of the partners.

Proposals which are not in conformity with any of them or which have scrapes, erosions or corrections on them shall be rejected and shall not be considered as submitted at all.

#### **10. Submission of Proposals**

Interested Consultants/Companies/Organizations shall provide a proposal along with the information and documents listed under Clause 8, until **17:00 (pm), 6th of December 2020**. The documents shall be in PDF format and signed by the authorized person. All the documents shall be in a zipped file and shall be send to the following e-mail address.

	<b>Name / Surname</b>	<b>Department</b>	<b>E-Mail Address</b>
1.	-	Procurement Department	<a href="mailto:procurement@japanplatform.org">procurement@japanplatform.org</a>

#### **11. Period of validity**

The validity period of the tenders shall be at least 60 calendar days from the date of procurement. The bids which have shorter period of validity will not be taken into account.

In case of need, the Contracting Authority will make a request for extension of the validity period of the bid for a maximum of 30 days. The tenderer may accept or reject this request of the Contracting Authority. Requests and answers in this regard shall be made in writing.

Successful bidder must ensure the validity of the bid for the following 60 days from being notified of the entitlement to the contract. Regardless of the date of notification, 60 days are added to the first 60 days.

#### **12. Currency of tenders**

The amounts quoted in the offers given by the companies are required to be written in American Dollar - USD.

#### **13. Language of offers and procedure.**

The proposals and all other related documents shall be the scanned version of the original document and shall be written in English. If the original document language is other than English, then the translation of the document will be accepted along with the original.

#### **14. Alteration or withdrawal of tenders**

Bidders may not alter or withdraw their tenders after submission.

#### **15. Costs of preparing tenders.**

Tender dossier is free. All costs incurred during the preparation and submission of the tender offer shall be borne by the bidder. No reimbursement will be made for any charges regardless of the result.

**16. Evaluation - Location, Date and Hour of the Tender Opening and Examination:** JPF will evaluate incoming bids on the following conditions.

The conformity of the required documents  
Quality of technical proposal – weights 60%  
Financial Offer –weights 40%

**17. Notification award and contract signature**

The successful bidder is informed in writing and the contract is signed within 10 (ten) calendar days. A meeting will be conducted prior to the signing of the contract. Firms that are not selected as the result of the evaluation are informed in writing within 15 (fifteen) working days. If the successful bidder does not sign the contract, the second-best bidder is informed in writing by the tender committee and a contract is signed within 10 (ten) calendar days.

**18. Ownership of tenders**

JPF is obliged to keep the procurement proposals collected as a result of this tender for future audits.

**19. Type of Contract**

The contract will be drafted to include bid proposal specifications and tender requirements.

**20. Cancellation of the tender procedure**

In the event of a tender procedure's cancellation, bidders will be notified by JPF.

Cancellation may occur where:

1. The tender procedure has been unsuccessful, namely where not qualitatively or financially worthwhile tender has been received or there has been no response at all.
2. The economic or technical parameters of the project have been fundamentally altered.
3. Exceptional circumstances or force majeure render normal performance of the TPM impossible.
4. All technically compliant tenders exceed the financial resources available.
5. There have been irregularities in the procedure, in particular where these have prevented fair competition.

Under no circumstances JPF will be liable for damages, whatever their nature (in particular damages for loss of profits) or relation with the cancellation of a tender. The publication of a procurement notice does not commit JPF to implement the announced programme or project.

**21. Reasons for disqualification from the tender**

Tenderers in the following cases shall be excluded from the tender if they are found to be:

- 21.1. Those who are bankrupt, in liquidation, whose work is carried out by the court, declare concordat, suspend their business or are in a similar situation according to the legislative provisions in their home country,
- 21.2. Proven by the employer that there were activities in violation of business or professional ethics during the course of business with the organizations within five.  
  
(5) years prior to the date of procurement.
- 21.3. As of the date of the procurement, if the bidder's membership/license is cancelled from the chamber which the bidder had to registered in accordance with the legislation.
- 21.4. Bidders that have failed to provide the documents or gives incomplete or misleading information and/or falsified documents that are requested by this tender dossier.

## **22. Prohibited Acts or Behaviors**

The following acts or actions are prohibited during the tender.

- 22.1. To commit or attempt to commit mischief, fraud, promises, threats, to influence, to exploit for one's interest, to make deal, extortion, bribery or other means of breach.
- 22.2. Acts to influence other bidder's willingness to attend tender, prevent their participation to tender, make or offer deals to other bidders and to engage in acts to influence fair competition or tender decision.
- 22.3. To arrange, use or attempt to falsify documents or fraudulent collateral.
- 22.4. To give more than one proposal, either directly or indirectly, in person or by proxy, on behalf of himself or other

## **23. Ethical Considerations**

- 23.1. The monitoring and evaluation activities should not contradict ethical principles. The selected TPM entity should take all reasonable steps to ensure that the M&E activities are designed and conducted within the framework of Do no Harm principle to respect and protect the safety, rights and welfare of the people.
- 23.2. Consent should be taken from all participants of M&E data collection activities and all data gathered should be kept confidential. Ownership of all data, information, and findings gathered through different M&E activities lies with the contracting authority (JPF).
- 23.3. The TPM entity should adhere to principles and policies of the member NGOs, a special attention should be given to Child Protection principles, gender policy and Preventing Sexual Exploitation, Abuse and Harassment (PSEAH) policy.

Appendix 2: Tools have been used.

Questionnaire for WFS and Household

## Org-Quest Research Limited

DH Tower, Level-7 (Suit-701)

6 Panthapath, Dhaka-1215

Phone: 55013481-84

### Questionnaire for WFS and Household

Project	Protection Support for Myanmar Refugees								
Name of Interviewer		Code		Date of Interview		Sign.			
Check Details	Name of FC:			Name of FS:			Other Official:		
	Code	Sign	Date	Code	Sign	Date	Code	Sign	Date
Accompany Call	1			1			1		
Back Check	2			2			2		
Spot Check	3			3			3		
Address Check	4			4			4		
Scrutiny	5			5			5		
Upazila উপজেলা	Teknaf টেকনাফ		1						
Name of Respondent উত্তরদাতার নাম									
Father's/Husband's Name উত্তরদাতার পিতা/স্বামীর নাম									
Camp's Name/ Number ক্যাম্পের না/নম্বর			Block ব্লক			Sub-block সাব-ব্লক			
						Interview Time			
GPRS						Start		End	

Salam / Adaab, my name is \_\_\_\_\_. I have come from “Org-Quest Research Limited”, a social and market research firm headquartered in Dhaka. We conduct research on different products and services. Currently we are conducting a survey on protective environment for women and children to Rohingya communities in Cox’s Bazar. All information provided by you will be treated as confidential and will be used for the purpose of research only. Please note that no remuneration or incentive will be provided for taking part in this survey.

সালাম / আদাব, আমার নাম \_\_\_\_\_. আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি সামাজিক ও বাজার গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি। আপনার দেয়া সমস্ত তথ্যের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার হবে। এই জরিপে অংশগ্রহণ করার জন্য আপনাকে কোনো পারিশ্রমিক (টাকা বা অন্য কোনো কিছু) দেওয়া হবে না।



## Section 1: Demographic Profile সেকশন ১: ডেমোগ্রাফিক প্রোফাইল

D.1. What is your age? আপনার বয়স কত?

\_\_\_\_\_ Years. বছর

D.2. Gender of the respondent. (Code, Do Not Ask) উত্তরদাতার লিঙ্গ। (কোড করুন। জিজ্ঞাসা করবেন না)

Male পুরুষ	1
Female নারী	2
Other অন্যান্য	3

D.3. What best describes your employment status: (Single answer) আপনার বর্তমান পেশা কোনটি? (একটি উত্তর দিন)

NGO worker/volunteer এনজিও কর্মী/স্বেচ্ছাসেবক	1
Work in a restaurant or tea shop হোটেল বা চায়ের দোকানে কাজ করি	2
Work in a small shop/vendor ছোট দোকানে/ব্যবসা প্রতিষ্ঠানে কাজ করি	3
Driving a rickshaw/tomtom রিক্সা/টমটম চালাই	4
Day labor দিনমজুরের কাজ করি	5
Porter কুলির কাজ করি/মালপত্র আনা-নেয়ার কাজ করি	6
Studying পড়াশোনা করি	7
Receiving vocational training কারিগরী প্রশিক্ষণ নিই	8
Housewife গৃহিনী	9
Housekeeper /বাড়িতে কাজ করি	10
Unemployed বেকার	11
Other (pleasespecify) অন্যান্য (উল্লেখ করুন)	

D.4. What is your marital status now: are you married; living with a partner, not married; widowed; divorced; or separated? (Single answer) আপনার বর্তমান বৈবাহিক অবস্থা কী: অবিবাহিত, বিবাহিত, বিধবা, তালাকপ্রাপ্ত বা আলাদা থাকেন? (একটি উত্তর)

Single অবিবাহিত	1
Married বিবাহিত	2
Divorced তালাকপ্রাপ্ত/তালাকপ্রাপ্তা	3
Widowed বিধবা/ বিপত্নীক	4
Separated আলাদা থাকি	5

**Section 2: Main questionnaire সেকশন 2: মূল প্রশ্নপত্র**

Q1. Have you ever heard about Woman Friendly Spaces (WFS)/shantikhana or Child Friendly Spaces (CFS)? আপনি কি কখনও ওয়ান ফ্রেন্ডলি স্পেসেস (ডারুএফএস)/ শান্তিখানা এবং চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) সম্পর্কে শুনেছেন?

Yes হ্যাঁ	1	Continue চালিয়ে যান
No না	2	Go to Q4
Don't know/No answer জানি না/উত্তর নেই	3	Q4 এ যান

Q2. What is your role at Woman Friendly Spaces (WFS) /shantikhana or Child Friendly Spaces (CFS)? (Single answer) ওয়ান ফ্রেন্ডলি স্পেসেস (ডারুএফএস)/শান্তিখানা বা চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) এ আপনার ভূমিকা কী? একটি উত্তর [প্রস্পট করুন]

I am a registered member at Woman Friendly Spaces (WFS) /shantikhana আমি ওয়ান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) /শান্তিখানা এ নিবন্ধিত সদস্য	1
I am not a registered member at Woman Friendly Spaces (WFS) /shantikhana, but I often participate in different activities (visitor) আমি ওয়ান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) /শান্তিখানা এ নিবন্ধিত সদস্য নই, তবে আমি প্রায়ই বিভিন্ন কার্যক্রমে অংশগ্রহণ করি (দর্শনার্থী)	2
I have heard about Woman Friendly Spaces (WFS) /shantikhana, but never participated in any of their activities আমি ওয়ান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) /শান্তিখানা সম্পর্কে শুনেছি, তবে তাদের কোনও কার্যক্রমে অংশ নিই নি	3
I have heard about Child Friendly Spaces (CFS), but never participated in any of their activities আমি চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) সম্পর্কে শুনেছি, তবে তাদের কোনও কার্যক্রমে অংশ নিই নি	4
Don't know/No answer জানি না/উত্তর নেই	5

**Ask all সবাইকে জিজ্ঞাসা করুন**

Q3. Have you ever received any information related to protection such as human trafficking, child marriage, domestic violence/intimate partner violence during the last 6 months? আপনি কি গত ৬ মাসে সুরক্ষা, যেমন মানব পাচার, বাল্য বিবাহ, পারিবারিক নির্যাতন/কাছের মানুষের কাছ হতে সহিংসতাসম্পর্কিত কোনো তথ্য পেয়েছেন?

Yes হ্যাঁ	1
No না	2
Don't know/No answer জানি না/উত্তর নেই	3

Check the quota of the respondents উত্তরদাতাদের কোটা চেক করুন

Registered member at Woman Friendly Spaces (WFS) /shantikhana ওয়ান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) /শান্তিখানা এ নিবন্ধিত সদস্য	1	Continue চালিয়ে যান
Beneficiaries who have attended awareness session in CFS চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) তে সচেতনতা কার্যক্রমে অংশগ্রহণকারী সুবিধাভোগী	2	
Others অন্যান্য	3	Terminate সাক্ষাৎকার শেষ করুন

**Ask All সবাইকে জিজ্ঞাসা করুন**

Q4. What are your biggest protection concerns? (Do not read out options) (Probe properly. Can choose multiple responses) সুরক্ষা/নিরাপত্তা নিয়ে আপনার সবচেয়ে বড় চিন্তা কী? (উত্তর পড়ে শোনাবেন না) (ভালোভাবে প্রোব করুন। একাধিক উত্তর নেয়া যাবে)

Early marriage বাল্যবিয়ে	1
Child labor শিশুশ্রম	2
Domestic violence পারিবারিক নির্যাতন	3
Trafficking মানব পাচার	4
Sexual abuse or harassment যৌন নির্যাতন বা হয়রানি	5
Free movement স্বাধীনভাবে চলাফেরা	6
Living in a foreign country অন্য দেশে বসবাস করা	7
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q5. Now I will read some of the topics related to protection. Can you let me know how much do you know about the topics? (Single answer per column) এখন আমি সুরক্ষা সম্পর্কিত কিছু বিষয় পড়ে শোনাবা আপনি কী আমাকে বিষয়গুলি সম্পর্কে কতটা জানেন; তা জানাবেন? (প্রতি কলামে একটি উত্তর)

	Trafficking মানব পাচার	Early marriage বাল্যবিয়ে	Domestic violence পারিবারিক নির্যাতন
Very much aware of the topic বিষয় সম্পর্কে খুব সচেতন	4	4	4
Somewhat aware of the topic বিষয়টি সম্পর্কে কিছুটা সচেতন	3	3	3
Only heard about the topic, but don't know much about it কেবলমাত্র বিষয়টি সম্পর্কে শুনেছি, তবে এ সম্পর্কে খুব বেশি কিছু জানেন না	2	2	2
Don't know about it at all এটি সম্পর্কে মোটেও জানেন না	1	1	1

Ask to those who coded 3 or above in Q6, else go to Q10 যারা Q6 এ 3 বা তার উপরে কোড করেছেন তাদের জিজ্ঞাসা করুন, অন্যথায় Q10 এ যান

Q6. If I want you to compare your current knowledge on the topics and the knowledge you have 6 months ago, how much do you agree or disagree that, your knowledge on \_\_\_\_\_ [read the options from the grid below] has increased substantially. (Single answer per column) আমি যদি আপনার বর্তমান বিষয়গুলির জ্ঞানের উপর ৬ মাস আগের জ্ঞানের তুলনা করতে চাই, আপনি কতটা একমত বা একমত নন, আপনার জ্ঞান \_\_\_\_\_ [নীচে গ্রিড থেকে অপশনগুলি পড়ুন] সম্পর্কে যথেষ্ট পরিমাণে বেড়েছে? (প্রতি কলামে একটি উত্তর)

	Trafficking মানব পাচার	Early marriage বাল্যবিয়ে	Domestic violence পারিবারিক নির্যাতন
Completely agree সম্পূর্ণ একমত	5	5	5
Agree একমত	4	4	4
Neither agree, nor disagree একমতও না দ্বিমত ও না	3	3	3
Disagree দ্বিমত	2	2	2
Completely disagree সম্পূর্ণ দ্বিমত	1	1	1

Q7. Have you noticed any incident of \_\_\_\_\_ [read the options from the grid below] topic in your camp? আপনি কি আপনার কাম্পে \_\_\_\_\_ [নীচের গ্রিড থেকে বিকল্পগুলি পড়ুন] এর কোন ঘটনা দেখেছিলেন বা জেনেছিলেন?

	Trafficking মানব পাচার	Early marriage বাল্যবিয়ে	Domestic violence পারিবারিক নির্যাতন
Yes হ্যাঁ	1	1	1
No না	2	2	2

Q7. এ উত্তর না হলেও পরবর্তী প্রশ্ন মানে Q8. এর প্রশ্ন আসছে, Q7. এ তিনটিতে না হলেও Q8. এ তিনটি প্রশ্নেরই উত্তর চাওয়া হচ্ছে

Q8. What did you do when you have seen such incidents? (Do not read out options) (Can choose multiple responses) আপনি যখন এই জাতীয় ঘটনা দেখেছেন তখন আপনি কি করেছিলেন? (পড়ে শোনাবেন না) (একাধিক রেসপন্স করতে পারেন)

	Trafficking মানব পাচার	Early marriage বাল্যবিয়ে	Domestic violence পারিবারিক নির্ঘাতন
Discussed it in the Woman Friendly Spaces (WFS) /shantikhana ওম্যান ফ্রেন্ডলি স্পেসেস (ডাব্লুএফএস) /শান্তিখানা এ আলোচনা করেছিলাম	1	1	1
Discussed it in the Child Friendly Spaces (CFS) চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) এ আলোচনা করেছিলাম	2	2	2
Informed the Police or security forces পুলিশ বা নিরাপত্ত বাহিনীকে জানিয়েছিলাম	3	3	3
Informed the local leader, Majhi, CiC (Camp in charge) স্থানীয় নেতা, মাঝি, ক্যাম্প ইনচার্জ (সিআইসি) কে জানিয়েছিলাম	4	4	4
Informed to the local religious leader ধর্মীয় নেতাকে জানিয়েছিলাম	5	5	5
Shared with myParents বাবা-মাকে বলেছিলাম	6	6	6
Shared with my teacher শিক্ষককে বলেছিলাম	7	7	7
Shared with my neighbours প্রতিবেশীদের বলেছিলাম	8	8	8
Shared with my friends বন্ধুদের বলেছিলাম	9	9	9
Other (please specify) অন্যান্য (উল্লেখ করুন)			
Did not do anythingকিছুই করি নাই	99	99	99

**Ask All সবাইকে জিজ্ঞাসা করুন**

Q9. How often do you feel worried or stressed about your life? In this regard I am going to read out some response options. Please let me know which response option suits you best/is most appropriate. (Read out options) (Single answer) আপনি কত ঘন ঘন আপনার জীবন নিয়ে দুশ্চিন্তা করেন অথবা চাপ বা অশান্তি অনুভব করেন? এই ব্যাপারে আমি আপনাকে কয়েকটি উত্তর পড়ে শোনাচ্ছি, দয়া করে বলুন এরমধ্যে কোন উত্তরটি আপনার জন্য সবচেয়ে বেশি প্রযোজ্য/সঠিক। (উত্তর পড়ে শোনান) (একটি উত্তর)

Always সবসময়	5	Continue চালিয়ে যান
Often প্রায়ই	4	
Sometimes মাঝে মাঝে	3	
Rarely খুব কম	2	Go to Q13 Q13 এ যান
Never কখনো না	1	

Q10. [Ask if always, often or sometimes in Q9] What do you do when you are stressed about your life? (Multiple answer) [যদি Q9 এর উত্তর সবসময়, প্রায়ই বা মাঝে মাঝে হয় তাহলে জিজ্ঞাসা করুন] আপনি যখন আপনার জীবন নিয়ে চাপ বা অশান্তি অনুভব করেন তখন আপনি কী করেন? (একাধিক উত্তর হতে পারে)

Go to the Woman Friendly Spaces (WFS) /shantikhana ওম্যান ফ্রেন্ডলি স্পেসেস (ডাব্লুএফএস) /শান্তিখানা এ যাই	1
Go to the Child Friendly Spaces (CFS) চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) এ যাই	2
Play sports খেলাধুলা করি	3
Gossip with friends বন্ধুদের সাথে গল্প করি/ আড্ডা দেই	4
Sleep ঘুমাই	5
Go to mosque মসজিদে যাই	6
Sit around/ do nothing ঘরে বসে থাকি/কিছুই করি না	7
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q11. Did you face any kind of mental disorder that occurred due to the stress you face? আপনি কি জীবন নিয়ে চাপ বা অশান্তি থেকে কোনো প্রকার মানসিক রোগে ভুগেছিলেন?

Yes হ্যাঁ	1	Continue চালিয়ে যান
No না	2	Go to Q13 Q13 এ যান

Q12. What kind of mental disorder did you face? (Multiple answer) আপনি কোন ধরনের মানসিক রোগের মুখোমুখি হয়েছিলেন? (একাধিক উত্তর হতে পারে)

Anxiety উদ্বেগ/ দুশ্চিন্তা	1	
Insomnia (less sleep at night) অনিদ্রা (রাতে কম ঘুম)	2	
Decrease in appetite ক্ষুধা হ্রাস	3	
Sorrow দুঃখ	4	
Inattentiveness অন্যান্যমনস্কতা	5	
Other (please specify) অন্যান্য (উল্লেখ করুন)		

**Ask All সবাইকে জিজ্ঞাসা করুন**

Q13. Where would you go if you have any mental health concerns? (Do not read out options) ( Can choose multiple responses) আপনার যদি কোনো মানসিক স্বাস্থ্যজনিত উদ্বেগ হয় তাহলে আপনি কোথায় যাবেন বা কী করবেন? (উত্তর পড়ে শোনাবেন না) (একাধিক উত্তর নেয়া যাবে)

Health post Primary Health Centre হেলথ পোস্ট (ক্যাম্পের স্বাস্থ্যসেবা কেন্দ্র)/ প্রাথমিক স্বাস্থ্যসেবা কেন্দ্র	1
Field hospital ফিল্ড হাসপাতাল	2
Community health volunteer কমিউনিটি স্বাস্থ্য স্বেচ্ছাসেবক/হেলথ ভলান্টিয়ার	3
Woman Friendly Spaces (WFS) /shantikhana ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) /শান্তিখানা	4
Child Friendly Spaces (CFS) চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস)	5
Traditional healer সনাতন চিকিৎসক, যেমন: কবিরাজ, ওঝাইত্যাদি	6
Mosque/religious leader মসজিদ/ধর্মীয় নেতা	7
Talk to family/friends পরিবারের সদস্য/বন্ধুদের সাথে কথা বলবো	8
Nowhere কোথাও যাবো না	9
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q14. Have you ever visited any psychological counselor due to mental health concerns? মানসিক স্বাস্থ্যের উদ্বেগের/চিন্তার কারণে আপনি কি কোনও মনস্তাত্ত্বিক পরামর্শদাতাকে দেখিয়েছেন?

Yes হ্যাঁ	1
No না	2

Q15. Do you know anyone who have visited any psychological counselor due to mental health concerns? মানসিক স্বাস্থ্যের উদ্বেগের/চিন্তার কারণে মনস্তাত্ত্বিক পরামর্শদাতাকে দেখিয়েছেন এমন কাউকে কি চেনেন?

Yes হ্যাঁ	1
No না	2

Q16. If any woman in your camp is referred to a psychological counselor due to mental health concerns, is permission sought from him/her? আপনার ক্যাম্পের কোনও মহিলাকে যদি মানসিক স্বাস্থ্যের উদ্বেগের কারণে কোনও মনস্তাত্ত্বিক পরামর্শদাতার কাছে রেফার করা হয়, তবে তার কাছ থেকে অনুমতি নেওয়া হবে কি?

Yes হ্যাঁ	1
No না	2
Don't know/No answer/ জানেন না / উত্তর নেই	3

Q17. Did anyone visit your household to create awareness on protection risk and services? সুরক্ষা ঝুঁকি এবং সেবাসমূহ সম্পর্কে সচেতনতা তৈরি করতে কেউ কি আপনার পরিবার পরিদর্শন করেছিলেন?

Yes হ্যাঁ	1
No না	2
Don't know/No answer জানি না/উত্তর নেই	

Q18. Have you ever received any brochure on protection risk and services? সুরক্ষা ঝুঁকি এবং সেবাসমূহ সম্পর্কে আপনি কি কোনো ব্রোশিওর পেয়েছেন?

Yes হ্যাঁ	1	
No না	2	
-	3	

Q19. Are you familiar of the following events/days? (Multiple answer) আপনি কি নিম্নলিখিত ঘটনা / দিনগুলির সাথে পরিচিত? (একাধিক উত্তর হতে পারে)

Human Rights Day মানবাধিকার দিবস	1
International Women's Day আন্তর্জাতিক নারী দিবস	2
World Children's Day বিশ্ব শিশু দিবস	3
None of the above উপরের কোনটি নয়	4

**Ask those who are aware of events/days** যারা উপরের ইভেন্ট / দিন সম্পর্কে সচেতন তাদের জিজ্ঞাসা করুন

Q20. Have you ever participated in any activities on the following days? আপনি কি কখনো নিম্নলিখিত দিনগুলিতে কার্যক্রমে অংশ নিয়েছেন?

Q20. যে কোন একটি উত্তর সিলেক্ট করলে Q21 তে তিনটি প্রশ্ন সম্পর্কে জানতে চাওয়া হচ্ছে, যদি কেউ পরিচিত না হয় তাহলে কার্যক্রমে অংশ নেওয়ার প্রশ্ন করা যায় না।

	Yes	No
Human Rights Day মানবাধিকার দিবস	1	2
International Women's Day আন্তর্জাতিক নারী দিবস	1	2
World Children's Day বিশ্ব শিশু দিবস	1	2



**Ask those who have participated in activities on events/days** যারা ইভেন্ট / দিন সম্পর্কে সচেতন তাদের জিজ্ঞাসা করুন

Q21. What types of activities did you participate in? ? (একাধিক উত্তর হতে পারে) আপনি কোন ধরনের ক্রিয়াকলাপে অংশ নিয়েছিলেন?

Awareness raising activities on prorection issues সুরক্ষা ইস্যুতে সচেতনতা বৃদ্ধি কার্যক্রম	1
Cultural programs সাংস্কৃতিক অনুষ্ঠান	2
Sports খেলাধুলা	3
Other (please specify) অন্যান্য (উল্লেখ করুন)	4

**Ask All সবাইকে জিজ্ঞাসা করুন**

Q22. Do you feel safe to roam on your own in your camp? (Single answer) আপনি কি ক্যাম্পে একা ঘুরে বেড়াতে নিরাপদ বোধ করেন? (একটি উত্তর)

Yes হ্যাঁ	1
No না	2
Not sure নিশ্চিত নই	3
No answer/Refused উত্তর নেই/উত্তর দিতে অস্বীকৃতি	4

Q23. What is your favorite place? (Do not read out options) (Single answer) আপনার প্রিয় জায়গা কোনটি? (উত্তর পড়ে শোনাবেন না) (একটি উত্তর দিন)

Woman Friendly Spaces (WFS) /shantikhana ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) /শান্তিখানা	1
Child Friendly Spaces (CFS) চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস)	2
Home বাড়ি	3
Madrassa/learning center মাদ্রাসা/শিক্ষা কেন্দ্র	4
Outdoors বাইরের খোলা জায়গা	5
Mosque মসজিদ	6
Other (please specify) অন্যান্য (উল্লেখ করুন)	

**Ask the registered member of WFS ডার্লুএফএস এর রেজিস্টার্ড সদস্যকে জিজ্ঞাসা করুন**

Q24. Do you think that Woman Friendly Spaces (WFS) /shantikhana /Child Friendly Spaces (CFS) is a safe and secure place? আপনি কি মনে করেন যে ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) /শান্তিখানা / চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) একটি নিরাপদ এবং সুরক্ষিত জায়গা?

Yes হ্যাঁ	1
No না	2
Don't know/No answer জানি না/উত্তর নেই	3

Q25. As a registered member of Woman Friendly Spaces (WFS) /shantikhana what type of activities did you participate in? (Multiple answer) ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) /শান্তিখানা / চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) এর নিবন্ধিত সদস্য হিসাবে আপনি কোন ধরনের ক্রিয়াকলাপে অংশ নিয়েছিলেন? (একাধিক উত্তর হতে পারে)

Lectures on different courses বিভিন্ন কোর্সে বক্তৃতা	1
Recreational activities বিনোদনমূলক কার্যক্রম	2
Counseling কাউন্সেলিং	3
Psychological first aid মানসিক প্রাথমিক চিকিৎসা	4

Q26. I'd like to talk to you about relationships between women and men, and some of the problems they face. You may find some of my questions personal or sensitive, so please remember you do not have to give answers if you are not comfortable. I am now going to read you a series of statements. For each, I would like to tell me whether you strongly agree, agree, disagree, or strongly disagree. There are no correct or incorrect answers. (Single answer per row) নারী এবং পুরুষদের মধ্যে সম্পর্ক এবং তাদের কিছু সমস্যা সম্পর্কে আপনার সাথে এখন কথা বলবা তবে কোনো বিষয়ে স্বাচ্ছন্দ্য বোধ না করলে সে বিষয়ে উত্তর দিতে হবে না। আমি এখন আপনাকে বিবৃতিগুলি ধারাবাহিকভাবে পড়ে শোনাচ্ছি প্রত্যেকের জন্য আপনি একমত হলে দৃঢ়ভাবে একমত, একমত এবং দ্বিমত হলে দ্বিমত, দৃঢ়ভাবে দ্বিমত বলতে পারেন। কোনও সঠিক বা ভুল উত্তর নেই (প্রতি সারিতে একটি উত্তর)

	Strongly agree	Agree	Unsure	Disagree	Strongly disagree
People should be treated the same whether they are male or female মানুষের উচিত নারী বা পুরুষ সবার সাথে একই আচরণ করা	5	4	3	2	1
A woman's most important role is to take care of her home and family একজন নারীর সবচেয়ে গুরুত্বপূর্ণ ভূমিকা তার বাড়ির এবং পরিবারের যত্ন নেওয়া	5	4	3	2	1
Men should share the work around the house with women, such as washing dishes, cleaning and cooking পুরুষদের উচিত বাড়ির কাজগুলি নারীদের সাথে ভাগ করে করা, যেমন খালাবাসন পরিষ্কার করা এবং রান্না করা	5	4	3	2	1
A woman should obey her husband একজন মহিলার উচিত তার স্বামীর আনুগত্য করা	5	4	3	2	1
A man should have the final decision in all family matters পরিবারের সমস্ত বিষয়ে পুরুষের চূড়ান্ত সিদ্ধান্ত নেওয়া উচিত	5	4	3	2	1
If a wife does something wrong, her husband has the right to punish her যদি কোনো স্ত্রী কোনো ভুল করে থাকে, তবে তার স্বামীর তাকে শাস্তি দেওয়ার অধিকার রয়েছে	5	4	3	2	1

A real man must be tough একজন সত্যিকারের মানুষ অবশ্যই শক্তিশালী/বলিষ্ঠ হতে হবে	5	4	3	2	1
If someone insults a man, he should defend his reputation, with force if necessary যদি কেউ কোনো ব্যক্তিকে অপমান করে, প্রয়োজনে তার জোর/শক্তি দিয়ে তার খ্যাতি রক্ষা করা উচিত	5	4	3	2	1
It is a woman's responsibility to avoid getting pregnant গর্ভবতী হওয়া এড়ানো একটি নারীর দায়িত্ব	5	4	3	2	1
A woman should tolerate violence in order to keep her family together একজননারীর পরিবারকে একসাথে রাখার জন্য সহিংসতা/নির্যাতন সহ্য করা উচিত	5	4	3	2	1
<b>Ask if the respondent's age is more than 15+ উত্তরদাতার বয়স 15+ এর বেশিহলে জিজ্ঞাসা করুন</b>					
Men need to have sex more often than women do নারীদের তুলনায় পুরুষদের বেশিবার শারীরিক সম্পর্ক করা দরকার	5	4	3	2	1
A woman cannot refuse to have sex with her husband একজন নারী তার স্বামীর সাথে সহবাস করতে অস্বীকার করতে পারবে না	5	4	3	2	1
When a woman is raped, she is usually to blame for putting herself in that situation যখন কোনো নারী ধর্ষণ করা হয়, তখন সাধারণত তাকে ঐ পরিস্থিতির জন্য তাকেই দায়ী করা হয়	5	4	3	2	1

Q27. What do you think the term "violence against women and girls" means? (Multiple answer)

"নারী ও মেয়েদের প্রতি সহিংসতা" শব্দটির অর্থ কী? (একাধিক উত্তর হতে পারে)

Rape / sexual assault ধর্ষণ / যৌন নির্যাতন	1
Physical violence শারীরিক নির্যাতন	2
Violence by husbands against wives স্ত্রীর বিরুদ্ধে স্বামীর দ্বারা সহিংসতা	3
Forced marriage জোরপূর্বক বিবাহ	4
Denial of resources or opportunities সম্পদ বা সুযোগ সুবিধা দিতে অস্বীকার	5
Psychological and emotional abuse মানসিক এবং মানসিক নির্যাতন	6
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q28. How much satisfied are you on \_\_\_\_\_ [read the options from the grid below] of the Woman Friendly Spaces (WFS) /shantikhana? (Single answer per row) ওম্যান ফ্রেন্ডলি স্পেসেস (ডাব্লুএফএস) /শান্তিখানা এর \_\_\_\_\_ [নীচের গ্রিড থেকে অপশনগুলি পড়ুন] সম্পর্কে আপনি কতটা সন্তুষ্ট? (প্রতি সারিতে একটি উত্তর)

	Highly satisfied অত্যন্ত সন্তুষ্ট	Satisfied সন্তুষ্ট	Neither satisfied not dissatisfied সন্তুষ্টও নয় অসন্তুষ্টও নয়	Dissatisfied অসন্তুষ্ট	Highly dissatisfied অত্যন্ত অসন্তুষ্ট	Not applicable /প্রযোজ্য নয়
Accessibility of the facility কেন্দ্রে/শান্তিখানায় প্রবেশের অধিকার	5	4	3	2	1	
The attitude of the staff কর্মীদের মনোভাব	5	4	3	2	1	
The understandability of the contents of awareness session সচেতনতা বৃদ্ধির সেশনে বিষয়বস্তুর বোধগম্যতা/বোঝা	5	4	3	2	1	
Content of work therapy (for those who have attended work therapy) থেরাপির বিষয়বস্তু (যারা থেরাপিতে অংশ নিয়েছেন তাদের জন্য)	5	4	3	2	1	9

**Ask Q29-Q32 to the adults who participated CFS awareness session** সিএফএস-এ যারা সচেতনতা কার্যক্রমে অংশগ্রহণ করেছে, তাদের Q29-Q32 জিজ্ঞাসা করুন

Q29. Can you please tell us what some of the circumstances are that put children at risk in the camp? (Multiple answer) ক্যাম্পের মধ্যে শিশুদের ঝুঁকির মধ্যে ফেলে এমন কিছু পরিস্থিতি কী তা দয়া করে আমাদের জানাবেন? (একাধিক উত্তর হতে পারে)

Basic needs not met (food, shelter, clothing) মৌলিক চাহিদা পূরণ করা হয় না (খাদ্য, আশ্রয়, পোশাক)	1
No access to school or to health care স্কুল বা স্বাস্থ্যসেবার অ্যাক্সেস নেই	2
Domestic violence পারিবারিক সহিংসতা	3
Teenage pregnancy কিশোরী গর্ভাবস্থা	4
Abuse and exploitation of children শিশুদের অপব্যবহার এবং শোষণ	5
Forced or under-age marriage জোর করে বা কম বয়সী বিবাহ	6
Discipline শৃঙ্খলা/ নিয়মনিষ্ঠা	7
Lack of movement inside the camp ক্যাম্পের ভিতরে চলাচলের অভাব	8
Abandonment by parent or guardian পিতামাতা বা অভিভাবক দ্বারা পরিত্যাগ/ তারা দেখাশুনা করেনা	9
Lost their parents during evacuation from Myanmar মায়ানমার থেকে নির্বাসনের সময় তাদের বাবা-মাকে হারিয়েছিল	10
Dangerous child labour বিপজ্জনক শিশুশ্রম	11
Drugs মাদক	12
Trafficking মানব পাচার	13
Peer pressure সমবয়সীদের চাপ	14
Others please specify অন্যান্য উল্লেখ করুন	

Q30. How much satisfied are you on \_\_\_\_\_ [read the options from the grid below] of the Child Friendly Spaces (CFS)? (Single answer per row) চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) এর \_\_\_\_\_ [নীচের গ্রিড থেকে অপশনগুলি পড়ুন] সম্পর্কে আপনি কতটা সন্তুষ্ট? (প্রতি সারিতে একটি উত্তর)

	Highly satisfied	Satisfied	Neither satisfied not dissatisfied	Dissatisfied	Highly dissatisfied
Accessibility of the facility কেন্দ্রে/ শান্তিখানায় প্রবেশের অধিকার	5	4	3	2	1
The attitude of the staff কর্মীদের মনোভাব	5	4	3	2	1
Awareness session on child protection লিঙ্গ ভিত্তিক সহিংসতা সম্পর্কে সচেতনতা বৃদ্ধি	5	4	3	2	1

Q31. Have you heard the word Covid or corona virus? আপনি কোভিড বা করোনাভাইরাস শব্দটি শুনেছেন?

Yes হ্যাঁ	1	Continue চালিয়ে যান
No না	2	End the interview ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন

Q32. What hygiene practices are you following during the current situation of corona? (Multiple answer) করোনার বর্তমান পরিস্থিতিতে আপনি কি কি স্বাস্থ্যবিধি অনুসরণ করছেন? (একাধিক উত্তর হতে পারে)

Washing hands with soap or soap substitute for 20 seconds frequently ঘন ঘন 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	01
Cover coughs or sneeze properly with elbow হাচি বা কাশি দেবার সময় কুণুই দিয়ে মুখ ঢেকে রাখা	02
Washing hands with soap or soap substitute for 20 seconds after attending a patient রোগীর সেবা যত্নের পর 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	03
Washing hands with soap or soap substitute for 20 seconds after taking care of poultry and cattle পশু পাখির যত্নের পর 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	04
Stay at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing) লক্ষণ দেখা দিলে বাড়িতে থাকা (শুকনা কাশি, জ্বর, ক্লান্তি ভাব, শ্বাসকষ্ট)	05
Refrain from gathering অনেক মানুষের একসাথে জড় হওয়া থেকে বিরত থাকা	06
Wear mask মাস্ক পরিধান করা	07
Minimize physical contact শারীরিক স্পর্শ এড়িয়ে চলা	08
Avoid touch face with unsensitized hands ময়লা হাত দিয়ে মুখমণ্ডল স্পর্শ করা থেকে বিরত থাকা	09
Others, please specify অন্যান্য, উল্লেখ করুন	

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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## Refugees in Target area- IDI Guide

### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children among Rohingya communities in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about protective environment for women and children in your camp.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 30 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্পের মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৩০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

- Tell me about yourself. Tell me about your family and family members? How do you spend your time in your daily routine? আপনার নিজের সম্পর্কে বলুন। আপনার পরিবারে আর কে কে আছেন? আপনি প্রতিদিন কীভাবে সময় কাটান?
- What are your biggest protection concerns; such as human trafficking, domestic violence/intimate partner violence, child marriage? Have you received any information on protection? What have you learnt about protection? Was the information new to you? সুরক্ষা/নিরাপত্তা, যেমন মানব পাচার, বাল্য বিবাহ, পারিবারিক নির্যাতন /কাছের মানুষের কাছ হতে সহিংসতা নিয়ে আপনার সবচেয়ে বড় চিন্তা কী? সুরক্ষা সম্পর্কে আপনি কোনও তথ্য পেয়েছেন? সুরক্ষা সম্পর্কে আপনি কী শিখলেন? তথ্যটি কি আপনার কাছে নতুন ছিল?
- If I want you to compare your current knowledge on the topics and the knowledge you have 6 months ago, how much do you think your knowledge on the topics of protection has changed substantially. (Probe properly আমি যদি সুরক্ষা/নিরাপত্তার বিষয়গুলি নিয়ে আপনার বর্তমান জ্ঞানের সাথে ৬ মাস আগের জ্ঞানের তুলনা করতে চাই, আপনি কি মনে করেন, এটা কি পরিবর্তিত হয়েছে? কিভাবে? (ভালোভাবে প্রোব করুন)
- Is there any change in the protective environment such as measures of prevention of human trafficking, domestic violence/intimate partner violence, child marriage for women and children in your camp? Why do you think so? Can you please give some examples? আপনার ক্যাম্পে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ, যেমন মানব পাচার রোধের ব্যবস্থা, পারিবারিক নির্যাতন / কাছের মানুষের কাছ হতে সহিংসতা কমানো, বাল্য বিবাহরোধ ইত্যাদি কোনও পরিবর্তন লক্ষ্য করছেন কি? কেন আপনি এমনটা মনে করছেন? আপনি কিছু উদাহরণ দিতে পারেন?
- Have you heard of Covid-19 or Corona virus at the Child Friendly Spaces (CFS)? Please tell the details. আপনি কী চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) থেকে কোভিড-১৯ বা করোনা ভাইরাস সম্পর্কে কিছু শুনেছেন? দয়া করে বিস্তারিত বলুন।
- What are the rules / precautions to follow to protect yourself from infection with Covid-19 or Corona virus? What hygiene practices are you following during the current situation of corona? How easy was it to follow the hygiene practices that you have learned from the CFS? Please tell the details. করোনার বর্তমান পরিস্থিতিতে আপনি কি কি স্বাস্থ্যবিধি অনুসরণ করছেন? কোভিড-১৯ বা করোনা ভাইরাসের সংক্রমণ থেকে নিজেকে রক্ষা করার জন্য কী কী নিয়ম/সতর্কতা মেনে চলতে হয়? আপনি সিএফএস থেকে জেনে থাকা স্বাস্থ্যকর অনুশীলনগুলি অনুসরণ করা কতটা সহজ ছিল? দয়া করে বিস্তারিত বলুন।



### **(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- Do you think the information you received on protection and COVID 19 was relevant to you? How you made any changes in your life based on the information you received? What changes have you made? আপনি কী সুরক্ষা এবং COVID 19 সম্পর্কিত প্রাপ্ত তথ্যগুলি আপনার পক্ষে প্রাসঙ্গিক বলে মনে করেন? আপনি যে তথ্য পেয়েছেন তার উপর ভিত্তি করে আপনি কীভাবে আপনার জীবনে কোনও পরিবর্তন করেছেন কি? আপনি কি কি পরিবর্তন করেছেন?
- What could have been done to design the session more relevant to the needs of you? সেশনটি আপনাদের প্রয়োজনের সাথে আরও সম্পর্কযুক্ত ডিজাইন করার জন্য কী করা যেত?

### **(CHS\_3) IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?**

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করেছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Were there any social, political, environmental, and economic factors that have an impact on the project? What are those? Was the culture or language of you an issue to implement the project? What were those? প্রকল্পটির উপর প্রভাব রয়েছে এমন কোনো সামাজিক, রাজনৈতিক, পরিবেশগত এবং আর্থিক বিষয় ছিল কি? (যদি থাকে) সেগুলো কী কী? প্রকল্পটি বাস্তবায়নের জন্য আপনাদের সংস্কৃতি বা ভাষা কি কোনো সমস্যা ছিল? (যদি থাকে) কি কি সমস্যা ছিল?
- Do you think you will be able to use the information you received in the future? What impact do you expect in your life based on the information you received from the project? আপনি কি ভাবেন যে আপনি ভবিষ্যতে তথ্যটি ব্যবহার করতে সক্ষম হবেন? আপনি প্রকল্প থেকে প্রাপ্ত তথ্যের উপর নির্ভর করে আপনার জীবনে কী প্রভাব আশা করবেন?

### **(CHS\_6) IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Is there any other NGOs implementing similar project in your camp area? Are they working on the same topic or a different topic? How are these projects complementing each other? Do you face any confusion, which project should you join? আপনাদের ক্যাম্প এলাকায় কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? তারা কি একই বিষয় বা অন্য কোনও বিষয়ে কাজ করছেন? এই প্রকল্পগুলি একে অপরের পরিপূরক হয় কীভাবে? আপনি কি কোনও বিভ্রান্তির সম্মুখীন হন, কোন প্রকল্পে যোগদান করা উচিত?
- Do you have any recommendations that would improve the project or better meet your need? আপনার কি এমন কোনও সুপারিশ রয়েছে যা প্রকল্পটির উন্নতি করতে পারে বা আরও ভালভাবে আপনার প্রয়োজন পূরণ করতে পারে?

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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## Woman registered with WFS- IDI Guide

### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children among Rohingya communities in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about protective environment for women and children in your camp.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 60 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্পের মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

- Tell me about yourself. Tell me about your family and family members? How do you spend your time in your daily routine? আপনার নিজের সম্পর্কে বলুন। আপনার পরিবারে আর কে কে আছেন? আপনি প্রতিদিন কীভাবে সময় কাটান?
- You are a registered member of Woman Friendly Spaces (WFS). Please tell us something about Woman Friendly Spaces (WFS). From whom did you first learn about Woman Friendly Spaces (WFS)? What did they tell you about WFS? আপনি তো ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর একজন নিবন্ধিত সদস্যা। দয়া করে ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) সম্পর্কে কিছু বলুন। আপনি প্রথম কার কাছ থেকে ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) সম্পর্কে জানতে পেরেছিলেন? তিনি আপনাকে এটা সম্পর্কে কি কি বলেছিলেন?
- What was your first impression of Woman Friendly Spaces (WFS)? Did this idea gradually change over time? If so, how and in what areas did the concept change? প্রথম জানার পরে ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) সম্পর্কে আপনার কি ধারণা হয়েছিল? এই ধারণা কি ক্রমেই পরিবর্তন হয়েছে? যদি হয়ে থাকে তাহলে কিভাবে এবং ধারণার কোন্ কোন্ ক্ষেত্রে পরিবর্তন হয়েছে?
- What are your biggest protection concerns such as human trafficking, domestic violence/intimate partner violence, child marriage? If I want you to compare your current knowledge on the topics and the knowledge you have 6 months ago, how much do you think your knowledge on the topics of protection has changed substantially. (Probe properly সুরক্ষা/নিরাপত্তা যেমন মানব পাচার, বাল্য বিবাহ, পারিবারিক নির্যাতন /কাছের মানুষের কাছ হতে সহিংসতা নিয়ে আপনার সবচেয়ে বড় চিন্তা কী? আমি যদি সুরক্ষা/নিরাপত্তার বিষয়গুলি নিয়ে আপনার বর্তমান জ্ঞানের সাথে ৬ মাস আগের জ্ঞানের তুলনা করতে চাই, আপনি কি মনে করেন, এটা কি পরিবর্তিত হয়েছে? কিভাবে? (ভালোভাবে প্রোব করুন)
- Before becoming a registered member of Woman Friendly Spaces (WFS), what did you usually think about the safety of you or women and children like you? Has there been any change in your thinking since you became a member? How it has changed. Please tell the details. ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর একজন নিবন্ধিত সদস্যা হওয়ার আগে আপনার বা আপনার মত নারী ও শিশুদের নিরাপত্তা নিয়ে আপনি সাধারণত কি কি চিন্তা করতেন? সদস্যা হওয়ার পরে আপনার এই চিন্তায় কোনো পরিবর্তন এসেছে? পরিবর্তন হয়ে থাকলে কিভাবে এটা হয়েছে। দয়া করে বিস্তারিত বলুন।
- Have there been any changes in the thinking of other women like you who have become registered members of Woman Friendly Spaces (WFS) about this kind of security? Do you discuss about your safety with other women as a woman? What issues come up for discussion? আপনার মতো অন্যান্য যে সব নারী ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর নিবন্ধিত সদস্যা হয়েছেন তাদেরও কি এই ধরনের নিরাপত্তা নিয়ে চিন্তায় কোনো পরিবর্তন এসেছে? আপনি কি একজন নারী হিসাবে নিজের নিরাপত্তা নিয়ে নারীদের মধ্যে আলোচনা করেন? করলে কি কি বিষয় আলোচনায় আসে?
- What is the attitude of your male family members towards Woman Friendly Spaces (WFS)? Do they support this program or oppose it? Why do you think so? ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) সম্পর্কে আপনাদের পরিবারের পুরুষ সদস্যদের মনোভাব কেমন? তারা এই কার্যক্রম সমর্থন করেন নাকি এর কোন কোন বিষয়ে বিরোধিতা করেন? আপনি কেন এমনটা মনে করছেন?
- Do you feel more secure than before after joining the Woman Friendly Spaces (WFS)? Why is that so? ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর কার্যক্রম চালু থাকার কারণে আপনারা কি নিজেদের এবং পরিবারের শিশুদের আগের চেয়ে বেশী নিরাপদ বোধ করেন? আপনি কেন এমনটা মনে করছেন?
- What would a woman or child do or where would they face violence before they were introduced to Woman Friendly Spaces (WFS)? ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এ চালু হওয়ার আগে কোনো নারী বা শিশু যদি সহিংসতার শিকার হতেন তখন তারা কি করতেন বা কোথায়/কার কাছ যেতেন?

- What action is usually taken if a woman or child is a victim of violence and comes to Woman Friendly Spaces (WFS) for services? Tell the details. সহিংসতার শিকার হয়ে কোনো নারী বা শিশু যদি সেবা নিতে ওম্যান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) এ আসেন তখন সাধারণত কী কী ব্যবস্থা নেয়া হয়? বিস্তারিত বলুন।
- If a woman or child comes to Woman Friendly Spaces (WFS) for services due to mental health concerns, how or what kind of services are provided to her? কোনো নারী বা শিশু যদি মানসিক স্বাস্থ্যের উদ্বেগের/চিন্তার কারণে ওম্যান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) এ সেবা নিতে আসেন তখন তাকে কিভাবে বা কোন ধরনের সেবা দেওয়া হয়?
- What is the biggest benefit of you and all the other women like you who have become registered members of Woman Friendly Spaces (WFS)? আপনি এবং আপনার মতো অন্যান্য যে সব নারী ওম্যান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) এর নিবন্ধিত সদস্যা হয়েছেন সদস্য হওয়ার কারণে তাদের সবচেয়ে বড় লাভ/ অর্জন কোনটি?

### **(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- Do you get the service, support, or information as per your expectation from WFS? Does the WFS staff want to understand your need and expectation from WFS? Did they make any change in the program or activities based on your need and expectation? Can you please give some examples? ডারুএফএস থেকে আপনি কি আপনার প্রত্যাশা অনুযায়ী সেবা, সহায়তা, বা তথ্য পান? ডারুএফএস এর কর্মকর্তা বা কর্মচারী কি আপনার প্রয়োজনীয়তা এবং ডারুএফএস থেকে প্রত্যাশা জানতে চায়? তারা আপনার প্রয়োজন এবং প্রত্যাশার ভিত্তিতে প্রোগ্রাম বা ক্রিয়াকলাপগুলিতে কোনও পরিবর্তন করেছে? আপনি কি কিছু উদাহরণ দিতে পারেন?
- What could have been done to design the service or activities at WFS more relevant to the needs of you? আপনাদের প্রয়োজনের সাথে আরও সম্পর্কযুক্ত ডিজাইন করার জন্য ওম্যান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) এর সেবা বা কার্যক্রম এর ক্ষেত্রে কী করা যেতে পারে?
- Did the outbreak of Covid-19 or Coronavirus hinder your service from Woman Friendly Spaces (WFS)? If yes, then how did you get the service in an alternative way or through? কোভিড-19 বা করোনাভাইরাসের প্রাদুর্ভাবের কারণে ওম্যান ফ্রেন্ডলি স্পেসেস (ডারুএফএস) থেকে আপনার সেবা গ্রহণ করা কি ব্যাহত হয়েছিল? যদি হ্যাঁ বলেন তাহলে, তখন কি আপনি বিকল্প কোনো উপায়ে বা মাধ্যমে সেবা পেয়েছিলেন, তাহলে সেটা কিভাবে?

### **(CHS\_2) IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY? মানবিক সাড়া কার্যকর এবং সময়োপযোগী?**

- What are the differences the project has made to you and people like you? How the project has addressed different needs of women with different ages? একটি প্রকল্প এলাকায় বিভিন্ন ধরনের লোক থাকে। প্রকল্পটি কিভাবে আপনার এবং বৃহত্তর সম্প্রদায়ের প্রয়োজন অনুযায়ী বাস্তবায়িত হচ্ছে? প্রকল্পটি কীভাবে বিভিন্ন বয়সের নারীদের বিভিন্ন প্রয়োজনকে সামনে রেখে বাস্তবায়িত হচ্ছে?

### **(CHS\_3) IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS? মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?**

- Were there any social, political, environmental, and economic factors that have an impact on the project? What are those? Was the culture or language of of you an issue to implement the project? What were those? প্রকল্পটির উপর প্রভাব রয়েছে এমন কোনো সামাজিক, রাজনৈতিক, পরিবেশগত এবং আর্থিক বিষয় ছিল কি? (যদি থাকে) সেগুলো কী কী? প্রকল্পটি বাস্তবায়নের জন্য আপনাদের সংস্কৃতি বা ভাষা কি কোনো সমস্যা ছিল? (যদি থাকে) কি কি সমস্যা ছিল?

### **(CHS\_5) ARE COMPLAINTS WELCOME AND ADDRESSED? অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?**

- Did you feel safe and trusted the confidentiality when communicating with WFS staff? ডারুএফএস

এর কর্মকর্তা বা কর্মচারীদের সাথে যোগাযোগ করার সময় আপনি কী নিরাপদ বোধ করে এবং আপনার গোপনীয়ত রক্ষা হবে তা বিশ্বাস করেন?

- Did you share any complaints or observation during the implementation of the project? What are those complaints or observations? Can you give some example? Were the complaints or observations addressed properly? How was those addressed or why those were not addressed? প্রকল্পটি বাস্তবায়নের সময় আপনার কোনো অভিযোগ বা পর্যবেক্ষণ ছিল কি? অভিযোগ বা পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? অভিযোগ বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

## **(CHS\_6) IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Is there any other NGOs implementing similar project in your camp area? Are they working on the same topic or a different topic? Do you face any confusion, which project should you join? আপনাদের ক্যাম্প এলাকায় কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? তারা কি একই বিষয় বা অন্য কোনও বিষয়ে কাজ করছেন? এই প্রকল্পগুলি একে অপরের পরিপূরক হয় কীভাবে? আপনি কি কোনও বিভ্রান্তির সম্মুখীন হন, কোন প্রকল্পে যোগদান করা উচিত?
- Do you have any recommendations that would improve the project or better meet your need? আপনার কি এমন কোনও সুপারিশ রয়েছে যা প্রকল্পটির উন্নতি করতে পারে বা আরও ভালভাবে আপনার প্রয়োজন পূরণ করতে পারে?

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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## Key Stakeholder Interview (KII) Guide for Implementation NGO

### Introduction ভূমিকা/পরিচিতি

Salam/adab. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children to Rohingya communities in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about protective environment for women and children in your camp.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 45 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাফাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৪৫ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

### Note to the Moderator মডারেটরের জন্য নোট

- Please probe for details where required যেখানে প্রয়োজন, বিস্তারিত বোঝার জন্য প্রোব করুন।
- Please frame your questions depending on the type of activities the project has দয়া করে প্রজেক্ট এর কার্যক্রম অনুযায়ী প্রশ্ন করুন।

### General Questions

- Can you let us know the current status of the implementation? (How many months have passed since the launch? Which major activities were carried out?) আপনি কি আমাকে এই প্রজেক্ট বাস্তবায়নের বর্তমান অবস্থা জানাতে পারেন? (শুরু করার পর থেকে কত মাস পার হয়েছে? কোন কোন প্রধান কার্যক্রম বাস্তবায়িত হয়েছে)?
- Can you tell us what is going well in the project? আপনি কি আমাকে বলতে পারেন এই প্রজেক্টের কী কী ঠিকমতো চলছে?
- How many people have you reached by the Woman Friendly Spaces (WFS) ? How many registered member are there in each Woman Friendly Spaces (WFS) ? Are all of them are regular to participate in different activities? How many visitors are there in each Woman Friendly Spaces (WFS) ? Are they getting same benefits in comparison to what the registered members receiving? আমাকে নারীবান্ধব কেন্দ্রের মাধ্যমে আপনি কতজনের কাছে পৌঁছাতে পেরেছেন? প্রতিটি নারীবান্ধব কেন্দ্রে কতজন করে রেজিস্টার্ড সদস্য আছে? তারা প্রত্যেকেই কি কেন্দ্রের বিভিন্ন কার্যক্রমে নিয়মিত অংশ গ্রহণ করে? প্রতিটি নারীবান্ধব কেন্দ্রে কতজন করে রেজিস্ট্রেশন ছাড়া সেবা নিতে আসে? এই রেজিস্ট্রেশন ছাড়া সেবা গ্রহীতারাও কি রেজিস্টার্ড সদস্যদের মতো একই সুবিধা পান?
- What type of services do you provide to the members of Woman Friendly Spaces (WFS) ? What changes have you noticed among members of Woman Friendly Spaces (WFS) ? নারীবান্ধব কেন্দ্রের রেজিস্টার্ড সদস্যদের আপনি কোন কোন ধরনের সেবা প্রদান করেন? নারীবান্ধব কেন্দ্রের সদস্যদের মধ্যে আপনি কোন কোন ধরনের পরিবর্তন লক্ষ্য করেছেন?
- Can you tell us if there is anything which are not going well? আপনি কি আমাকে বলতে পারেন, যদি এই প্রজেক্টের এমন কিছু আছে যেটা ঠিকমতো চলছে না?
- What about the security situation in the project area? Are there any concerns? How is AAR planning to address them? এই প্রজেক্ট এলাকার নিরাপত্তা পরিস্থিতি কেমন? কোন উদ্বেগের বিষয় আছে কি? AAR কিভাবে সেগুলি মোকাবেলা করার পরিকল্পনা করেছে?
- Are there any possible recommendations or ideas for JPF or the management team of your organization for improving the current project situation? প্রজেক্টের বর্তমান অবস্থার উন্নতি করার জন্য JPF অথবা আপনার সংস্থার ম্যানেজমেন্ট টিমের জন্য কোনো সম্ভাব্য সুপারিশ বা ধারণা আছে কি?

### IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- How the target was set for the project? Did you conduct any need assessment to understand the needs of the women and children in the camp to understand their project related concerns and needs? How was the need assessment conducted? Do you think the project addressed the needs of the children and women in a consistent manner? Do you think the WFS and outreach activity was sufficient to reach the majority of the target beneficiaries in your camp? If not, what should have been done instead? প্রকল্পের জন্য কীভাবে লক্ষ্য নির্ধারণ করা হয়েছিল? এই ক্যাম্পের নারী এবং শিশুদের প্রকল্প সম্পর্কিত চাহিদা বোঝার জন্য আপনারা কি কোনো প্রয়োজনের মূল্যায়ন (নিড অ্যাসেসমেন্ট) করেছিলেন? প্রয়োজনের মূল্যায়ন (নিড অ্যাসেসমেন্ট) কীভাবে করা হয়েছিল? আপনার কি মনে হয় একটি সামঞ্জস্যপূর্ণ পদ্ধতিতে প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজন মেটাতে পারছে? আপনি কি মনে করেন যে নারীবান্ধব কেন্দ্র WFS, এবং আউটরিচ কার্যক্রমটি আপনার ক্যাম্পের সংখ্যাগরিষ্ঠ টার্গেট বেনিফিসিয়ারীদের কাছে পৌঁছানোর জন্য যথেষ্ট ছিল? যদি না হয়, তাহলে এর পরিবর্তে কী করা উচিত ছিল?
- Till now do you think the project was relevant to needs of the project beneficiaries? Why do you think so? What could have been done to design the project more relevant to the needs of the project beneficiaries? এখনো আপনি কি মনে করেন যে প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে সম্পর্কিত ছিল? আপনি কেন এমনটি মনে করছেন? প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে আরও সম্পর্কযুক্ত ডিজাইন করার জন্য কী করা যেত?

- Do you think the protection related topics covered in the lectures or events in WFS activities were sufficient? The brochure distributed through outreach activities, was it easy for the respondents to understand? আপনি কি মনে করেন যে সুরক্ষা সম্পর্কিত বক্তৃতাগুলি অথবা নারীবান্ধব কেন্দ্র WFS, এবং এর ক্রিয়াকলাপগুলি যথেষ্ট ছিল? আউটরিচ কার্যক্রমের মাধ্যমে যে ব্রোশিওর বিতরণ করা হয়েছে, সেটা উত্তরদাতাদের পক্ষে কি বোঝা সহজ ছিল?
- Were the cases of individualized support (GBV cases) sufficient for the project beneficiaries? জেভার বেজড্ ভায়োলেন্স ঘটনায় (কেস ম্যানেজমেন্ট) প্রত্যেককে আলাদাভাবে সমর্থন কি প্রকল্পের সুবিধাভোগীদের জন্য যথেষ্ট ছিল?
- Was there any change made in the project plan during the implementation of the project? Why the changes were necessary? Was there any change made due to the COVID-19 outbreak? What were the changes? How did it impact on the overall project? Was it easy to operate the WFS during COVID-19 outbreak maintaining social distance? Did you continue the outreach activities post COVID-19 outbreak? প্রকল্পটি বাস্তবায়নের সময় কি প্রকল্পের পরিকল্পনায় কোনো পরিবর্তন আনা হয়েছিল? কেন পরিবর্তন করার প্রয়োজন হয়েছিল? কোভিড-19 বা করোনাভাইরাসের প্রাদুর্ভাবের কারণে কি কোনো পরিবর্তন করা হয়েছিল? কী কী পরিবর্তন করা হয়েছিল? এটি সামগ্রিক প্রকল্পে কীভাবে প্রভাব ফেলেছিল? COVID-19 প্রাদুর্ভাবের সময় সামাজিক দূরত্ব বজায় রেখে সময় WFS এবং CFS পরিচালনা করা কি সহজ ছিল? আপনি কি COVID-19 প্রাদুর্ভাব এর পরে আউটরিচ কার্যক্রম চালিয়ে গেছেন?

## IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?

মানবিক সাড়া কার্যকর এবং সময়োপযোগী?

- Do you think that the project will be completed as per expected time? Do you think the objective of the project has been achieved as per project target? What will happen to the WFS once the project is completed? আপনি কি মনে করেন যে প্রকল্পটি প্রত্যাশিত সময় অনুযায়ী শেষ হবে? আপনি কি মনে করেন আপনি কি মনে করেন প্রকল্পের উদ্দেশ্য অনুযায়ী প্রকল্পের লক্ষ্য অর্জন হয়েছে? প্রকল্পটি একবার শেষ হলে নারীবান্ধব কেন্দ্র WFS, এবং গুলোর কী হবে?
- Have you noticed any visible changes to ensure protective environment for children and women? Do you think the incidence of gender based violence, trafficking, child marriage or child labor has reduced due to the implementation of the project? Please explain in details. শিশু এবং নারীদের সুরক্ষিত পরিবেশ নিশ্চিত করতে আপনি কি কোনও দৃশ্যমান পরিবর্তন লক্ষ্য করেছেন? আপনি কী মনে করেন প্রকল্পটি বাস্তবায়নের ফলে জেভার বেজড্ ভায়োলেন্স, মানব পাচার, বাল্য বিবাহ বা শিশুশ্রমের ঘটনা হ্রাস পেয়েছে? বিস্তারিত ব্যাখ্যা করুন।
- What were the major factors influencing the achievement or non-achievement of the objectives? উদ্দেশ্যগুলি অর্জন করা বা অর্জন না করাকে প্রভাবিত করার প্রধান কারণগুলি কী ছিল?

## IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করেছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Has the project been able to strengthen communities' and local capacities and ownership? Do you think the WFS will be active even after the project is closed? Will the psychological counseling be available even after the project is closed? If not, what could be the possible solution to address the issue? প্রকল্পটি কি কমিউনিটি এবং স্থানীয় সক্ষমতা এবং মালিকানাতে শক্তিশালী করতে সক্ষম হয়েছে? আপনি কি মনে করেন যে প্রকল্পটি বন্ধ হওয়ার পরেও নারীবান্ধব



কেন্দ্র WFS,এবং গুলো সক্রিয় থাকবে? প্রকল্পটি বন্ধ হয়ে যাওয়ার পরেও কি মানসিক কাউন্সেলিং পাওয়া যাবে? যদি তা না হয় তবে এই সমস্যার সম্ভাব্য সমাধান কী হতে পারে?

- To what extent have long-term and inter-connected problems been considered when carrying out short-term activities? স্বল্প-মেয়াদী কার্যকলাপ চালানোর সময় দীর্ঘমেয়াদী এবং আন্তঃসম্পর্কিত সমস্যাগুলি কতটা বিবেচিত হয়েছে?
- To what extent, and how, were negative impacts, including in all sectors from above, systematically anticipated, identified, and mitigated? Do you think the male counterpart and caregiver of children will change their perception towards women and children? উপরের সমস্ত সেক্টরে পদ্ধতিগতভাবে প্রত্যাশিত, চিহ্নিত এবং প্রশমিতকরণ সহ কী পরিমাণ এবং কীভাবে নেতিবাচক প্রভাবগ ছিল? আপনি কি মনে করেন যে, পুরুষরা এবং বাচ্চাদের কেয়ারগিভাররা নারী এবং শিশুদের প্রতি তাদের উপলব্ধি পরিবর্তন করবে?
- What were the main barriers to involving local actors in the provision of assistance? Have you noticed presence of religious superstitious that might have an impact on achieving project goal in the long run? সহায়তা পাওয়ার জন্য স্থানীয় নেতৃত্বপ্রদানকারীদের জড়িত করার প্রধান বাধাগুলি কী ছিল? আপনি কি ধর্মীয় কুসংস্কারের উপস্থিতি লক্ষ্য করেছেন যা দীর্ঘমেয়াদে প্রকল্পের লক্ষ্য অর্জনে প্রভাব ফেলতে পারে?
- Did the project have any unforeseen positive and/or negative impacts (including on social, political, environmental and economic factors) which have influenced you or prompted changes in ways of working etc.? প্রকল্পটির কোনও অপ্রত্যাশিত ইতিবাচক এবং / বা নেতিবাচক প্রভাব রয়েছে (যার মধ্যে সামাজিক, রাজনৈতিক, পরিবেশগত এবং অর্থনৈতিক বিষয়গুলি অন্তর্ভুক্ত) যা আপনাকে প্রভাবিত করেছে বা কাজের পদ্ধতিতে দ্রুত পরিবর্তনকে উৎসাহিত করেছে ইত্যাদি?
- Did the response contribute to ease the tension between host communities and Myanmar refugees? এই প্রকল্প কি হোস্ট কমিউনিটি এবং মিয়ানমারের শরণার্থীদের মধ্যে উত্তেজনা লাঘব করতে ভূমিকা রেখেছে?

## **IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Were the beneficiaries able to provide feedback throughout the different stages of program? Were you able to customize the lectures or psychological counseling based on the need of the beneficiaries? সুবিধাভোগীরা কি কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিল? আপনি কি সুবিধাভোগীদের প্রয়োজনের ভিত্তিতে সেবাগুলি বা মানসিক কাউন্সেলিংকে সুবিধাভোগীর প্রয়োজন অনুযায়ী আলাদাভাবে করতে সক্ষম হয়েছিলেন?
- While selecting the beneficiaries for case management, did you receive support from the community people to select the right beneficiaries? কেস ম্যানেজমেন্টের জন্য সুবিধাভোগী বাছাই করার সময়, সঠিক উপকারভোগী বাছাই করার জন্য আপনি কি কমিউনিটির লোকদের কাছ থেকে সহায়তা পেয়েছিলেন?

## **ARE COMPLAINTS WELCOME AND ADDRESSED?**

অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?

- Did targeted beneficiaries and the wider community feel safe and trusted the confidentiality when communicating with member NGOs and its relevant stakeholders? সদস্য এনজিও এবং এর সাথে সম্পর্কিত স্টেকহোল্ডারদের সাথে যোগাযোগ করার সময় নির্বাচিত সুবিধাভোগী এবং রোহিঙ্গা জনগোষ্ঠী কী নিরাপদ বোধ করে এবং গোপনীয়তায় বিশ্বাস করে?
- Did they consider WFS as safe and secure place? তারা কি নারীবান্ধব কেন্দ্র WFS,এবং গুলো সুরক্ষিত এবং নিরাপদ হিসাবে বিবেচনা করে?
- Did they share any feedback or observation during the implementation of the project? What are those feedback or observations? Can you give some example? What the feedback or observations

addressed properly? How was those addressed or why those were not addressed? প্রকল্পটি বাস্তবায়নের সময় তাদের কোনো মতামত পর্যবেক্ষণ ছিল কি? মতামত পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? মতামত পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

## **IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

**মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?**

- How were you engaged with the Majhis and CiCs in the camp? Did you have to keep in touch with other local government authorities while implementing the project? Did the Majhis, CiCs and/or local government authorities provided their feedback on the project? How was the feedback addressed? আপনারা ক্যাম্পে কীভাবে মাঝি ও সিআইসদের সাথে জড়িত হয়েছিলেন? প্রকল্পটি বাস্তবায়নের সময় আপনাদের কি অন্যান্য স্থানীয় সরকার কর্তৃপক্ষের সাথে যোগাযোগ রাখতে হয়েছিল? মাঝি, সিআইসি এবং / বা স্থানীয় সরকার কর্তৃপক্ষ কি প্রকল্পটি সম্পর্কে তাদের ফিডব্যাক বা মতামত দিয়েছিল? তাদের দেওয়া ফিডব্যাক কীভাবে কাজে লাগানো হয়েছিল?
- Has the project complemented and been compatible with government approach? প্রকল্পটি কি সরকারী পদ্ধতির সাথে পরিপূরক এবং সামঞ্জস্যপূর্ণ হয়েছে?
- Is there any other NGOs implementing similar project in your project area (camp)? If yes, how did you coordinate and complement its interventions with others? আপনাদের প্রকল্প এলাকায় (ক্যাম্প) কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? যদি হ্যাঁ হয়, তাহলে আপনারা কীভাবে অন্যদের সাথে এটার সমন্বয় এবং পরিপূরক করেছিলেন?

## **ARE HUMANITARIAN ACTORS CONTINUOUSLY LEARNING AND IMPROVING?**

**যারা মানবিক কাজ করছে তারা কি ধারাবাহিকভাবে শিখছে এবং উন্নতি করছে?**

- Since the beginning of the project, have you made any modifications because of monitoring, feedback, or complaint-handling? If yes, could you please explain how the changes made had positive / negative effects to the achievement of the outputs & outcomes? প্রকল্পের শুরু থেকে, আপনারা কী পর্যবেক্ষণ, ফিডব্যাক বা মতামত, অথবা অভিযোগ নিষ্পত্তি করার কারণে কোনো পরিবর্তন করেছেন? যদি হ্যাঁ হয়, তাহলে আপনি কি দয়া করে বলতে পারেন, পরিবর্তনগুলো যেভাবে করা হয়েছিল তাতে আউটপুট এবং ফলাফল অর্জনে ইতিবাচক বা নেতিবাচক প্রভাব ফেলেছিল?

## **ARE STAFF SUPPORTED TO DO THEIR JOB EFFECTIVELY, AND ARE THEY TREATED FAIRLY AND EQUITABLY?**

**স্টাফরা কি তাদের কাজ সাফল্যের সাথে করতে পারে এবং তাদের সাথে কি নিরপেক্ষভাবে এবং ন্যায়সঙ্গতভাবে আচরণ করা হয়?**

- How much happy are you with the expertise and competencies of your project staff to implement the project? Did they have sufficient knowledge of the context, refugee rights and protection issues? Have they gone through any training before implementing the project? প্রকল্পটি বাস্তবায়নে আপনাদের প্রকল্প কর্মীদের অভিজ্ঞতা এবং দক্ষতা নিয়ে আপনি কতটা খুশি? তাদের কি কনটেক্সট, শরণার্থী অধিকার এবং সুরক্ষা সম্পর্কিত বিষয়ে যথেষ্ট জ্ঞান আছে?
- Did the psychological counselors have required skill and ability to address the needs of target beneficiaries? Was there different psychological counselors for children and women? Did the beneficiaries expressed satisfaction regarding the provision of psychological referrals or supports?

লক্ষ্যভোগীদের চাহিদা নিরূপণের দক্ষতা এবং সেটা সমাধানের সক্ষমতা মানসিক পরামর্শদাতাদের ছিল কি? শিশু এবং মহিলাদের জন্য ভিন্ন মানসিক পরামর্শদাতা ছিল কি? সুবিধাভোগীরা কি মনস্তাত্ত্বিক রেফারেল বা সহায়তা প্রদানের বিষয়ে সন্তুষ্টি প্রকাশ করেছিলেন কি?

## **ARE RESOURCES MANAGED AND USED RESPONSIBLY FOR THEIR INTENDED PURPOSE?**

তাদের অন্তর্নিহিত উদ্দেশ্যের জন্য কি রিসোর্স পরিচালনা করা হয় এবং প্রতিক্রিয়া ব্যবহার করা হয়?

How much happy are you with the budget spent against plan পরিকল্পনার জন্য ব্যয় করা বাজেটে আপনি কতটা খুশি?

- How the most recent audit recommendations have been addressed সর্বশেষ অডিটে সুপারিশগুলোকে কীভাবে অ্যাড্রেস করা হয়েছে?
- How Value for Money was achieved through effective procurement and contracting কার্যকর কেনাকাটা এবং চুক্তির মাধ্যমে কীভাবে টাকা উসুল হয়েছিল?
- How well were the inputs (funds, people, materials, and time) used to produce results? সুফল পেতে ইনপুটগুলো (তহবিল, লোক, উপকরণ এবং সময়) কতটা ভালোভাবে ব্যবহার করা হয়েছিল?

**End the interview by thanking respondent for his/her valuable time and responses.**

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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## KII Guide for Case Manager

### Introduction ভূমিকা/পরিচিতি

Salam/adab. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children to Rohingya communities in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about protective environment for women and children in your camp.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 45 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাফাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৪৫ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

### Note to the Moderator মডারেটরের জন্য নোট

- Please probe for details where required যেখানে প্রয়োজন, বিস্তারিত বোঝার জন্য প্রোব করুন।
- Please frame your questions depending on the type of activities the project has দয়া করে প্রজেক্ট এর কার্যক্রম অনুযায়ী প্রশ্ন করুন।

### General Questions

Can you please define your role as a Case manager? What do you think the most important protection concern are there among the women and children in your camp? [Try to know separately for women and children] আপনি কেস ম্যানেজার হিসাবে আপনার ভূমিকা বর্ণনা করবেন কি? আপনাদের ক্যাম্পে নারী এবং শিশুদের সুরক্ষা/নিরাপত্তা বিষয়ে সবচেয়ে গুরুত্বপূর্ণ উদ্বেগ বা চিন্তার বিষয়টি কী বলে আপনি মনে করেন? [নারী এবং শিশুদের আলাদাভাবে জানার চেষ্টা করুন]

- Are they able to share their concerns to others? তারা কি তাদের উদ্বেগ/চিন্তার বিষয় অন্যকে জানাতে পারে/সক্ষম?
- How useful do you think the Woman Friendly Spaces (WFS) are in terms of creating protection related awareness and providing service to them? সুরক্ষা সম্পর্কিত সচেতনতা তৈরি এবং তাদের সেবা প্রদানের ক্ষেত্রে নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এবং কতটা কার্যকর বলে আপনি মনে করেন?
- What kind of services do you think the Woman Friendly Spaces (WFS) providing to the women? নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) নারীদের জন্য কী ধরনের সেবা প্রদান করছে?
- The case management must have some preset aim or objective to achieve. Could you please let me know the aim or objective set for case management? How effective was the case management to achieve its objective? কেস ম্যানেজমেন্টের অবশ্যই কিছু পূর্বনির্ধারিত লক্ষ্য বা লক্ষ্য ছিল। আপনি কি দয়া করে আমাকে কেস ম্যানেজমেন্টের জন্য লক্ষ্য বা উদ্দেশ্য সম্পর্কে বলতে পারেন? কেস ম্যানেজমেন্ট এর উদ্দেশ্য অর্জনে কতটা কার্যকর ছিল?

### IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- Do you think the case management program was relevant to needs of the project beneficiaries? Why do you think so? What could have been done to design the project more relevant to the needs of the project beneficiaries? আপনি কি মনে করেন যে কেস ম্যানেজমেন্ট প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে সম্পর্কিত ছিল? আপনি কেন এমনটি মনে করছেন? প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে আরও সম্পর্কযুক্ত ডিজাইন করার জন্য কী করা যেত?
- Were the cases of individualized support (GBV cases) sufficient for the project beneficiaries? জেভার বেজড্ ভায়োলেন্স ঘটনায় (কেস ম্যানেজমেন্ট) প্রত্যেককে আলাদাভাবে সমর্থন কি প্রকল্পের সুবিধাভোগীদের জন্য যথেষ্ট ছিল?

### IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?

মানবিক সাড়া কার্যকর এবং সময়োপযোগী?

- Have you noticed any visible changes among the beneficiaries who have received services through case management? Can you please give us some example? What were the major factors influencing the achievement or non-achievement of the objectives of case management? কেস ম্যানেজমেন্টের মাধ্যমে সেবা গ্রহণকারী সুবিধাভোগীদের মধ্যে কি কোনও দৃশ্যমান পরিবর্তন লক্ষ্য করেছেন? আপনি কি আমাদের কিছু উদাহরণ দিতে পারেন? কেস ম্যানেজমেন্টের উদ্দেশ্যগুলি অর্জন করা বা অর্জন না করাকে প্রভাবিত করার প্রধান কারণগুলি কী ছিল?

## **IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?**

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করেছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Have you noticed presence of religious superstitious that might have an impact on achieving project goal in the long run? আপনি কি ধর্মীয় কুসংস্কারের উপস্থিতি লক্ষ্য করেছেন যা দীর্ঘমেয়াদে প্রকল্পের লক্ষ্য অর্জনে প্রভাব ফেলতে পারে?

## **IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Were the beneficiaries able to provide feedback throughout the different stages of program? Were you be able to customize the psychological counseling or case management based on the need of the beneficiaries? সুবিধাভোগীরা কি কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিলেন? আপনি কি সুবিধাভোগীদের প্রয়োজনের ভিত্তিতে মানসিক কাউন্সেলিং কেস ম্যানেজমেন্ট সুবিধাভোগীর প্রয়োজন অনুযায়ী আলাদা আলাদাভাবে প্রদান করতে সক্ষম হয়েছিলেন?
- While selecting the beneficiaries for case management, did you receive support from the community people to select the right beneficiaries? কেস ম্যানেজমেন্টের জন্য সুবিধাভোগী বাছাই করার সময়, সঠিক উপকারভোগী বাছাই করার জন্য আপনি কি কমিউনিটির লোকদের কাছ থেকে সহায়তা পেয়েছিলেন?

## **ARE COMPLAINTS WELCOME AND ADDRESSED?**

অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?

- Did targeted beneficiaries and the wider community feel safe and trusted the confidentiality when communicating with member NGOs and its relevant stakeholders? সদস্য এনজিও এবং এর সাথে সম্পর্কিত স্টেকহোল্ডারদের সাথে যোগাযোগ করার সময় নির্বাচিত সুবিধাভোগী এবং রোহিঙ্গা জনগোষ্ঠী কী নিরাপদ বোধ করে এবং গোপনীয়তায় বিশ্বাস করে?
- Did they share any complaints or observation during the implementation of the project? What are those complaints or observations? Can you give some example? What the complaints or observations addressed properly? How was those addressed or why those were not addressed? প্রকল্পটি বাস্তবায়নের সময় তাদের কোনো অভিযোগ বা পর্যবেক্ষণ ছিল কি? অভিযোগ বা পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? অভিযোগ বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

## **IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Is there any other NGOs implementing similar project in your project area (camp)? If yes, how did you coordinate and complement its interventions with others? আপনাদের প্রকল্প এলাকায় (ক্যাম্প) কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? যদি হ্যাঁ হয়, তাহলে আপনারা কীভাবে অন্যদের সাথে এটার সমন্বয় এবং পরিপূরক করেছিলেন?

## **ARE HUMANITARIAN ACTORS CONTINUOUSLY LEARNING AND IMPROVING?**

যারা মানবিক কাজ করছে তারা কি ধারাবাহিকভাবে শিখছে এবং উন্নতি করছে?

- Since the joined the project, have you made any modifications based on monitoring, feedback, or complaint-handling? If yes, could you please explain how the changes made had positive / negative

effects to the achievement of the outputs & outcomes? প্রকল্পে আপনার যোগদানের পর থেকে, আপনারা কী পর্যবেক্ষণ, ফিডব্যাক বা মতামত, অথবা অভিযোগ নিষ্পত্তি করার কারণে কোনো পরিবর্তন করেছেন? যদি হ্যাঁ হয়, তাহলে আপনি কি দয়া করে বলতে পারেন, পরিবর্তনগুলো যেভাবে করা হয়েছিল তাতে আউটপুট এবং ফলাফল অর্জনে ইতিবাচক বা নেতিবাচক প্রভাব ফেলেছিল?

### **ARE STAFF SUPPORTED TO DO THEIR JOB EFFECTIVELY, AND ARE THEY TREATED FAIRLY AND EQUITABLY?**

স্টাফরা কি তাদের কাজ সাফল্যের সাথে করতে পারে এবং তাদের সাথে কি নিরপেক্ষভাবে এবং ন্যায়সঙ্গভাবে আচরণ করা হয়?

- How much happy are you with the expertise and competencies of your project staff to implement the project? Did they have sufficient knowledge of the context, refugee rights and protection issues? Have they gone through any training before implementing the project? প্রকল্পটি বাস্তবায়নে আপনাদের প্রকল্প কর্মীদের অভিজ্ঞতা এবং দক্ষতা নিয়ে আপনি কতটা খুশি? তাদের কি কনটেক্সট, শরণার্থী অধিকার এবং সুরক্ষা সম্পর্কিত বিষয়ে যথেষ্ট জ্ঞান আছে?
- Did the psychological counselors have required skill and ability to address the needs of target beneficiaries? Did the beneficiaries expressed satisfaction regarding the provision of psychological referrals or supports? লক্ষ্যভোগীদের চাহিদা নিরূপণের দক্ষতা এবং সেটা সমাধানের সক্ষমতা মানসিক পরামর্শদাতাদের ছিল কি? শিশু এবং মহিলাদের জন্য ভিন্ন মানসিক পরামর্শদাতা ছিল কি? সুবিধাভোগীরা কি মনস্তাত্ত্বিক রেফারেল বা সহায়তা প্রদানের বিষয়ে সন্তুষ্টি প্রকাশ করেছিলেন কি?

**End the interview by thanking respondent for his/her valuable time and responses.**

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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## KII Guide for Case Worker

### Introduction ভূমিকা/পরিচিতি

Salam/adab. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children to Rohingya communities in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about protective environment for women and children in your camp.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 45 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা

সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি।

বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৪৫ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?



### Note to the Moderator মডারেটরের জন্য নোট

- Please probe for details where required যেখানে প্রয়োজন, বিস্তারিত বোঝার জন্য প্রোব করুন।
- Please frame your questions depending on the type of activities the project has দয়া করে প্রজেক্ট এর কার্যক্রম অনুযায়ী প্রশ্ন করুন।

### General Questions

Can you please define your role as a Case worker? What do you think the most important protection concern are there among the women and children in your camp? [Try to know separately for women and children] আপনি কেস ওয়ার্কার হিসাবে আপনার ভূমিকা বর্ণনা করবেন কি? আপনাদের ক্যাম্পে নারী এবং শিশুদের সুরক্ষা/নিরাপত্তা বিষয়ে সবচেয়ে গুরুত্বপূর্ণ উদ্বেগ বা চিন্তার বিষয়টি কী বলে আপনি মনে করেন? [নারী এবং শিশুদের আলাদাভাবে জানার চেষ্টা করুন]

- Are they able to share their concerns to others? তারা কি তাদের উদ্বেগ/চিন্তার বিষয় অন্যকে জানাতে পারে/সক্ষম?
- How useful do you think the Woman Friendly Spaces (WFS) and Child Friendly Spaces (CFS) are in terms of creating protection related awareness and providing service to them? সুরক্ষা সম্পর্কিত সচেতনতা তৈরি এবং তাদের সেবা প্রদানের ক্ষেত্রে নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডাব্লুএফএস) এবং শিশুবান্ধব কেন্দ্র /চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) কতটা কার্যকর বলে আপনি মনে করেন?
- What kind of services do you think the Woman Friendly Spaces (WFS) and Child Friendly Spaces (CFS) providing to the women and children? নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডাব্লুএফএস) এবং শিশুবান্ধব কেন্দ্র /চাইল্ড ফ্রেন্ডলি স্পেসেস (সিএফএস) নারী ও শিশুদের জন্য কী ধরনের সেবাগুলি সরবরাহ করছে?
- Could you please describe, how the case management service was provided to the beneficiary? What were the key challenges you faced while providing the case management support? আপনি কি আমাদের বলবেন, কীভাবে সুবিধাভোগীদের কেস ম্যানেজমেন্ট সেবা প্রদান করা হয়েছিল? কেস ম্যানেজমেন্ট সহায়তা প্রদান করার সময় আপনি কী কী চ্যালেঞ্জগুলির মুখোমুখি হয়েছিলেন?
- The case management must have some preset aim or objective to achieve. Could you please let me know the aim or objective set for case management? How effective was the case management to achieve its objective? কেস ম্যানেজমেন্টের অবশ্যই কিছু পূর্বনির্ধারিত লক্ষ্য বা লক্ষ্য ছিল। আপনি কি দয়া করে আমাকে কেস ম্যানেজমেন্টের জন্য লক্ষ্য বা উদ্দেশ্য সম্পর্কে বলতে পারেন? কেস ম্যানেজমেন্ট এর উদ্দেশ্য অর্জনে কতটা কার্যকর ছিল?

### IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- Do you think the case management program was relevant to needs of the project beneficiaries? Why do you think so? What could have been done to design the project more relevant to the needs of the project beneficiaries? আপনি কি মনে করেন যে কেস ম্যানেজমেন্ট প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে সম্পর্কিত ছিল? আপনি কেন এমনটি মনে করছেন? প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে আরও সম্পর্কযুক্ত ডিজাইন করার জন্য কী করা যেত?
- Were the cases of individualized support (GBV cases) sufficient for the project beneficiaries? জেস্টার বেজড্ ভায়োলেন্স ঘটনায় (কেস ম্যানেজমেন্ট) প্রত্যেককে আলাদাভাবে সমর্থন কি প্রকল্পের সুবিধাভোগীদের জন্য যথেষ্ট ছিল?

## **IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?**

মানবিক সাড়া কার্যকর এবং সময়োপযোগী?

- Have you noticed any visible changes among the beneficiaries who have received services through case management? Can you please give us some example? What were the major factors influencing the achievement or non-achievement of the objectives of case work? কেস ম্যানেজমেন্টের মাধ্যমে সেবা গ্রহণকারী সুবিধাভোগীদের মধ্যে কি কোনও দৃশ্যমান পরিবর্তন লক্ষ্য করেছেন? আপনি কি আমাদের কিছু উদাহরণ দিতে পারেন? কেস ওয়ার্ক উদ্দেশ্যগুলি অর্জন করা বা অর্জন না করাকে প্রভাবিত করার প্রধান কারণগুলি কী ছিল?

## **IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?**

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করেছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Have you noticed presence of religious superstitious that might have an impact on achieving project goal in the long run? আপনি কি ধর্মীয় কুসংস্কারের উপস্থিতি লক্ষ্য করেছেন যা দীর্ঘমেয়াদে প্রকল্পের লক্ষ্য অর্জনে প্রভাব ফেলতে পারে?

## **IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Were the beneficiaries able to provide feedback throughout the different stages of program? Were you able to customize the psychological counseling or case management based on the need of the beneficiaries? সুবিধাভোগীরা কি কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিল? আপনি কি সুবিধাভোগীদের প্রয়োজনের ভিত্তিতে মানসিক কাউন্সেলিং কেস ম্যানেজমেন্ট সুবিধাভোগীর প্রয়োজন অনুযায়ী আলাদা আলাদাভাবে প্রদান করতে সক্ষম হয়েছিলেন?
- While selecting the beneficiaries for case management, did you receive support from the community people to select the right beneficiaries? কেস ম্যানেজমেন্টের জন্য সুবিধাভোগী বাছাই করার সময়, সঠিক উপকারভোগী বাছাই করার জন্য আপনি কি কমিউনিটির লোকদের কাছ থেকে সহায়তা পেয়েছিলেন?

## **ARE COMPLAINTS WELCOME AND ADDRESSED?**

অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?

- Did targeted beneficiaries and the wider community feel safe and trusted the confidentiality when communicating with member NGOs and its relevant stakeholders? সদস্য এনজিও এবং এর সাথে সম্পর্কিত স্টেকহোল্ডারদের সাথে যোগাযোগ করার সময় নির্বাচিত সুবিধাভোগী এবং রোহিঙ্গা জনগোষ্ঠী কী নিরাপদ বোধ করে এবং গোপনীয়তায় বিশ্বাস করে?
- Did they share any complaints or observation during the implementation of the project? What are those complaints or observations? Can you give some example? What the complaints or observations addressed properly? How was those addressed or why those were not addressed? প্রকল্পটি বাস্তবায়নের সময় তাদের কোনো অভিযোগ বা পর্যবেক্ষণ ছিল কি? অভিযোগ বা পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? অভিযোগ বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

## **IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Is there any other NGOs implementing similar project in your project area (camp)? If yes, how did you coordinate and complement its interventions with others? আপনাদের প্রকল্প এলাকায় (ক্যাম্প) কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? যদি হ্যাঁ হয়, তাহলে আপনারা কীভাবে অন্যদের সাথে এটার সমন্বয় এবং পরিপূরক করেছিলেন?

## **ARE STAFF SUPPORTED TO DO THEIR JOB EFFECTIVELY, AND ARE THEY TREATED FAIRLY AND EQUITABLY?**

স্টাফরা কি তাদের কাজ সাফল্যের সাথে করতে পারে এবং তাদের সাথে কি নিরপেক্ষভাবে এবং ন্যায়সঙ্গতভাবে আচরণ করা হয়?

- How were you selected for this project? Have you gone through any training before implementing the project? How much happy are you with the training you have received? Based on past experience in the project, do you think you need more training to implement the project? What type of training do you expect? আপনি কিভাবে এই প্রকল্পের জন্য নির্বাচিত হয়েছিলেন? প্রকল্পটি বাস্তবায়নের আগে আপনি কোনও প্রশিক্ষণ পেয়েছিলেন কি? আপনি যে প্রশিক্ষণ পেয়েছেন তাতে আপনি কতটা সন্তুষ্ট? প্রকল্পের অভিজ্ঞতার ভিত্তিতে, আপনি কি মনে করেন যে প্রকল্পটি বাস্তবায়নের জন্য আপনার আরও প্রশিক্ষণের প্রয়োজন? আপনি কোন ধরনের প্রশিক্ষণ আশা করেন?
- Did the psychological counselors have required skill and ability to address the needs of target beneficiaries? Did the beneficiaries expressed satisfaction regarding the provision of psychological referrals or supports? লক্ষ্যভোগীদের চাহিদা নিরূপণের দক্ষতা এবং সেটা সমাধানের সক্ষমতা মানসিক পরামর্শদাতাদের ছিল কি? শিশু এবং মহিলাদের জন্য ভিন্ন মানসিক পরামর্শদাতা ছিল কি? সুবিধাভোগীরা কি মনস্তাত্ত্বিক রেফারেল বা সহায়তা প্রদানের বিষয়ে সন্তুষ্টি প্রকাশ করেছিলেন কি?

**End the interview by thanking respondent for his/her valuable time and responses.**

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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### Volunteer KII Guide

#### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার দিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনও আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে
- Give time to make the person comfortable and ask if he needs more time before starting the discussion ব্যক্তিকে সহজ করার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তাকে আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরণ অনুযায়ী প্রশ্ন করুন।

#### Introduction ভূমিকা/পরিচিতি

Salam/adab. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children to Rohingya communities in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about protective environment for women and children in your camp.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 45 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে

এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি।

বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৪৫ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

What do you think the most important protection concern are there among the women and children in your camp? [**Try to know separately for women and children**] আপনাদের ক্যাম্পে নারী

এবং শিশুদের সুরক্ষা/নিরাপত্তা বিষয়ে সবচেয়ে গুরুত্বপূর্ণ উদ্বেগ বা চিন্তার বিষয়টি কী বলে আপনি মনে করেন? [নারী এবং শিশুদের আলাদাভাবে জানার চেষ্টা করুন]

- Are they able to share their concerns to others? তারা কি তাদের উদ্বেগ/চিন্তার বিষয় অন্যকে জানাতে পারে/সক্ষম?
- How useful do you think the Woman Friendly Spaces (WFS) are in terms of creating protection related awareness and providing service to them? সুরক্ষা সম্পর্কিত সচেতনতা তৈরি এবং তাদের সেবা প্রদানের ক্ষেত্রে নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) কতটা কার্যকর বলে আপনি মনে করেন?
- How motivated did you find the women to become member of Woman Friendly Spaces (WFS)? নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর সদস্য হওয়ার জন্য আপনি কতটা অনুপ্রাণিত হয়েছিলেন/ নারীদের আপনি কতটা অনুপ্রাণিত দেখেছিলেন ?
- Was there any women did not wish to become a registered member of Woman Friendly Spaces (WFS)? Why were they not interested? কোনো নারী কি নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর নিবন্ধিত সদস্য হতে চাননি? কেন তারা আগ্রহী ছিল না?
- As far as you understand, what kind of services do you think the Woman Friendly Spaces (WFS) providing to the women and children? নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) নারী ও শিশুদের জন্য কী ধরনের সেবাগুলি সরবরাহ করছে বলে আপনি মনে করেন?
- Did you receive feedback from the children and women to understand their expectation or services required? Did you offer customized service to them based on their requirement? Can you please share some of the example? শিশুদের এবং নারীদের কাছ থেকে তাদের প্রত্যাশা (কি চাওয়া) বা যে সেবাগুলি দরকার সে সম্পর্কে কী প্রতিক্রিয়া/মতামত বুঝতে পেরেছিলেন? আপনি কি তাদের প্রয়োজনীয়তার ভিত্তিতে কাস্টমাইজড সেবা প্রদান করেছিলেন? অনুগ্রহ করে কিছু উদাহরণ দিবেন কী?
- Do they have difficulty accessing these services? If so, what difficulties do they have and why? তাদের এই সেবাগুলি পেতে কি কোনো সমস্যা হয়? যদি তা হয়, তবে তাদের কোন অসুবিধাগুলি আছে এবং কেন?
- What are their strong and weak points of Woman Friendly Spaces (WFS)? নারীবান্ধব কেন্দ্র /ওম্যান ফ্রেন্ডলি স্পেসেস (ডার্লুএফএস) এর শক্তিশালী এবং দুর্বল পয়েন্ট/দিকগুলি কী কী?  
On average, what age do girls get married in the camp at the moment? এই মুহূর্তে গড়পড়তা মেয়েদের কী বয়সে ক্যাম্পে বিয়ে হয়?
- Has this age changed since the implementation of the project? If so, how has it changed and why do you think this is? প্রকল্পটি বাস্তবায়নের পর থেকে এই বয়স কি পরিবর্তিত হয়েছে? যদি তা হয় তবে এটি কীভাবে পরিবর্তিত হয়েছে এবং আপনি কেন এটি মনে করেন?
- Do you think, child marriage is more likely to happen to some women than others? Why do you think this is? আপনি কি মনে করেন, বাল্য বিবাহ কোন নির্দিষ্ট নারীদের ক্ষেত্রে বেশি হওয়ার সম্ভাবনা থাকে আর কিছু নারীদের জন্য কম? আপনি কেন এটা ভাবছেন?

- Do you think this kind of situation has become more or less common since displacement? Why do you think this is? আপনার কি মনে হয় বাস্তুচ্যুতির/ বসতভিটা হারিয়ে আসার পর থেকে এই জাতীয় পরিস্থিতি কমবেশি সাধারণ হয়ে উঠেছে? আপনি কেন এটা ভাবছেন?

What are the most common types of gender based violence occurs in this camp? What is the reason behind this? Who are the most common victims for gender based violence? এই ক্যাম্পে লিঙ্গ ভিত্তিক সহিংসতার সবচেয়ে সাধারণ কী ধরনের ঘটনা ঘটে? এর পিছনে কারণ কী? লিঙ্গ ভিত্তিক সহিংসতার জন্য সবচেয়ে সাধারণ/ বেশী শিকার কারা?

- Do the women and/or children share the incident of gender based violence if occurred? Whom they share with? There are different types of gender based violence. What types of incidents are shared and what are not? What actions are taken when such incidents are occurred? যদি লিঙ্গ ভিত্তিক সহিংসতার ঘটনা ঘটে তাহলে নারী এবং / বা শিশুরা ঘটনাটি শেয়ার করে বা জানায় কি? তারা কাদের জানায় বা শেয়ার করে? লিঙ্গ ভিত্তিক সহিংসতার বিভিন্ন ধরণ রয়েছে কোন ধরণের ঘটনাসমূহ শেয়ার করে বা জানায় এবং কোনগুলি জানায় না? এ জাতীয় ঘটনাসমূহ ঘটলে কী ব্যবস্থা নেওয়া হয়?
- Do you think gender based violence has become less common after implementation of the project? Why do you think this is? প্রকল্পটি বাস্তবায়নের পরে লিঙ্গ ভিত্তিক সহিংসতা কম সাধারণ হয়ে উঠছে বলে মনে করেন কি? আপনি কেন এটা মনে করছেন?

Can you tell me the current situation of trafficking in the camp? I would like to know more about what happened or what happens when people want to leave the camps and move to other places. ক্যাম্পে মানব পাচারের বর্তমান পরিস্থিতি বলতে পারেন? লোকেরা যখন ক্যাম্প ছেড়ে অন্য জায়গায় চলে যেতে চায় তখন কী ঘটেছিল বা কী ঘটে সে সম্পর্কে আমি আরও জানতে চাই

- Who/what types of people tried to leave? What dangers or risks were people aware of when trying to leave? কে / কী ধরণের লোকেরা ক্যাম্প ছেড়ে যাওয়ার চেষ্টা করেছিল? যখন যাওয়ার চেষ্টা করছিল তখন কী কী বিপদ বা ঝুঁকি ছিল সে সম্পর্কে লোকেরা কি সচেতন/অবগত ছিল?
- Was anyone forced to leave? If so, by whom – can you tell us what it looked when someone was forced to leave? কেউ কি চলে যেতে বাধ্য হয়েছিল? যদি তা হয় তবে কারা দ্বারা -যখন কেউ চলে যেতে বাধ্য হয়েছিল তখন কি লাগছিল তা আমাদের বলতে পারেন?
- Do people still want to leave now? What are the reasons that people want to leave now? What ways are they trying to travel (boats? Road? Etc) লোকেরা কি এখনো চলে যেতে চায়? লোকেরা এখন কী কারণে চলে যেতে চায়? কী উপায়ে তারা চলে যেতে চেষ্টা করছে (নৌকা? রোড? ইত্যাদি)?

Do you have any feedback and recommendations to the future projects and programme improvement? ভবিষ্যতের প্রকল্পগুলি এবং প্রোগ্রামের উন্নতির বিষয়ে আপনার কি কোনো প্রতিক্রিয়া/মন্তব্য এবং সুপারিশ আছে? থাকলে অনুগ্রহ করে বলুন

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।



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### CiC KII Guide

#### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

#### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on protective environment for women and children among Rohingya communities in Cox's Bazar.

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আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় রোহিঙ্গা শরণার্থীদের মাঝে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?



- As a camp in-charge what are your responsibilities regarding protective environment for women and children related activities or program? Please tell the details. একজন ক্যাম্প ইনচার্জ হিসাবে আপনাকে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত কার্যক্রম বা প্রকল্পের ক্ষেত্রে আপনাকে কী কী দায়িত্ব পালন করতে হয়? দয়া করে বিস্তারিত বলুন।
- There are some projects on protection are being implemented in your camp, please tell us more about the project. আপনার ক্যাম্পে মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ প্রকল্প বাস্তবায়িত হচ্ছে, প্রকল্পটির ব্যাপারে দয়া করে বিস্তারিত বলুন।
- What were the common problems for the residents of this camp regarding protective environment for women and children? Please tell the details. আপনার জন্য মতে এই ক্যাম্পের অধিবাসীদের জন্য মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত সাধারণত কী কী সমস্যা ছিল? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes in the problems related to protective environment for women and children for the residents of this camp since the project was implemented? What changes have you noticed? Anything else? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই ক্যাম্পের অধিবাসীদের জন্য মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত সমস্যার ক্ষেত্রে কি কোনো পরিবর্তন আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? আর কিছু? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes in the behavior of the camp residents in relation to protective environment for women and children after implementing the program? What changes have you noticed? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই ক্যাম্পের অধিবাসীদের মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত ব্যবহার বা আচরণের ক্ষেত্রে কি কোনো পরিবর্তন আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? দয়া করে বিস্তারিত বলুন।

**Now I am asking some questions re-lated to the project implemented by AAR. এখন আমি এএআর দ্বারা বাস্তবায়িত প্রকল্প সম্পর্কিত কিছু প্রশ্ন জিজ্ঞাসা করছি**

### **(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- When the goals of the project was set for the project, did the NGO take your opinion? **(CHS\_6)** Was there a need assessment to understand the needs of the Rohingya community in this camp? How was the Need Assessment done? Do you think the project is consistently able to meet the needs of the Rohingya community as planned? If not, what should have been done instead? প্রকল্পের জন্য লক্ষ্য নির্ধারণ করার সময় এনজিওরা কি আপনার মতামত নিয়েছিলো? এই ক্যাম্পে রোহিঙ্গা কমিউনিটির চাহিদা বোঝার জন্য কি কোনো নিড অ্যাসেসমেন্ট করা হয়েছিল? নিড অ্যাসেসমেন্ট কীভাবে করা হয়েছিল? আপনার কি মনে হয় প্রকল্পের পরিকল্পনা অনুযায়ী প্রকল্পটি ধারাবাহিকভাবে রোহিঙ্গা কমিউনিটির প্রয়োজন মেটাতে পারছে? যদি না হয়, তাহলে এর পরিবর্তে কী করা উচিত ছিল?
- Do you think that the project was related to the needs of the Rohingya community? Why do you think so? What could have been done to design the project more relevant to the needs of the Rohingya community? আপনি কি মনে করেন যে প্রকল্পটি রোহিঙ্গা কমিউনিটির প্রয়োজনের কথা মাথায় রেখে করা হয়েছিল? আপনি কেন এমনটি মনে করছেন? প্রকল্পটি রোহিঙ্গা কমিউনিটির প্রয়োজন আরও ভালভাবে মেটানোর জন্য কী করা যেত?

**(CHS\_2) IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?** মানবিক সাড়া কার্যকর এবং সময়োপযোগী?

- What are the differences the project has made to individuals targeted and the wider community? How the project has addressed different needs of women of different age group? একটি প্রকল্প এলাকায় বিভিন্ন ধরনের লোক থাকে। প্রকল্পটি কিভাবে বিভিন্ন ব্যক্তি এবং বৃহত্তর সম্প্রদায়ের প্রয়োজন অনুযায়ী বাস্তবায়িত হচ্ছে? প্রকল্পটি কীভাবে বিভিন্ন বয়সের নারীদের বিভিন্ন প্রয়োজনকে সামনে রেখে বাস্তবায়িত হচ্ছে?

**(CHS\_5) ARE COMPLAINTS WELCOME AND ADDRESSED?** অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?

- To what extent were the complaints mechanisms understood, relevant, trusted and appropriate to the context? Can the beneficiaries submit complaints if required? উপকারভোগীদের কোন অভিযোগ থাকলে অভিযোগের প্রক্রিয়াগুলি কতটা সহজ, প্রাসঙ্গিক, বিশ্বাসযোগ্য এবং উপযুক্ত? প্রয়োজনে সুবিধাভোগীরা কি অভিযোগ জমা দিতে পারে?

**CHS\_6) IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?** মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Is there any other NGOs implementing similar project in your project area (camp)? How did the project coordinate and complement its interventions with others? আপনাদের প্রকল্প এলাকায় (ক্যাম্প) কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? প্রকল্পটি কীভাবে অন্য প্রকল্পের সাথে সমন্বয় হয়ে কাজ করছিল?

Do you have any feedback and recommendations to the future projects and programme improvement?  
ভবিষ্যতের প্রকল্পগুলি এবং প্রোগ্রামের উন্নতির বিষয়ে আপনার কি কোনো প্রতিক্রিয়া/মন্তব্য এবং সুপারিশ আছে? থাকলে অনুগ্রহ করে বলুন।

*End the interview by thanking respondent for his/her valuable time and responses.*

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

## Org-Quest Research Limited

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6 Panthapath, Dhaka-1215

Phone: 55013481-84

## Majhi KII Guide

### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
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- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

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প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

- Tell me about yourself. How do you spend your time in your daily routine? আপনার নিজের সম্পর্কে বলুন। আপনি প্রতিদিন কীভাবে সময় কাটান?

- You are a Majhi in this camp, please tell me which areas do you work as a Majhi? As a Majhi what exactly do you have to do in your work area? আপনি তো এই ক্যাম্পের একজন মাঝি, দয়া করে বলবেন একজন মাঝি হিসাবে আপনি কোন কোন এলাকার দায়িত্ব পালন করেন? একজন মাঝি হিসাবে আপনাকে আপনার কর্ম এলাকায় ঠিক কী কী দায়িত্ব পালন করতে হয়?
- Are you involved in any protective environment such as measures of prevention of human trafficking, domestic violence/intimate partner violence, child marriage for women and children project? If yes, how you are involved with this project or what is your role in the project? Please tell the details. আপনি কি মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ যেমন মানব পাচার রোধের ব্যবস্থা, পারিবারিক নির্যাতন / কাছের মানুষের কাছ হতে সহিংসতা কমানো, বাল্য বিবাহরোধ ইত্যাদি সম্পর্কিত প্রকল্পের সাথে জড়িত আছেন? যদি হ্যাঁ হয়, এই প্রকল্পের সাথে আপনি কিভাবে জড়িত আছেন বা প্রকল্পে আপনার ভূমিকা কি? দয়া করে বিস্তারিত বলুন।
- What were the common problems for the residents of this camp regarding protective environment for women and children? Please tell the details. এই ক্যাম্পের মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত সাধারণত কী কী সমস্যা ছিল? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes or improvement related to protective environment for women and children for the residents of this camp since the project was fully launched? What changes have you noticed? What changes have you noticed? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই ক্যাম্পের মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত সমস্যার ক্ষেত্রে কি কোনো পরিবর্তন বা উন্নতি আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes in the behavior of the camp residents in relation to protective environment for women and children since the project was fully launched? What changes have you noticed? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই ক্যাম্পের মহিলা এবং শিশুদের জন্য সুরক্ষামূলক পরিবেশ সম্পর্কিত ব্যবহার বা আচরণের ক্ষেত্রে কি কোনো পরিবর্তন আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? দয়া করে বিস্তারিত বলুন।

**Now I am asking some questions re-lated to the project implemented by AAR. এখন আমি এএআর দ্বারা বাস্তবায়িত প্রকল্প সম্পর্কিত কিছু প্রশ্ন জিজ্ঞাসা করছি**

### **(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

**মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?**

- When the goals of the project was set for the project, did the NGO take your opinion? (CHS\_6) Was there a need assessment to understand the needs of the Rohingya community in this camp? How was the Need Assessment done? Do you think the project is consistently able to meet the needs of the Rohingya community as planned? If not, what should have been done instead? প্রকল্পের জন্য লক্ষ্য নির্ধারণ করার সময় এনজিওরা কি আপনার মতামত নিয়েছিলো? এই ক্যাম্পে রোহিঙ্গা কমিউনিটির চাহিদা বোঝার জন্য কি কোনো নিড অ্যাসেসমেন্ট করা হয়েছিল? নিড অ্যাসেসমেন্ট কীভাবে করা হয়েছিল? আপনার কি মনে হয় প্রকল্পের পরিকল্পনা অনুযায়ী প্রকল্পটি ধারাবাহিকভাবে রোহিঙ্গা কমিউনিটির প্রয়োজন মেটাতে পারছে? যদি না হয়, তাহলে এর পরিবর্তে কী করা উচিত ছিল?
- Do you think that the project was related to the needs of the Rohingya community? Why do you think so? What could have been done to design the project more relevant to the needs of the Rohingya community? আপনি কি মনে করেন যে প্রকল্পটি রোহিঙ্গা কমিউনিটির প্রয়োজনের কথা মাথায় রেখে করা হয়েছিল? আপনি কেন এমনটি মনে করছেন? প্রকল্পটি রোহিঙ্গা কমিউনিটির প্রয়োজন আরও ভালভাবে মেটানোর জন্য কী করা যেত?

### **(CHS\_2) IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?**

**মানবিক সাড়া কার্যকর এবং সময়োপযোগী?**

- What are the differences the project has made to individuals targeted and the wider community? How the project has addressed different needs of women and people with disability? একটি প্রকল্প এলাকায় বিভিন্ন ধরনের লোক থাকে। প্রকল্পটি কিভাবে বিভিন্ন ব্যক্তি এবং বৃহত্তর সম্প্রদায়ের প্রয়োজন অনুযায়ী বাস্তবায়িত হচ্ছে? প্রকল্পটি কীভাবে নারী ও প্রতিবন্ধী মানুষের বিভিন্ন প্রয়োজনকে সামনে রেখে বাস্তবায়িত হচ্ছে?

**(CHS\_5)ARE COMPLAINTS WELCOME AND ADDRESSED?** অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?

- To what extent were the complaints mechanisms understood, relevant, trusted and appropriate to the context? Can the beneficiaries submit complaints if required? উপকারভোগীদের কোন অভিযোগ থাকলে অভিযোগের প্রক্রিয়াগুলি কতটা সহজ, প্রাসঙ্গিক, বিশ্বাসযোগ্য এবং উপযুক্ত? প্রয়োজনে সুবিধাভোগীরা কি অভিযোগ জমা দিতে পারে?
- Did the beneficiaries share any complaints on the project through you? If yes, please let me know in details? How the complaint was resolved? সুবিধাভোগীরা কি আপনার মাধ্যমে প্রকল্পের ব্যাপারে কোনও অভিযোগ করেছেন? যদি হ্যাঁ, দয়া করে আমাকে বিস্তারিত বলবেন কি? কীভাবে অভিযোগের সমাধান হয়েছিলো?

**CHS\_6)IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**  
মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Are any other NGOs implementing similar projects in your area of work? আপনার কর্ম এলাকায় কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে?

Do you have any feedback and recommendations to the future projects and programme improvement?  
ভবিষ্যতের প্রকল্পগুলি এবং প্রোগ্রামের উন্নতির বিষয়ে আপনার কি কোনো প্রতিক্রিয়া/মন্তব্য এবং সুপারিশ আছে? থাকলে অনুগ্রহ করে বলুন।

*End the interview by thanking respondent for his/her valuable time and responses.*

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

Questionnaire for Households in Host Community

**Org-Quest Research Limited**

DH Tower, Level-7 (Suit-701)

6 Panthapath, Dhaka-1215

Phone: 55013481-84

**Questionnaire for Households in Host Community**

<b>Project</b>	WASH Support for Host Community									
<b>Name of Interviewer</b>		<b>Code</b>		<b>Date of Interview</b>		<b>Sign.</b>				
<b>Check Details</b>	<b>Name of FC:</b>			<b>Name of FS:</b>			<b>Other Official:</b>			
	<b>Code</b>	<b>Sign</b>	<b>Date</b>	<b>Code</b>	<b>Sign</b>	<b>Date</b>	<b>Code</b>	<b>Sign</b>	<b>Date</b>	
<b>Accompany Call</b>	1			1			1			
<b>Back Check</b>	2			2			2			
<b>Spot Check</b>	3			3			3			
<b>Address Check</b>	4			4			4			
<b>Scrutiny</b>	5			5			5			
<b>Upazila উপজেলা</b>	Teknaf টেকনাফ									
<b>Name of Respondent উত্তরদাতার নাম</b>										
<b>Father's/Husband's Name উত্তরদাতার পিতা/স্বামীর নাম</b>										
<b>Union ইউনিয়ন</b>	Nhilla নীলা									
<b>Village গ্রাম</b>										
<b>Telephone টেলিফোন</b>				<b>Mobile মোবাইল</b>						
<b>GPRS</b>							<b>Interview Time</b>			
							<b>Start</b>		<b>End</b>	

Salam / Adaab, my name is \_\_\_\_\_. I have come from “Org-Quest Research Limited”, a social and market research firm headquartered in Dhaka. We conduct research on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox’s Bazar. All information provided by you will be treated as confidential and will be used for the purpose of research only. Please note that no remuneration or incentive will be provided for taking part in this survey.

সালাম/আদাব, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি সামাজিক ও বাজার গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি। আপনার দেয়া সমস্ত তথ্যের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার হবে। এই জরিপে অংশগ্রহণ করার জন্য আপনাকে কোনো পারিশ্রমিক (টাকা বা অন্য কোনো কিছু) দেওয়া হবে না।

**Selection of respondent using KISH table.**

**SO1. Is there anyone in the household who received information on Water, Sanitation, and Hygiene within the last 6 months?** আপনাদের পরিবারে কি এমন কেউ আছেন যিনি গত 6 মাসের মধ্যে পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সম্পর্কিত তথ্য পেয়েছেন?

<b>Yes</b> হ্যাঁ	1	Continue সাক্ষাৎকার চালিয়ে যান
<b>No</b> না	2	Terminate সাক্ষাৎকার বন্ধ করুন

**Please give serial number in descending order of age (minimum age 18 +) who have received information on Water, Sanitation and Hygiene within last 6 months.** পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সম্পর্কে গত 6 মাসের মধ্যে যারা তথ্য পেয়েছেন তাদের বড় থেকে ছোট ক্রমে (সর্বনিম্ন বয়স 18+) ক্রমিক নম্বর দিন।

Eligible Respondents / যোগ্য উত্তরদাতা	Age/বয়স	Take last digit of house serial number বাড়ির ক্রমিক নম্বরটির শেষ সংখ্যাটি দিন																		
		0	1	2	3	4	5	6	7	8	9									
1		1	1	1	1	1	1	1	1	1	1	1								
2		1	2	1	2	1	2	1	2	1	2	1	2							
3		3	1	2	3	1	2	3	1	2	3	1	2	3						
4		1	2	3	4	1	2	3	4	1	2	3	4	1	2					
5		4	5	1	2	3	4	5	1	2	3	4	5	1	2	3				
6		2	3	4	5	6	1	2	3	4	5	6	1	2	3	4	5			
7		1	2	3	4	5	6	7	1	2	3	4	5	6	7	1	2	3		
8		6	7	8	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	
9		5	6	7	8	9	1	2	3	4	5	6	7	8	9	1	2	3	4	5
10		1	2	3	4	5	6	7	8	9	1	2	3	4	5	6	7	8	9	10

Name of the selected respondent নির্বাচিত উত্তরদাতার নাম: \_\_\_\_\_

**Section 1: Demographic Profile** সেকশন ১: ডেমোগ্রাফিক প্রোফাইল

D.1. What is your age? আপনার বয়স কত?

\_\_\_\_\_ Years. বছর।

D.2. Gender of the respondent. (Code, Do Not Ask) উত্তরদাতার লিঙ্গ। (কোড করুন। জিজ্ঞাসা করবেন না)

Male পুরুষ	1
Female নারী	2
Other অন্যান্য	3

D.3. What are you doing now? (Do not read out options) (Single answer) বর্তমানে আপনি কী করেন? (উত্তর পড়ে শোনাবেন না) (একটি উত্তর দিন)

Farmer (own land) কৃষক (নিজের জমি চাষ করি)	1
Farmer (other's land) কৃষক (অন্যের জমি চাষ করি)	2
Skilled labor দক্ষ শ্রমিক	3
Unskilled labor অদক্ষ শ্রমিক	4
Business ব্যবসা	5
Govt. Job সরকারী চাকুরী	6
Non govt. Job বেসরকারী চাকুরী	7
Student ছাত্রী	8
Housewife গৃহিণী	9
Housemaid গৃহকর্মী	10
Housekeeper /বাড়িতে কাজ করি	11
Unemployed বেকার	12
Other (specify) অন্যান্য (উল্লেখ করুন)	

D.4. What is your marital status now: are you married; living with a partner, not married; widowed; divorced; or separated? [Single answer] আপনার বর্তমান বৈবাহিক অবস্থা কী: অবিবাহিত, বিবাহিত, বিধবা, তালাকপ্রাপ্ত বা আলাদা থাকেন? (একটি উত্তর)

Single অবিবাহিত	1
Married বিবাহিত	2
Divorced তালাকপ্রাপ্ত/তালাকপ্রাপ্তা	3
Widowed বিধবা/ বিপত্নীক	4
Separated আলাদা থাকি	5

D5. Does your household have any children under 5? আপনার পরিবারের কি ৫ বছরের কম বয়সী শিশু রয়েছে?

Yes হ্যাঁ	1	Continue সাক্ষাৎকার চালিয়ে যান
No না	2	Go to L1 L1 এ যান

D6. Are you the primary caregiver of children under five years old living in your household? আপনার পরিবারের বাচ্চা, যার বয়স ৫ বছরের নিচে, মূলত আপনি নিজেই কি তার যত্ন নেন?

Yes হ্যাঁ	1
No না	2



## Section 2: Disability questionnaire সেকশন 2: শারীরিক প্রতিবন্ধকতা নিয়ে প্রশ্নপত্র

L1. Do you have difficulty seeing, even if wearing glasses? আপনার কি চোখে দেখতে কোন অসুবিধা হয়, এমনকি চশমা পরলেও?

No – no difficulty/না - কোন অসুবিধা নেই	1
Yes – some difficulty/হ্যাঁ - কিছু অসুবিধা হয়	2
Yes – a lot of difficulty/হ্যাঁ - অনেক অসুবিধা হয়	3
Cannot see at all/একদমই দেখতে পারি না	4
Prefer not to say/বলতে চাই না	5

L2. Do you have difficulty hearing, even if using a hearing aid? আপনার কি কানে শুনতে কোন অসুবিধা হয়, এমনকি কানে শোনার যন্ত্র ব্যবহারের পরেও?

No – no difficulty না - কোন অসুবিধা নেই	1
Yes – some difficulty/হ্যাঁ - কিছু অসুবিধা হয়	2
Yes – a lot of difficulty/হ্যাঁ - অনেক অসুবিধা হয়	3
Cannot hear at all/একদমই শুনতে পারি না	4
Prefer not to say/বলতে চাই না	5

L3. Do you have difficulty walking or climbing steps? আপনার কি হাটা চলার সময় বা সিঁড়িতে উঠতে কোন অসুবিধা হয়?

No – no difficulty / না - কোন অসুবিধা নেই	1
Yes – some difficulty/হ্যাঁ - কিছু অসুবিধা হয়	2
Yes – a lot of difficulty/হ্যাঁ - অনেক অসুবিধা হয়	3
Cannot walk or climb steps at all/ একদমই হাটতে বা উঁচুতে উঠতে পারি না	4
Prefer not to say/বলতে চাই না	5

L4. Do you have difficulty remembering or concentrating? আপনার কি কোন কিছু মনে রাখতে বা মনোযোগ দিতে কোন অসুবিধা হয়?

No – no difficulty/ না - কোন অসুবিধা নেই	1
Yes – some difficulty/হ্যাঁ - কিছু অসুবিধা হয়	2
Yes – a lot of difficulty/হ্যাঁ - অনেক অসুবিধা হয়	3
Cannot remember or concentrate at all/ একদমই মনে রাখতে বা মনোযোগ দিতে পারি না	4
Prefer not to say/বলতে চাই না	5

L5. Do you have difficulty with self-care such as washing all over or dressing? আপনার কি নিজের যত্ন নিতে, যেমন গোসল করতে বা পোশাক পড়তে অসুবিধা হয়?

No – no difficulty/ না - কোন অসুবিধা নেই	1
Yes – some difficulty/হ্যাঁ - কিছু অসুবিধা হয়	2
Yes – a lot of difficulty/হ্যাঁ - অনেক অসুবিধা হয়	3
Cannot wash or get dressed at all/ একদমই পরিষ্কার করতে বা পোশাক পড়তে পারি না	4
Prefer not to say/বলতে চাই না	5

L6. Using your usual language, do you have difficulty communicating, (for example understanding or being understood by others)?/ আপনার কি সাধারণ ভাষায় কারও সাথে আলাপ করতে, (যেমন, কারও কথা বুঝতে বা অন্যকে বোঝাতে) কোন অসুবিধা হয়?

No – no difficulty/ না - কোন অসুবিধা নেই	1
Yes – some difficulty/হ্যাঁ - কিছু অসুবিধা হয়	2
Yes – a lot of difficulty/হ্যাঁ - অনেক অসুবিধা হয়	3
Cannot do it at all/ একদমই যোগাযোগ করতে পারি না	4
Prefer not to say/বলতে চাই না	5

### Section 3: Main questionnaire সেকশন 3: মূল প্রশ্নপত্র

“I would like to ask you some questions about the toilet facilities that you use...” আপনি যেই ল্যাট্রিনটি ব্যবহার করেন তার সম্পর্কে আমি আপনাকে কিছু প্রশ্ন করতে চাই...

Q1. Thinking about the latrine you use most often, what type of latrine is it? [Single answer]  
আপনি যে ল্যাট্রিনটি বেশির ভাগ সময় ব্যবহার করেন তার ধরন কী? (একটি উত্তর)

Pit latrine পিট ল্যাট্রিন	01
Open defecation/bush/field/ খোলা জায়গা/ ঝোপঝাড় /মাঠে উন্মুক্ত মলত্যাগ	02
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q2. What is the current condition of the latrine? [Read out the options] [Single answer] ল্যাট্রিনটির বর্তমান অবস্থা কি? ( উত্তর অপশনগুলি পড়ে শোনান) (একটি উত্তর)

The latrine has been constructed within last one year ল্যাট্রিনটি গত ১ বছরের মধ্যে নির্মাণ করা হয়েছে	01
The latrine has been repaired within last one year ল্যাট্রিনটি গত ১ বছরের মধ্যে মেরামত করা হয়েছে	02
Latrine is broken due to normal use, but functional ল্যাট্রিন স্বাভাবিক ব্যবহারের কারণে ভেঙে গেছে তবে ব্যবহার উপযোগী	03
Latrine is broken due to normal use, and not functional ল্যাট্রিন স্বাভাবিক ব্যবহারের কারণে ভেঙে গেছে এবং ব্যবহার উপযোগী নয়	04
Damage by cyclone/storm, but functional ঘূর্ণিঝড়/ঝড়ে ক্ষতিগ্রস্ত হয়েছে তবে ব্যবহার উপযোগী	05
Damage by cyclone/storm, and not functional ঘূর্ণিঝড়/ঝড়ে ক্ষতিগ্রস্ত হয়েছে এবং ব্যবহার উপযোগী নয়	06
Pit is almost full, but functional পিট প্রায় পূর্ণ হয়ে গেছে তবে ব্যবহার উপযোগী	07
Pit is full and not functional পিট পূর্ণ হয়ে গেছে এবং ব্যবহার উপযোগী নয়	08
Other (pleasespecify) অন্যান্য (উল্লেখ করুন)	

Q3. On whose land is the latrine which you use most often? [Single answer] আপনি যেই ল্যাট্রিনটি বেশিরভাগ/অধিকাংশ সময় ব্যবহার করেন সেটা কার জমির উপর অবস্থিত? (একটি উত্তর)

On own plot, owned or rented নিজের বাড়ি, নিজ মালিকানা অথবা ভাড়া নেয়া	1
On neighbour's plot প্রতিবেশির জমির উপর	2
Communal area সমাজের জায়গার উপর	3
Don't know জানি না	4
Government khash land সরকারী খাস জমির উপর	5
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q4. When you or your family members are at home and need to defecate, how often do you use the latrine? [Single answer] বাসায় থাকাকালীন সময়ে টয়লেট চাপলে/মলত্যাগের প্রয়োজন হলে আপনি বা আপনার পরিবারের সদস্যরা কত ঘন ঘন ল্যাট্রিনটি ব্যবহার করেন? (একটি উত্তর)

Always সবসময়	1	Go to Q6
Most of the time বেশিরভাগ সময়	2	Continue সাক্ষাৎকার চালিয়ে যান
Rarely খুব কম	3	
Not at all একদমই না	4	
Don't know জানি না	9	

Q5. When are you or your family members unable to use (defecate in) your main latrine? [Multiple answer] কখন আপনি বা আপনার পরিবারের সদস্যরা আপনাদের মূল ল্যাট্রিন ব্যবহার (পায়খানা করার জন্য) করতে পারেন না? (একাধিক উত্তর)

Cultural reasons (men and women can't use the same latrine) সামাজিক বিধি-নিষেধের কারণে (নারী পুরুষ একই ল্যাট্রিন ব্যবহার করতে পারে না)	1
Social conflict সামাজিক সংঘাতের কারণে	2
Not safe to go outside to the latrine at night/after dark রাতের বেলা/অন্ধকার নামার পর ব্যবহারের জন্য ঘরের বাহিরে অবস্থিত ল্যাট্রিনটি নিরাপদ নয়	3
When other members of the family are around যখন পরিবারের অন্য সদস্যরা আশেপাশে থাকে	4
When other people are using it যখন অন্য লোকেরা ব্যবহার করে	5
When at work/out working কাজের জন্য ঘরের বাহিরে থাকার সময়	6
During the rainy season বর্ষাকালে	7
During heavy rainfall প্রবল বৃষ্টির সময়	8
When surge tide occurs জলোচ্ছ্বাসের সময়	9
When sick অসুস্থতার সময়	10
When pit is full পিট ভরে গেলে	11
When latrine is clogged ল্যাট্রিনে ময়লা আটকে গেলে	12
I / they don't want it to fill up too quickly আমি চাই না/তারা চায় না ব্যবহারের কারণে ল্যাট্রিনের পিট খুব দ্রুত ভরে যাক	13
Not able to use the latrine (disability/too old/sick/pregnant) প্রতিবন্ধী/খুব বেশি বয়স্ক/অসুস্থ/গর্ভবতী মহিলারা ব্যবহার করতে পারে না	14
Latrine unpleasant (bad smell/too dark/ lack of privacy) ল্যাট্রিন ব্যবহার করা অস্বস্তিকর (বাজে গন্ধ/ অনেক অন্ধকার/ গোপনীয়তার অভাব)	15
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q6. Is the latrine disludged regularly? ল্যাট্রিন এর ময়লা কি নিয়মিত অপসারণ করা হয়?

Yes হ্যাঁ	1
No না	2
Don't know/ No answer জানি না/উত্তর নেই	3

Q7. How do you wash your hand after defecation? [Multiple answer] মলত্যাগের পরে আপনি কীভাবে হাত ধুয়ে থাকেন? (একাধিক উত্তর হতে পারে)

Hand washing facility inside the latrine ল্যাট্রিনের ভিতরে হাত ধোয়ার সুবিধা/ব্যবস্থা আছে	1
Hand washing facility outside the latrine ল্যাট্রিনের বাহিরে হাত ধোয়ার সুবিধা/ব্যবস্থা আছে	2
Community hand washing facility স্থানীয় মানুষের হাত ধোয়ার জন্য যে ব্যবস্থা নির্মাণ করা হয়েছে	3
After returning home বাড়িতে ফেরার পর	4
Do not wash hand after defecation মলত্যাগের পরে হাত ধুই না	5
Other (please specify) অন্যান্য (উল্লেখ করুন)	

“Now I would like to ask you some questions about taking your opinion regarding the toilet facilities that you use...” আপনি যেই ল্যাট্রিনটি ব্যবহার করেন সেটার ব্যাপারে আপনার মতামত নেয়া সম্পর্কে আমি আপনাকে কিছু প্রশ্ন করতে চাই...

Q8. Do you feel safe using the latrine? যে টয়লেট/পায়খানা ব্যবহার করেন সেটা ব্যবহার করতে আপনি কি নিরাপদ বোধ করেন?

Yes হ্যাঁ	1
No না	2
Don't know/ No answer জানি না/উত্তর নেই	3

Q9. Do you feel you have privacy when you use latrine? টয়লেট/পায়খানা ব্যবহার করার সময় আপনার কি মনে হয় যে আপনার গোপনীয়তা বজায় থাকে?

Yes হ্যাঁ	1
No না	2
Don't know/ No answer জানি না/উত্তর নেই	3

Q10. How much do you agree or disagree that the latrine in your community has improved in the last one year? আপনাদের এলাকায়/সমাজে টয়লেট/পায়খানা ব্যবহার করার সুবিধা গত ১ বছরে উন্নত হয়েছে আমার বলা এই কথাটির সাথে আপনি কতটা একমত বা দ্বিমত?

Completely agree সম্পূর্ণ একমত	5
Agree একমত	4
Neither agree, nor disagree একমতও না আবার দ্বিমতও না	3
Disagree দ্বিমত	2
Completely disagree সম্পূর্ণ দ্বিমত	1

Q11. How much satisfied are you with the current latrine in your community? আপনাদের এলাকায়/সমাজে বর্তমানে টয়লেট/পায়খানা ব্যবহার করার ব্যবস্থা নিয়ে আপনি কতটুকু সন্তুষ্ট?

Completely satisfied পুরোপুরি সন্তুষ্ট	5
Satisfied সন্তুষ্ট	4
Neither satisfied, nor dissatisfied সন্তুষ্টও না আবার অসন্তুষ্টও না	3
Dissatisfied অসন্তুষ্ট	2
Completely dissatisfied পুরোপুরি অসন্তুষ্ট	1

“Let’s talk about the bathing facilities that you use...” আপনি যে গোসলখানা ব্যবহার করেন সেটা নিয়ে কিছু আলোচনা করি...

Q12. Where do you usually take a bath? আপনারা সাধারণত কোথায় গোসল করে থাকেন?

Bathing cubicle constructed by NGOs এনজিওদের নির্মিত গোসলখানা	1
Space near the Handpump টিউবওয়েল এর পাশে বা কলপাড়	2
A bathing cubicle at the household বাড়ির ভিতরে গোসলখানা	3
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q13. What is the current condition of the bathing space? [Single answer] গোসলখানাটির বর্তমান অবস্থা কি? (একটি উত্তর)

The bathing space has been constructed within last one year গোসলখানাটি গত ১ বছরের মধ্যে নির্মাণ করা হয়েছে	01
The bathing space has been repaired within last one year গোসলখানাটি গত ১ বছরের মধ্যে মেরামত করা হয়েছে	02
Bathing space is broken due to normal use, but functional গোসলখানাটি স্বাভাবিক ব্যবহারের কারণে ভেঙে গেছে তবে ব্যবহার উপযোগী	03
Bathing space is broken due to normal use, and not functional গোসলখানাটি স্বাভাবিক ব্যবহারের কারণে ভেঙে গেছে এবং ব্যবহার উপযোগী নয়	04
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q14. Do you feel you have privacy when you use bathing facilities? আপনি যখন গোসলখানা ব্যবহার করেন তখন কি মনে হয় আপনার গোপনীয়তা বজায় আছে?

Yes হ্যাঁ	1
No না	2
Don’t know/ No answer জানি না/উত্তর নেই	3

Q15. How much do you agree or disagree that the bathing cubicle in your community has improved in the last one year? আপনাদের এলাকায়/সমাজে গোসলখানা ব্যবহার করার সুবিধা গত ১ বছরে উন্নত হয়েছে আমার বলা এই কথাটির সাথে আপনি কতটা একমত বা দ্বিমত?

Completely agree সম্পূর্ণ একমত	5
Agree একমত	4
Neither agree, nor disagree একমতও না আবার দ্বিমতও না	3
Disagree দ্বিমত	2
Completely disagree সম্পূর্ণ দ্বিমত	1

Q16. How much satisfied are you with the current bathing cubicle in your community? আপনাদের এলাকায়/সমাজে বর্তমানে গোসলখানা ব্যবহার করার সুবিধা নিয়ে আপনি কতটুকু সন্তুষ্ট?

Completely satisfied পুরোপুরি সন্তুষ্ট	5
Satisfied সন্তুষ্ট	4
Neither satisfied, nor dissatisfied সন্তুষ্টও না আবার অসন্তুষ্টও না	3
Dissatisfied অসন্তুষ্ট	2
Completely dissatisfied পুরোপুরি অসন্তুষ্ট	1

Q17. Have you heard the word Covid or corona virus? আপনি কোভিড বা করোনাভাইরাস শব্দটি শুনেছেন?

Yes হ্যাঁ	1	Continue চালিয়ে যান
No না	2	End the interview ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন

Q18. What hygiene practices are you following during the current situation of corona? [Multiple answer] করোনার বর্তমান পরিস্থিতিতে আপনি কি কি স্বাস্থ্যবিধি অনুসরণ করছেন? (একটি উত্তর)

Washing hands with soap or soap substitute for 20 seconds frequently ঘন ঘন 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	01
Cover coughs or sneeze properly with elbow হাচি বা কাশি দেবার সময় কুণুই দিয়ে মুখ ঢেকে রাখা	02
Washing hands with soap or soap substitute for 20 seconds after attending a patient রোগীর সেবা যত্নের পর 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	03
Washing hands with soap or soap substitute for 20 seconds after taking care of poultry and cattle পশু পাখির যত্নের পর 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	04
Stay at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing) লক্ষণ দেখা দিলে বাড়িতে থাকা (শুকনা কাশি, জ্বর, ক্লান্তি ভাব, শ্বাসকষ্ট)	05
Refrain from gathering অনেক মানুষের একসাথে জড় হওয়া থেকে বিরত থাকা	06
Wear mask মাস্ক পরিধান করা	07
Minimize physical contact শারীরিক স্পর্শ এড়িয়ে চলা	08
Avoid touch face with unsensitized hands ময়লা হাত দিয়ে মুখমণ্ডল স্পর্শ করা থেকে বিরত থাকা	09
Others, please specify অন্যান্য, উল্লেখ করুন	10

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

Questionnaire for Schools in Host Community

**Org-Quest Research Limited**

DH Tower, Level-7 (Suit-701)

6 Panthapath, Dhaka-1215

Phone: 55013481-84

**Questionnaire for Schools in Host Community**

<b>Project</b>	WASH Support for Host Community									
<b>Name of Interviewer</b>		<b>Code</b>		<b>Date of Interview</b>		<b>Sign.</b>				
<b>Check Details</b>	<b>Name of FC:</b>			<b>Name of FS:</b>			<b>Other Official:</b>			
	<b>Code</b>	<b>Sign</b>	<b>Date</b>	<b>Code</b>	<b>Sign</b>	<b>Date</b>	<b>Code</b>	<b>Sign</b>	<b>Date</b>	
<b>Accompany Call</b>	1			1			1			
<b>Back Check</b>	2			2			2			
<b>Spot Check</b>	3			3			3			
<b>Address Check</b>	4			4			4			
<b>Scrutiny</b>	5			5			5			
<b>Upazila উপজেলা</b>	Teknaf টেকনাফ									
<b>Name of Respondent উত্তরদাতার নাম</b>										
<b>Father's/Husband's Name উত্তরদাতার পিতা/স্বামীর নাম</b>										
<b>Union ইউনিয়ন</b>	Nhillia নীলা									
<b>Village গ্রাম</b>										
<b>Telephone টেলিফোন</b>				<b>Mobile মোবাইল</b>						
<b>GPRS</b>							<b>Interview Time</b>			
							<b>Start</b>		<b>End</b>	

Salam / Adaab, my name is \_\_\_\_\_. I have come from “Org-Quest Research Limited”, a social and market research firm headquartered in Dhaka. We conduct research on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox’s Bazar. All information provided by you will be treated as confidential and will be used for the purpose of research only. Please note that no remuneration or incentive will be provided for taking part in this survey.

সালাম/আদাব, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি সামাজিক ও বাজার গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং স্বাস্থ্যবিধির (হাইজিন) সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি। তোমার দেওয়া সমস্ত তথ্যের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে। এই জরিপে অংশগ্রহণ করার জন্য তোমাকে কোনো পারিশ্রমিক (টাকা বা অন্য কোনো কিছু) দেওয়া হবে না।



## Section 1: Demographic Profile সেকশন ১: ডেমোগ্রাফিক প্রোফাইল

D.1. What is your age? তোমার বয়স কত?

\_\_\_\_\_ Years. বছর।

D.2. Gender of the respondent. (Code, Do Not Ask) উত্তরদাতার লিঙ্গ। (কোড করুন। জিজ্ঞাসা করবেন না)

Male পুরুষ	1
Female নারী	2
Other অন্যান্য	3

D.3. Are you a student? তুমি কি ছাত্র বা ছাত্রী??

Yes হ্যাঁ	1	Continue সাক্ষাৎকার চালিয়ে যান
No না	2	Terminate সাক্ষাৎকার বন্ধ করুন

D4. What is the name of your school/madrassa? [If the students have changed their school/madrassa in January 2021, record the name of the previous school/madrassa] (Single answer) তোমার স্কুল বা মাদ্রাসার নাম কি? [শিক্ষার্থীরা যদি ২০২১ সালের জানুয়ারিতে স্কুল / মাদ্রাসা পরিবর্তন করে থাকে তবে আগের বিদ্যালয়ের / মাদ্রাসার নামটি রেকর্ড করুন] [একটি উত্তর]

Sufia Govt. Primary School সুফিয়া সরকার প্রাথমিক বিদ্যালয়	1
Rongikhali Khadijatul Kobra Mohila Dakhil Madrasa রঙ্গীখালী খাদিজাতুল কোবরা মহিলা দাখিল মাদ্রাসা	2
Madrassa Ibne Abbas Al-Islamia মাদ্রাসা ইবনে আব্বাস আল ইসলামিয়া	3
Al-Jamiatul Islamia Darussunna Madrasa আল জামিয়াতুল ইসলামিয়া দারুসুন্না মাদ্রাসা	4
Other (please specify) অন্যান্য (উল্লেখ করুন)	

D5. What grade are you in? (Single answer)/ তুমি কোন শ্রেণীতে পড়? [একটি উত্তর]

Primary/ Ibtedai Level (Class 1 -5) প্রাথমিক/ ইবতেদায়ী পর্যায়ে (প্রথম থেকে পঞ্চম শ্রেণী পর্যন্ত)	1
Secondary/ Dhakhil Level (Class 6-10) মাধ্যমিক/দাখিল পর্যায়ে (ষষ্ঠ থেকে দশম শ্রেণী পর্যন্ত)	2
Other/ অন্যান্য	9

## Section 2: Main questionnaire সেকশন 2: মূল প্রশ্নপত্র

Q1. What do you learn about health at School/madrasha? (Multiple answer possible) **[Probe but do not prompt]** তুমি স্কুলে/মাদ্রাসায় স্বাস্থ্য সম্পর্কে কী কী শিখেছো? [প্রব করুন, কিন্তু প্রস্পট করবেন না] [একাধিক উত্তর হতে পারে]

Nutrition পুষ্টি	1
Sexual and reproductive health rights যৌন এবং প্রজনন স্বাস্থ্য সম্পর্কিত অধিকার	2
Puberty বয়: সন্ধি	3
HIV/AIDS এইচআইভি / এইডস	4
Good touch-bad touch ভালো স্পর্শ-খারাপ স্পর্শ	5
Child marriage বাল্য বিবাহ	6
Early pregnancy অকাল গর্ভধারণ	7
Child care শিশুর যত্ন	8
Drugs মাদক সেবনের কুফল	9
Tobacco. ধূমপানের কুফল	10
Menstrual hygiene মাসিক/ঋতুস্রাব সংক্রান্ত স্বাস্থ্যবিধি	11
Regular hand wash নিয়মিত হাত ধোয়া	12
Use of clean water পরিষ্কার পানি ব্যবহার করা	13
Use of soap সাবান ব্যবহার করা	14
Self-care (cleanliness) নিজের যত্ন (ব্যক্তিগত পরিচ্ছন্নতা)	15
Use of sanitary latrine স্যানিটারি ল্যাট্রিন ব্যবহার	16
Regular physical exercise নিয়মিত শরীরচর্চা	17
Other (please specify) অন্যান্য (উল্লেখ করুন)	
Cannot remember মনে করতে পারছি না	99

Q2. Have you participated in any hygiene awareness activities in last one year? তুমি কি গত ১ বছরে কোনো স্বাস্থ্য সচেতনতা কার্যক্রমে অংশগ্রহণ করেছো?

Yes হ্যাঁ	1	Continue সাক্ষাৎকার চালিয়ে যান	
No না	2	Terminate সাক্ষাৎকার বন্ধ করুন	

Q3. What did you learn from the hygiene awareness activities? (Multiple answer possible) স্বাস্থ্য সচেতনতা কার্যক্রম থেকে তুমি কী কী শিখেছো? [একাধিক উত্তর হতে পারে]

Food hygiene খাদ্য সম্পর্কিত স্বাস্থ্যবিধি বা পরিষ্কার-পরিচ্ছন্নতা	1
Personal hygiene ব্যক্তিগত স্বাস্থ্যবিধি বা পরিষ্কার -পরিচ্ছন্নতা	2
Environmental health পরিবেশগত স্বাস্থ্য	3
Hand-washing হাত ধোয়া	4
COVID-19 and Hand-washing (কোভিড ১৯ ও হাত ধোয়া)	6
Water Hygiene and acute Watery Diarrhea (AWD) পানি ব্যবহারে স্বাস্থ্যবিধি এবং পানি বাহিত তীব্র ডায়রিয়া (এডারুডি)	7
Sanitation Hygiene and Environmental Hygiene ল্যাট্রিন সম্পর্কিত পরিচ্ছন্নতা এবং পরিবেশগত স্বাস্থ্যবিধি	8
Menstrual Hygiene Management (MHM) মাসিক সম্পর্কিত পরিচ্ছন্নতা (এমএইচএম)	9
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q4. Do you have access to a latrine at School/madrasha? তুমি কি স্কুলে/মাদ্রাসায় ল্যাট্রিন ব্যবহার করতে পারো?

Yes হ্যাঁ	1	Continue সাক্ষাৎকার চালিয়ে যান
No না	2	Go to Q12 Q12 তে যান

Q5. When you are at school/madrasha and need to defecate, how often do you use the latrine? (Single answer)-স্কুলে/মাদ্রাসায় থাকাকালীন সময়ে টয়লেট চাপলে/মলত্যাগের প্রয়োজন হলে, তুমি কত ঘন ঘন ল্যাট্রিন ব্যবহার করো? [একটি উত্তর]

Always সবসময়	1	Continue সাক্ষাৎকার চালিয়ে যান
Most of the time বেশিরভাগ সময়	2	
Rarely খুব কম	3	
Not at all একদমই না	4	Go to Q12 Q12 তে যান
Don't know/ জানি না	9	

Q6. Thinking about the latrine you use at School/madrasha, what type of latrine is it? (Single answer) তুমি স্কুলে/মাদ্রাসায় যে ল্যাট্রিনটি ব্যবহার করো তার ধরন কী? [একটি উত্তর]

Pit latrine পিট ল্যাট্রিন	01
Open defecation/bush/field/ খোলা জায়গা/ বোপঝাড় /মাঠে উন্মুক্ত মলত্যাগ	02
Other (please note)/ অন্যান্য (উল্লেখ করুন)	

Q7. What is the current condition of the latrine? [Read out the options] (Single answer) ল্যাট্রিনটির বর্তমান অবস্থা কি? ( উত্তর অপশনগুলি পড়ে শোনান) [একটি উত্তর]

The latrine has been constructed within last one year ল্যাট্রিনটি গত ১ বছরের মধ্যে নির্মাণ করা হয়েছে	01	Go to Q9 Q9 তে যান
The latrine has been repaired within last one year ল্যাট্রিনটি গত ১ বছরের মধ্যে মেরামত করা হয়েছে	02	
Pit is almost full, but functional পিট প্রায় পূর্ণ, তবে ব্যবহার উপযোগী	03	
Pit is full and not functional পিট পূর্ণ এবং ব্যবহার উপযোগী নয়	04	
Latrine is broken due to normal use, but functional ল্যাট্রিন স্বাভাবিক ব্যবহারের কারণে ভেঙে গেছে, তবে ব্যবহার উপযোগী	05	Continue সাক্ষাৎকার চালিয়ে যান
Latrine is broken due to normal use, and not functional ল্যাট্রিন স্বাভাবিক ব্যবহারের কারণে ভেঙে গেছে এবং ব্যবহার উপযোগী নয়	06	
Damage by cyclone/storm, but functional ঘূর্ণিঝড়/ঝড়ে ক্ষতিগ্রস্ত হয়েছে, কিন্তু ব্যবহার উপযোগী	07	
Damage by cyclone/storm, and not functional ঘূর্ণিঝড়/ঝড়ে ক্ষতিগ্রস্ত হয়েছে এবং ব্যবহার উপযোগী নয়	08	
Other (please note) অন্যান্য (উল্লেখ করুন)		Continue সাক্ষাৎকার চালিয়ে যান

Q8. What type of damage or problems are there in the latrine at your School/madrasha? (Multiple answer possible) স্কুলে/মাদ্রাসার ল্যাট্রিনে কী ধরনের ক্ষয়ক্ষতি বা সমস্যা আছে? [একাধিক উত্তর হতে পারে]

Faulty flashing pipes ত্রুটিযুক্ত ফ্ল্যাশিং পাইপ	01	
Broken doors ভাঙা দরজা	02	
Doors without lock দরজায় ছিটকিনি নাই/দরজা লাগানোর ব্যবস্থা নাই	03	
Other (pleasespecify) অন্যান্য (উল্লেখ করুন)		

Q9. Is the latrine disludged regularly? ল্যাট্রিন এর ময়লা কি নিয়মিত অপসারণ করা হয়?

Yes হ্যাঁ	1
No না	2
Don't know/ No answer জানি না/উত্তর নেই	3

Q10. How do you wash your hand after defecation at your School/madrasha? (Multiple answer possible) স্কুলে/মাদ্রাসায় মলত্যাগের পরে তুমি কীভাবে হাত ধুয়ে থাকো? [একাধিক উত্তর হতে পারে]

Hand washing facility inside the latrine ল্যাট্রিনের ভিতরে হাত ধোয়ার সুবিধা/ব্যবস্থা আছে	1
Hand washing facility outside the latrine ল্যাট্রিনের বাইরে হাত ধোয়ার সুবিধা/ব্যবস্থা আছে	2
Community hand washing facility স্থানীয় মানুষের হাত ধোয়ার জন্য যে ব্যবস্থা নির্মাণ করা হয়েছে	3
After returning home বাড়িতে ফেরার পর	4

Do not wash hand after defecation মলত্যাগের পরে হাত ধুই না	5
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q11. Do you wear slipper during the use of toilet? (Single answer) টয়লেট/ল্যাট্রিন ব্যবহার করার সময় তুমি কি স্যান্ডেল/চটি পায়ের দিয়ে থাকো? [একটি উত্তর]

Always সবসময়	1
Most of the time বেশিরভাগ সময়	2
Rarely খুব কম	3
Not at all একদমই না	4
Don't know/ জানি না	9

Q12. At what times in the day do you wash your hands? সাধারণত তুমি দিনের কোন কোন সময়ে হাত ধুয়ে থাকো?

Q12.1 What hand do you wash at each of the times you've mentioned? (Single answer for each) তুমি কোন হাতটি কখন ধুয়ে থাকো, যেই সময়গুলোতে তুমি হাত ধোয়ার কথা বলেছো? [Do not read the options পড়ে শোনাবেন না]

	Q12	Q12.1		
		Left hand বাম হাত	Right hand ডান হাত	Both hands দুই হাত
Before eating/ before meals খাওয়ার আগে	1	1	2	3
Before breakfast সকালের নাস্তার আগে	2	1	2	3
Before lunch দুপুরের খাবারের আগে	3	1	2	3
Before dinner রাতের খাবারের আগে	4	1	2	3
Before touching food কোনো খাবার ধরার আগে	5	1	2	3
After defecating পায়খানা থেকে আসার পরে	6	1	2	3
After touching food খাবার ধরার পরে	7	1	2	3
After cooking রান্না শেষ করার পরে	8	1	2	3
After eating খাবার পরে	9	1	2	3
After feeding the cattle গবাদি পশুকে খাওয়ানোর পরে	10	1	2	3
After returning from field মাঠ থেকে ফিরে আসার পরে	11	1	2	3
After work কাজের পরে	12	1	2	3
After play খেলার পরে	13	1	2	3
After cleaning the house ঘর পরিষ্কার করার পরে	14	1	2	3
After sweeping ঘর ঝাড়ু দেওয়ার পরে	15	1	2	3
Other (please specify) অন্যান্য (উল্লেখ করুন)				

13.1 What do you use to wash your hands when you are at home? (Multiple answer possible) বাড়িতে থাকার সময় হাত ধোয়ার জন্য তুমি কী ব্যবহার করো? [একাধিক উত্তর হতে পারে]

13.2 What do you use to wash your hands when you are at school? (Multiple answer possible) স্কুলে থাকার সময় হাত ধোয়ার জন্য তুমি কী ব্যবহার করো? [একাধিক উত্তর হতে পারে]

	13.1 At home বাড়িতে	13.2 At school স্কুলে
Water and bar soap পানি ও বার সাবান/সাবানের টুকরা	1	1
Water and soapy water পানি ও সাবান পানি	2	2
Water and liquid soap পানি ও তরল সাবান	3	3
Water and powder detergent পানি ও ডিটারজেন্ট পাউডার	4	4
Water and ash পানি ও ছাই	5	5
Water and sand পানি ও বালি	6	6
Water only শুধু পানি	7	7
Other (pleasespecify) অন্যান্য (উল্লেখ করুন)		

Q14.1 What type of hand washing facility is it when you wash hands at home? (Multiple answer possible) তোমাদের বাড়িতে কী ধরনের হাত ধোয়ার সুবিধা বা ব্যবস্থা আছে, অথবা বাড়িতে থাকার সময় তুমি কোথায় হাত ধুয়ে থাকো? [একাধিক উত্তর হতে পারে]

Q14.2 What type of hand washing facility is it where you wash hands at school? (Multiple answer possible) তোমাদের স্কুলে কী ধরনের হাত ধোয়ার সুবিধা বা ব্যবস্থা আছে? [একাধিক উত্তর হতে পারে]

	14.1 At home বাড়িতে	14.2 At school স্কুলে
Water source – (stream, river or pond) পানির উৎস – পানির স্রোত, নদী, পুকুরের পানি	1	1
Water source – Tap পানির উৎস - ট্যাপ	2	2
Water source – Well পানির উৎস – কুয়া	3	3
Water source – Handpump পানির উৎস - টিউবওয়েল	4	4
Buckets with a tap in the bottom কল লাগানো বালতি, গামলা, বেসিন, জেরি-ক্যান, জগ	5	5
Tippy-taps টিপি ট্যাপ	6	6
Pitcher with tap কল সহ কলসি	7	7
Water tank with tap পানির ট্যাংক এর সাথে যুক্ত ট্যাপ	8	8
Container with cup (bucket/bowl/jerrycan with cup) মগ/কাপ সহ জলাধার - গামলা, বেসিন, জেরি-ক্যান, জগ ইত্যাদি	9	9
Other (pleasespecify) অন্যান্য (উল্লেখ করুন)		

Q15. How frequently did you wash your teeth in past week per day? (Single answer) গত সপ্তাহে প্রতিদিন তুমি কত ঘন ঘন দাঁত মেজেছো? [একটি উত্তর]

Once a day প্রতিদিন ১ বার	1
Twice a day প্রতিদিন ২ বার	2
Three times a day প্রতিদিন ৩ বার	3
Did not brush my teeth everyday in last week গত সপ্তাহে প্রতিদিন দাঁত মাজিনি	4
Never কখনোই দাঁত মাজি না	5
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q16. What did you use to brush your teeth? (Multiple answer possible)তুমি কী দিয়ে দাঁতমেজেছো? [একাধিক উত্তর হতে পারে]

Paste পেস্ট	1
Tooth powder টুথ পাউডার	2
Meswak (branch of tree) মেসওয়াক (গাছের ডাল)	3
Coal কয়লা	4
Ash ছাই	5
Burnt soil পোড়া মাটি	6
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q17. In a normal day how frequently do you take a shower? (Single answer)সাধারণত তুমি কত ঘন ঘন গোসলকরে থাকো? [একটি উত্তর]

Everyday প্রতিদিন	1
4-6 days a week সপ্তাহে ৪ থেকে ৬ দিন	2
2-3 days a week সপ্তাহে ২ থেকে ৩ দিন	3
Once a week সপ্তাহে ১ দিন	4
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q18. How frequently do you cut your nails? (Single answer)তুমি কত ঘন ঘন তোমার নখকাটো? [একটি উত্তর]

More than once a week সপ্তাহে ১ বারের চেয়েও বেশিবার	1
Once a week সপ্তাহে ১ বার	2
Once in every 15 days ১৫ দিনে ১ বার	3
Less frequently এরচেয়েও কম	4
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q19. Can you tell me what steps should we take to have safe food? (Multiple answer possible)  
তুমি কি আমাকে বলতে পারো, নিরাপদ খাবারের জন্য আমাদের কী কী করা উচিত? [একাধিক উত্তর হতে পারে]

Wash hand before touching food খাবার ধরার আগে হাত ধোয়া	1
Clean food with clean water before eating or cooking খাবার আগে বা রান্না করার আগে পরিষ্কার পানি দিয়ে খাবার পরিষ্কার করা	2
Wash hand before eating খাওয়ার আগে হাত ধোয়া	3
Use clean equipment to cut or process food খাবার কাটা বা প্রক্রিয়াজাতকরণের জন্য পরিষ্কার সরঞ্জাম ব্যবহার করা	4
Use clean dishes to cook food খাবার রান্না করার জন্য পরিষ্কার হাড়ি-পাতিল ব্যবহার করা	5
Use clean crockeries while eating food খাবার খাওয়ার সময় পরিষ্কার থালা-বাসন ব্যবহার করা	6
Should not keep any food uncovered কোনো খাবারই অনাবৃত না রাখা বা ঢেকে না রাখা উচিত	7
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q20. Where would you go if you have any physical health concerns? (Do not read out options)  
(Multiple answer possible) তোমার যদি কোনো শারীরিক সমস্যা হয় তাহলে তুমি কোথায় যাও? (উত্তর পড়ে শোনাবেন না)  
[একাধিক উত্তর হতে পারে]

Community clinic কমিউনিটি ক্লিনিক	1
Union Health and family welfare clinic ইউনিয়ন স্বাস্থ্য ও পরিবার কল্যাণ ক্লিনিক	2
Upazila Health Complex উপজেলা স্বাস্থ্য কমপ্লেক্স	3
District Sadar Hospital জেলা সদর হাসপাতাল	4
Field Hospital ফিল্ড হাসপাতাল	5
NGO health center/NGO clinic/NGO hospital এনজিও স্বাস্থ্যসেবা কেন্দ্র/এনজিও ক্লিনিক/এনজিও হাসপাতাল	6
Doctor's chamber ডাক্তারের চেম্বার	7
Pharmacy ফার্মেসী	8
Other (please specify) অন্যান্য (উল্লেখ করুন)	



Q21. Where would you go or what would you do if you have any mental health concerns? (Do not read out options) (Multiple answer possible) তোমার যদি কোনো মানসিক স্বাস্থ্যজনিত উদ্বেগ হয় (মনেতে পেরেশান থাকলে) তাহলে তুমি কোথায় যাবে বা কী করবে? (উত্তর পড়ে শোনাবেন না) [একাধিক উত্তর হতে পারে]

Community clinic কমিউনিটি ক্লিনিক	1
Union Health and family welfare clinic ইউনিয়ন স্বাস্থ্য ও পরিবার কল্যাণ ক্লিনিক	2
Upazila Health Complex উপজেলা স্বাস্থ্য কমপ্লেক্স	3
District Sadar Hospital জেলা সদর হাসপাতাল	4
Field Hospital ফিল্ড হাসপাতাল	5
NGO health centre/NGO clinic/NGO hospital এনজিও স্বাস্থ্যসেবা কেন্দ্র/এনজিও ক্লিনিক/এনজিও হাসপাতাল	6
Doctor's chamber ডাক্তারের চেম্বার	7
Pharmacy ফার্মেসী	8
Mosque/religious leader মসজিদ/ধর্মীয় নেতা	9
Talk to family/friends পরিবারের সদস্য/বন্ধুদের সাথে কথা বলবো	10
Nowhere কোথাও না	11
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q22. Have you visited a health facility in the past one year for your own treatment? তুমি কি গত ১ বছরে নিজের চিকিৎসার জন্য কোনো স্বাস্থ্য কেন্দ্রে গিয়েছো?

Yes হ্যাঁ	1	Continue সাক্ষাৎকার চালিয়ে যান
No না	2	Go to Q26 Q26 এ যান

Q23. For what services last time did you visit a health facility? (Single answer) শেষবার তুমি কী কী রোগের চিকিৎসার জন্য বা স্বাস্থ্যসেবার জন্য স্বাস্থ্য কেন্দ্রে গিয়েছিলে? [একটি উত্তর]

General Diseases সাধারণ রোগ (স্বর্দি, জ্বর, মাথা ব্যাথা, গলা ব্যাথা ইত্যাদি)	01
Tuberculosis যক্ষা	02
Malaria ম্যালেরিয়া	03
Leprosy কুষ্ঠরোগ	04
Kala-a-Zar কালাজ্বর	05
Primary Eye Care প্রাথমিক চক্ষু চিকিৎসা	06
E P I ইপিআই টিকা	07
Diarrhea ডায়রিয়া	08
Pneumonia নিউমোনিয়া	09
Vitamin- A capsule ভিটামিন এ ক্যাপসুল খাওয়া	10
Adolescent Health Care বয়ঃসন্ধিকালীন স্বাস্থ্যসেবা	11

T.T vaccine টিটি টিকা	12
Antenatal Care প্রসবপূর্ব সেবা	13
Delivery প্রসবকালীন সেবা	14
HIV/AIDS STI/RTI/ এইচআইভি/এইডস/যৌন রোগ/প্রজনন স্বাস্থ্য	15
Family Planning পরিবার পরিকল্পনা	16
Others (Specify) অন্যান্য (উল্লেখ করুন)	

Q24. I would like to know, did you find it comfortable when you visited the health facility? In this regard please see this card and let me know which response option suits you best/is most appropriate. (Single answer) [Show card] আমি জানতে চাই, তুমি যখন স্বাস্থ্য কেন্দ্রে গিয়েছিলে তখন কি স্বাচ্ছন্দ্যবোধ করেছিলে? এই ব্যাপারে আমি তোমাকে একটি কার্ড দেখাচ্ছি, দয়া করে এই কার্ডটি দেখে বল এতে লেখা কোন উত্তরটি তোমার জন্য সবচেয়ে বেশি প্রযোজ্য/সঠিক। কার্ড দেখান) [একটি উত্তর]

Yes, very comfortable হ্যাঁ, খুবই স্বাচ্ছন্দ্যবোধ করেছি	1
Yes, somewhat comfortable হ্যাঁ, মোটামুটি স্বাচ্ছন্দ্যবোধ করেছি	2
Neither comfortable nor uncomfortable স্বাচ্ছন্দ্যবোধও করিনি আবার অস্বাচ্ছন্দ্যবোধও করিনি	3
No, somewhat uncomfortable না, কিছুটা অস্বাচ্ছন্দ্যবোধ করেছি	4
No, very uncomfortable না, খুবই অস্বাচ্ছন্দ্যবোধ করেছি	5

Q25. What would you like to see to fulfill your expectations in a health facility? (Multiple answer possible) তোমার প্রত্যাশা পূরণ করতে স্বাস্থ্য কেন্দ্রে কী কী সুযোগ-সুবিধা থাকা উচিত বলে তুমি মনে করো? [একাধিক উত্তর হতে পারে]

Disease diagnostic facilities রোগ নির্ণয়ের সুবিধা/পরীক্ষা-নিরীক্ষার সুবিধা	1
Adequate seating facilities পর্যাপ্ত বসার সুবিধা	2
Free medicine ফ্রি ঔষধ	3
High quality medicine উন্নতমানের ঔষধ	4
Good behavior of doctors and nurses ডাক্তার এবং নার্সদের ভালো আচরণ	5
Other please specify) অন্যান্য উল্লেখ করুন)	

Q26. Have you heard the word Covid or corona virus? তুমি কি কোভিড বা করোনাভাইরাস শব্দটি শুনেছ?

Yes হ্যাঁ	1	Continue চালিয়ে যান
No না	2	Go to Q28 Q28 এ যান

Q27 . What hygiene practices are you following during the current situation of corona?  
(Multiple answer possible) করোনার বর্তমান পরিস্থিতিতে আপনি কি কি স্বাস্থ্যবিধি অনুসরণ করছেন? [একাধিক উত্তর হতে পারে]

Washing hands with soap or soap substitute for 20 seconds frequently ঘন ঘন 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	01
Cover coughs or sneeze properly with elbow হাচি বা কাশি দেবার সময় কুন্টুই দিয়ে মুখ ঢেকে রাখা	02
Washing hands with soap or soap substitute for 20 seconds after attending a patient রোগীর সেবা যত্নের পর 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	03
Washing hands with soap or soap substitute for 20 seconds after taking care of poultry and cattle পশু পাখির যত্নের পর 20সেকেন্ড ধরে জন্য সাবান বা সাবান এর বিকল্প দিয়ে হাত ধোয়া	04
Stay at home if have symptoms (dry cough, temperature, tiredness, difficulty breathing) লক্ষণ দেখা দিলে বাড়িতে থাকা ( শুকনা কাশি, জ্বর, ক্লান্তি ভাব, শ্বাসকষ্ট )	05
Refrain from gathering অনেক মানুষের একসাথে জড় হওয়া থেকে বিরত থাকা	06
Wear mask মাস্ক পরিধান করা	07
Minimize physical contact শারীরিক স্পর্শ এড়িয়ে চলা	08
Avoid touch face with unsensitized hands ময়লা হাত দিয়ে মুখমণ্ডল স্পর্শ করা থেকে বিরত থাকা	09
Others, please specify অন্যান্য, উল্লেখ করুন	

Ask the following questions to female students only. If the student is male, end the interview by thanking respondent for his/her valuable time and responses নিচের প্রশ্নগুলি শুধুমাত্র মেয়ে শিক্ষার্থীদের জিজ্ঞাসা করুন। যদি ছাত্রটি ছেলে হয়, তাহলে তার মূল্যবান সময় এবং মতামত দেওয়ার জন্য উত্তরদাতাকে ধন্যবাদ জানিয়ে সাক্ষাৎকার শেষ করুন।

Q28 Are you receiving adequate information on menstruation? (Single answer) তুমি কি মাসিক সম্পর্কে পর্যাপ্ত তথ্যপাচ্ছে? [একটি উত্তর]

Yes হ্যাঁ	1	Go to Q30 Q30এ যান
No না	2	Continue সাক্ষাৎকার চালিয়ে যান
Don't know/ No answer জানি না/উত্তর নেই	3	
Do not know what is menstruation মাসিক কি তা জানি না	4	End the interview সাক্ষাৎকার শেষ করুন

Q29. What information on menstruation would you like to receive? (Multiple answer possible) -  
মাসিক সম্পর্কিত কোন কোন তথ্য তুমি পেতে চাও? [একাধিক উত্তর হতে পারে]

What sanitary items to use during menstruation মাসিকের সময় কী কী স্যানিটারি পন্য ব্যবহার করতে হবে	1
How to manage menstruation মাসিকের সময় কী কী নিয়ম-কানুন মেনে চলতে হবে/মাসিকের সময় কীভাবে চলতে হবে	2
Menstrual cycles/ Usually when it starts, for how many days a month মাসিকের সময় (সাধারণত কখন শুরু হয়, মাসে কত দিনের জন্য হয়)	3
How to relieve pain/ কীভাবে মাসিকের ব্যথা উপশম করা যায়	4
Other (please specify) অন্যান্য (উল্লেখ করুন)	

Q30. What do you use to manage your menstruation? (Do not read out options) (Single answer)  
মাসিকের সময় সাধারণত তুমি কী ব্যবহার করে থাকো? (উত্তর পড়ে শোনাবেন না) (একটি উত্তর)

Disposable sanitary pad or tampon একবার ব্যবহার করে ফেলে দিতে হয় এমন স্যানিটারি প্যাড বা ট্যাম্পন	1	Continue সাক্ষাৎকার চালিয়ে যান
Reusable sanitary pad খুয়ে পরিষ্কার করে একাধিকবার ব্যবহার করা যায় এমন স্যানিটারি প্যাড	2	
Other cotton materials কাপড় বা তুলা	3	
Other (please specify) অন্যান্য (উল্লেখ করুন)		
Nothing কিছুই ব্যবহার করি না	8	End the interview সাক্ষাৎকার শেষ করুন
No answer উত্তর নেই	9	
Not yet started menstruation এখনো মাসিক শুরু হয়নি		

Q31. Do you have access to enough of (choice from question on what is used to manage menstruation)? তুমি কি \_\_\_\_\_ (Q30 এ মাসিকের সময় যা ব্যবহার করার কথা বলেছেন সেটি বলুন) প্রয়োজন মতোপেয়ে থাকো?

Yes হ্যাঁ	1
No না	2
Don't know/ No answer জানি না/উত্তর নেই	3

Q32. I would like to know, are you satisfied with the quality of (*choice from question on what is used to manage menstruation*)? In this regard please see this card and let me know which response option suits you best. [Show card] আমি জানতে চাই, তুমি কি \_\_\_\_\_ (Q30 এ মাসিকের সময় যা ব্যবহার করার কথা বলেছেন সেটি বলুন) এর গুণগত মান নিয়ে সন্তুষ্ট? এই ব্যাপারে আমি তোমাকে একটি কার্ড দেখাচ্ছি, দয়া করে এই কার্ডটি দেখে বল এতে লেখা কোন উত্তরটি তোমার জন্য সবচেয়ে বেশি প্রযোজ্য/সঠিক। (কার্ড দেখান)

Yes, very satisfied হ্যাঁ, খুবই সন্তুষ্ট	1
Yes, somewhat satisfied হ্যাঁ, মোটামুটি সন্তুষ্ট	2
Neither satisfied nor unsatisfied সন্তুষ্টও না আবার অসন্তুষ্টও না	3
No, somewhat unsatisfied না, কিছুটা অসন্তুষ্ট	4
No, very unsatisfied না, খুবই অসন্তুষ্ট	5

If in any case, the respondent mention one hand in Q12, please teach them to wash both the hands after or before each activity. যদি, উত্তরদাতা Q12 এ কোনও ক্ষেত্রে এক হাত উল্লেখ করে, দয়া করে প্রতিটি

কাজের আগে বা পরে উভয় হাত ধোয়া শিখিয়ে দিন।

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেওয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

## WASH Facility Observation Checklist

### Org-Quest Research Limited

DH Tower, Level-7 (Suit-701)

6 Panthapath, Dhaka-1215

Phone: 55013481-84

### WASH Facility Observation Checklist

Facility ID ফ্যাসিলিটি আইডি:		
Uapazila উপজেলার নাম:	টেকনাফ	
Union name ইউনিয়নের নাম	নিহিলা	
Village name গ্রামের নাম		
Inspection Date পরিদর্শনের তারিখ:		
Partner অংশীদার (পার্টনার) এর নাম		
Type of facility ফ্যাসিলিটি এর ধরন	Toilet টয়লেট	Bathing Cubicle গোসলখানা
	1	2

#### Status of the WASH Facility ওয়াশ ফ্যাসিলিটি (টয়লেট) এর অবস্থা

Damaged ক্ষতি হয়েছে	Yes হ্যাঁ	No না
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Repaired মেরামত করা হয়েছে	Yes হ্যাঁ	No না
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Reconstruction পুনর্নির্মাণ:	Yes হ্যাঁ	No না
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Not Repaired মেরামত করা হয়নি	Yes হ্যাঁ	No না
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Need Improvement উন্নয়ন করা প্রয়োজন	Yes হ্যাঁ	No না
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Please specify উল্লেখ করুন

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## Feature of the WASH Facility ওয়াশ ফ্যাসিলিটি (টয়লেট) এর বৈশিষ্ট্য

Toilet টয়লেট/ল্যাট্রিন	
Latrine appears in good working order (water seal functional, and pit not clogged) ল্যাট্রিন ভালোভাবে কাজ করছে (কার্যকরী পানির সিল এবং পিট চালু আছে)	1
Latrine is not very well maintained (e.g. water seal broken but pit not clogged, and latrine can still be used) ল্যাট্রিন ভালোভাবে রক্ষণাবেক্ষণ করা হয় নাই (অকার্যকরী পানির সিল তবে পিট চালু আছে এবং এখনও ল্যাট্রিন ব্যবহারযোগ্য)	2
Latrine is in poor condition (e.g. water seal broken, pit clogged this toilet is not functional, not usable) ল্যাট্রিন খুব বাজে অবস্থায় আছে (পানির সিল অকার্যকর এবং পিট ময়লায় ভরে গেছে, ল্যাট্রিনটি আর চালু নেই, ব্যবহার অযোগ্য)	3
The doors of the latrine was not brocken ল্যাট্রিনের দরজা ভাঙা নয়/ল্যাট্রিনের দরজা ভালো আছে	4
The door can be locked from inside দরজা ভিতর থেকে আটকানো যায়	5
Adequate space and provisions for female menstrual needs e.g. cleaning, drying or disposal of sanitary napkins were available মেয়েদের মাসিকের প্রয়োজনের জন্য পর্যাপ্ত জায়গা এবং ব্যবস্থা, যেমন: স্যানিটারি ন্যাপকিন পরিষ্কার করা, শুকানো বা ফেলে দেওয়ার ব্যবস্থা ছিল	6
The latrine was segregated by gender and was clearly marked পুরুষ এবং নারীদের জন্য আলাদা ল্যাট্রিন ছিল এবং স্পষ্টভাবে চিহ্নিত করা ছিল	7
The latrine ensured the privacy of the users ল্যাট্রিন ব্যবহারকারীদের গোপনীয়তার নিশ্চয়তা ছিল	8
The latrine has natural light when the door is closed দরজা বন্ধ করার পর ল্যাট্রিনে পর্যাপ্ত প্রাকৃতিক/সূর্যের আলো থাকে	10
The latrine has functional electric light ল্যাট্রিনে কার্যকরী (ঠিকভাবে জ্বলে) বৈদ্যুতিক বাতি আছে	11
The latrine room can be locked from the inside ল্যাট্রিন রুমটি ভিতর থেকে আটকানো যায়	12
The latrine has hooks to hang clothes while changing ল্যাট্রিনের ভিতরে কাপড় পরিবর্তন করার সময় ঝুলিয়ে রাখার জন্য হুক আছে	13
Hand washing facility is visible from the latrine ল্যাট্রিন থেকে হাত ধোয়ার ব্যবস্থা দেখা যায়	14
There is a bucket with water toilet vicinity ল্যাট্রিনের আশে পাশে পানি সহ একটি বালতি আছে	15
There is a bin inside the latrine where adolescents' girls' can dispose their sanitary materials ল্যাট্রিনের ভিতরে একটি ময়লা ফেলার ঝুড়ি রয়েছে যেখানে কিশোরী মেয়েরা তাদের ব্যবহৃত স্যানিটারি উপকরণগুলি ফেলে দিতে পারে	16

JPF's logo was visible জেপিএফ এর লোগো দৃশ্যমান ছিল/দেখা যাচ্ছিল	Yes হ্যাঁ	No না
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Support Organizations' logo was visible সহযোগী প্রতিষ্ঠানের লোগো দৃশ্যমান ছিল/দেখা যাচ্ছিল	Yes হ্যাঁ	No না
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Construction/repaire date was visible নির্মাণ / মেরামতের তারিখ দৃশ্যমান ছিল/দেখা যাচ্ছিল	Yes হ্যাঁ	No না
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IDI Guide for Household

**Org-Quest Research Limited**

## IDI Guide for Household

### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about water, sanitation and hygiene in your area.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 60 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুআলাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাত্কার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনারদের এলাকায় পানি, ল্যাট্রিন এবং হাইজিন সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

- Tell me about yourself. How do you spend your time in your daily routine? আপনার নিজের সম্পর্কে বলুন। আপনি প্রতিদিন কীভাবে সময় কাটান?

- According to you, what are the problems faced by the community people related to water, sanitation and hygiene? In you community where do the people use to defecate? Have you seen any change in recently? What change have you noticed? আপনার মতে, আপনার আশেপাশের লোকদের মাঝে পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) সম্পর্কিত কী কী সমস্যা দেখা যায়? আপনার এলাকার লোকেরা কোথায় মলত্যাগ করে? আপনি কি সম্প্রতি কোনও পরিবর্তন দেখেছেন? আপনি কি পরিবর্তন লক্ষ্য করেছেন?



- Can you please let us when to wash your hands? Do you wash your hand after defecation? Where do you wash your hands? Do you or people like you feel safe using the latrines or WASH facilities? আপনি কি আমাকে বলতে পারেন, কখন কখন হাত ধোয়া উচিত? মলত্যাগের পরে কি আপনি হাত ধুয়ে থাকেন? আপনি কোথায় হাত ধুয়ে থাকেন? আপনি বা আপনার মতো লোকেরা কি ল্যাট্রিনগুলি বা ওয়াশ সুবিধা ব্যবহার করতে নিরাপদ বোধ করেন?
- Is there any case or incidence where you or people like you could not use the latrines or WASH facilities? What are those? What to you do then? How the situation can be improved? এমন কোনও ঘটনা আছে যেখানে আপনি বা আপনার মতো লোকেরা ল্যাট্রিনগুলি বা ওয়াশ সুবিধা ব্যবহার করতে পারেন নি? আমাকে বিস্তারিত বলবেন কি? তখন আপনারা কি করেন? এই পরিস্থিতির কীভাবে উন্নতি করা যায়?
- Is there any handwashing facility in your locality that has been arranged for your ease? if so, what? Is there any bathing facility in your locality? is it within your reach? How comfortable are you with that? What else could be done to make this more comfortable for you? আপনার লোকালয়ে এমন কোনও হাত ধোয়ার ব্যবস্থা রয়েছে যা আপনার স্বাস্থ্যের কথা চিন্তা করে নির্মাণ করা হয়েছে? যদি তাই হয়, সেটা কিভাবে? আপনার এলাকায় কি স্নানের কোনও সুবিধা আছে? এটা কি আপনার নাগালের মধ্যে আছে? এটা আপনার জন্য কতটা আরামদায়ক? এটিকে আপনার জন্য আরও স্বাস্থ্যময় করে তোলার জন্য আর কী কী করা যেতে পারে?
- Is the latrine located in your proximal advantage? How is the arrangement done to help you use it? Can you go to and use it on your own or you need support? Who supports you? Who else if s/he is not there? is there any special arrangement on the way to the latrine so that you can reach easily? If so what? How helpful is it? Is there any special arrangement inside the latrine so that you can use it easily? If so, what? How comfortable is that? ল্যাট্রিনটি কি আপনার সুবিধাজনক স্থানে অবস্থিত? আপনাকে এটি ব্যবহারের সুবিধার জন্য কি কি ব্যবস্থা করা হয়েছে? আপনি নিজে গিয়ে এটি ব্যবহার করতে পারেন নাকি আপনার সাহায্যের প্রয়োজন হয়? কে আপনাকে সাহায্য করে? আর সে যদি সেখানে না থাকে, তখন আপনি কি করেন? ল্যাট্রিনের পথে কি কোনও বিশেষ ব্যবস্থা আছে যাতে আপনি সহজেই পৌঁছতে পারেন? কি ধরনের ব্যবস্থা করা হয়েছে? এটি আপনার জন্য কতটা সহায়ক? ল্যাট্রিনের ভিতরে কী কোনও বিশেষ ব্যবস্থা রয়েছে যাতে আপনি এটি সহজেই ব্যবহার করতে পারেন? তা হলে কী? এটা কি আপনার জন্য আরামদায়ক?
- Have you noticed any incidence of construction or repair of new WASH facilities? Were the number sufficient for your need? Why do you think so? আপনি কি নতুন ওয়াশ সুবিধাগুলি নির্মাণ বা মেরামতের কোনও ঘটনা লক্ষ্য করেছেন? আপনার প্রয়োজনের জন্য নম্বরটি কি যথেষ্ট ছিল? কেন আপনি এমনটা মনে করছেন?

**As this question among the mother of children under 5 or caregiver of elderly people/ এই প্রশ্নটি ৫ বছরের কম বয়সের বাচ্চাদের মায়ের মধ্যে বা বৃদ্ধদের যত্ন নেন এমন ব্যক্তিদের জিজ্ঞেস করুন**

- At what times do you usually clean your child feces or feces of elderly people who cannot go to the latrine by themselves? Where do you dispose the feces? Where do you dispose of the items you cleaned with? Do you feel it's important to wash your hand after disposing of your child feces or feces of elderly people? Why do you think so? How do you wash your hand after cleaning your child or elderly people feces? আপনি সাধারণত আপনার সন্তানের মল বা বয়স্ক ব্যক্তিদের মল পরিষ্কার করেন যারা নিজেরা ল্যাট্রিনে যেতে পারে না? কোথায় আপনি মলমূত্র ফেলে থাকেন? আপনি মলমূত্র পরিষ্কার করার জন্য ব্যবহৃত জিনিসগুলো কোথায় ফেলে দেন? আপনার সন্তানের বা বয়স্ক ব্যক্তিদের মলমূত্র ফেলে দেয়ার পরে কি আপনার হাত ধুয়ে নেওয়া গুরুত্বপূর্ণ মনে হয়? কেন আপনি এমনটা মনে করছেন? আপনার সন্তানের বা বয়স্ক ব্যক্তিদের মল পরিষ্কার করার পরে আপনি কীভাবে হাত ধুয়ে থাকেন?

**(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?  
মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?**

- Have you received any information related to Corona virus? What type of information did you receive? Do you think the hygiene you need to maintain due to Corona virus was easy to follow? Why or why not? আপনি কি করোনার ভাইরাস সম্পর্কিত কোনও তথ্য পেয়েছেন? আপনি কি ধরণের তথ্য পেয়েছেন? আপনি কি মনে করেন যে করোনা ভাইরাসের কারণে যে স্বাস্থ্যবিধি মেনে চলতে হয়, তা অনুসরণ করা সহজ ছিল? কেন অথবা কেন নয়?
- Till now do you think the information you receive was relevant to needs of people like you. Why do you think so? What could have been done to design the project more relevant to the needs of people like you? এখন পর্যন্ত আপনার কি মনে হয় যে সব তথ্য আপনারা পেয়েছেন, তা আপনার মতো লোকের প্রয়োজন মেটাতে পারে? কেন আপনি এমনটা মনে করছেন? আপনার মতো মানুষের প্রয়োজনের সাথে প্রজেক্টটি আরও প্রাসঙ্গিক করার জন্য কী করা যেত?

### **(CHS\_2) IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?**

মানবিক সাড়া কার্যকর এবং সময়োপযোগীভাবে মেটানো?

- Do you think the project design was appropriate for meeting the need by gender, age, people with disabilities or caregiver of children or elderly people? Was there make any special plan for women to use the wash facilities at night? Can the women and people with disabilities use the wash facilities at night or during the monsoon? Can the caregiver dispose child feces or feces or elderly people into the latrine? আপনি কি মনে করেন যে প্রকল্পটি নারী-পুরুষ, বিভিন্ন বয়সী মানুষ, প্রতিবন্ধী এবং যারা বয়স্ক বা শিশুদের যত্ন নেয় এমন ব্যক্তিদের প্রয়োজন পূরণের জন্য উপযুক্ত ছিল? রাতে মহিলাদের জন্য ওয়াশ সুবিধা ব্যবহারের জন্য কোনও বিশেষ ব্যবস্থা করা হয়েছিল কি? মহিলা এবং প্রতিবন্ধী ব্যক্তির কি রাতে বা বর্ষার সময় ওয়াশ সুবিধা ব্যবহার করতে পারেন? ল্যাট্রিনগুলোতে কি শিশুদের বা বা বয়স্ক ব্যক্তিদের মলমূত্র ফেলে দেয়ার ব্যবস্থা ছিল?

### **(CHS\_3) IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?**

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Do you think, the information you received related to water, sanitation and hygiene, it will help you to strengthen communities' and local capacities? How? Do you think, the information will support you to face the water, sanitation and hygiene related challenges in the long run? Why do you think so? আপনি কী মনে করেন, পানি, স্যানিটেশন এবং হাইজিন সম্পর্কিত যে তথ্য আপনি পেয়েছেন, তা আপনাদের সক্ষমতা বৃদ্ধি করতে সহায়তা করবে? কীভাবে? আপনি কি মনে করেন, এই তথ্য দীর্ঘস্থায়ীভাবে পানি, স্যানিটেশন এবং স্বাস্থ্যবিধি সম্পর্কিত সমস্যাগুলো মোকাবেলায় আপনাকে সহায়তা করবে? কেন আপনি এমনটা মনে করেন?
- According to you, what are the main barriers to involve local actors in the WASH related activities? How this can be overcome? আপনার মতে, পানি বা ল্যাট্রিন সম্পর্কিত কার্যক্রমগুলিতে স্থানীয় লোকদের জড়িত করার প্রধান বাধাগুলি কী? কীভাবে এটি কাটিয়ে ওঠা যায়?

### **(CHS\_4) IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Were you able to provide feedback throughout the different stages of WASH related program? Did you share your opinion about the location and design of the WASH facilities? Was the feedback from you incorporated into the project design? আপনি কি পানি বা ল্যাট্রিন এর কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিলেন? আপনি কি 'ওয়াশ' ফ্যাসিলিটিজের অবস্থান এবং নকশা সম্পর্কে আপনার মতামত দিতে পেরেছিলেন? আপনার কাছ থেকে প্রাপ্ত মতামত কি প্রকল্পে অন্তর্ভুক্ত করা হয়েছিল?

**(CHS\_5)ARE COMPLAINTS WELCOME AND ADDRESSED? অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?**

- Do you know how to share a complaint for this project if you have any? Did you share any complaints or observation during the implementation of the project? What are those complaints or observations? Can you give some example? Were the complaints or observations addressed properly? How was those addressed or why those were not addressed? আপনি কি জানেন এই প্রকল্পের জন্য কোনও অভিযোগ কীভাবে করতে হয়? প্রকল্পটি বাস্তবায়নের সময় আপনার কোনো অভিযোগ বা পর্যবেক্ষণ ছিল কি? অভিযোগ বা পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? অভিযোগ বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

**(CHS\_7) ARE HUMANITARIAN ACTORS CONTINUOUSLY LEARNING AND IMPROVING? যারা মানবিক কাজ করছে তারা কি ধারাবাহিকভাবে শিখছে এবং উন্নতি করছে?**

- Since the beginning of the project, have you noticed any modifications based on your feedback, or complaint? If yes, could you please explain how the changes made? প্রকল্পের শুরু থেকে, আপনাদের মতামত, পরামর্শ অথবা অভিযোগ এর উপর ভিত্তি করে প্রকল্পে কোনো পরিবর্তন হয়েছে কি? যদি হ্যাঁ হয়, তাহলে আপনি কি দয়া করে বলতে পারেন, পরিবর্তনগুলো কি কি ?

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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### IDI Guide for Students

#### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing তুমি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

#### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about water, sanitation and hygiene in your area.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 60 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুআলাইকুম, আমার নাম \_\_\_\_\_ | আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাত্কার দিতে রাজী হওয়ার জন্য আমি তোমাকে ধন্যবাদ জানাতে চাই। তোমাদের এলাকায় এর পানি, ল্যাট্রিন এবং হাইজিন সম্পর্কে আমি তোমার কাছ থেকে জানতে চাইবো। তোমার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। তোমার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে তুমি কি আমার কাছ থেকে আর কিছু জানতে চান?

- Tell me about yourself. How do you spend your time in your daily routine? আপনার নিজের সম্পর্কে বলুন। তুমি প্রতিদিন কীভাবে সময় কাটান?

- Can you go to school? Why not? Do you feel bad for not being able to go to school? তুমি কি স্কুলে যেতে পারবে? কেন না? স্কুলে যেতে না পারায় খারাপ লাগছে?
- Have you participated in any hygiene awareness activities in last one year? What did you learn from the hygiene awareness activities? Can you utilize the information that you have learned? Can you give some example? তুমি কি গত ১ বছরে কোনো স্বাস্থ্য সচেতনতা কার্যক্রমে অংশগ্রহণ করেছো? স্বাস্থ্য সচেতনতা কার্যক্রম থেকে তুমি কী কী শিখেছো? তুমি যে তথ্য শিখেছ তা কী কাজে লাগাতে পার? তুমি কি কিছু উদাহরণ দিতে পার?
- Generally where do you defecate? When you used to go to school/madrasha did you have access to a latrine at School/madrasha? Was there any challenge to get access to the latrine at School/madrasha? What are those? Was there separate latrine for boys and girls? Did you feel comfortable to use the latrine? Why? সাধারণত কোথায় তুমি মলত্যাগ কর? তুমি যখন স্কুলে / মাদ্রাসায় যেতে তখন আপনার কি স্কুল / মাদ্রাসায় কোনও ল্যাট্রিন ব্যবহার করতে পারতে? স্কুল / মাদ্রাসায় ল্যাট্রিন ব্যবহার করার জন্য কোনও সমস্যা হত কি ছিল? ওইগুলো কি? ছেলে ও মেয়েদের জন্য আলাদা ল্যাট্রিন ছিল কি? তুমি কি ল্যাট্রিন ব্যবহার করতে স্বাচ্ছন্দ্য বোধ করত? কেন এমন মনে হচ্ছে?
- How do you wash your hand after defecation at your School/madrasha? Was there any hand washing facility at the school? Was soap or soap substitute available at the school? স্কুলে/মাদ্রাসায় মলত্যাগের পরে তুমি কীভাবে হাত ধুয়ে থাকো? স্কুলে কি কোনও হাত ধোয়ার ব্যবস্থা ছিল? স্কুলে কি সাবান বা সাবানের বিকল্প পাওয়া যেত?
- Can you please let us when to wash your hands? What hand do you wash at each of the times you've mentioned? তুমি কোন হাতটি কখন ধুয়ে থাকো, সেই সময়গুলোতে তুমি হাত ধোয়ার কথা বলেছো?
- Do you wash your hand after defecation? Where do you wash your hands? Do you feel safe using the latrines or WASH facilities? তুমি কি আমাকে বলতে পারেন, কখন কখন হাত ধোয়া উচিত? মলত্যাগের পরে কি তুমি হাত ধুয়ে থাক? তুমি কোথায় হাত ধুয়ে থাক? তুমি কি ল্যাট্রিনগুলি বা ওয়াশ সুবিধা ব্যবহার করতে নিরাপদ বোধ কর?
- Have you received any information related to food hygiene? Where did you learn about the topic? What have you learned about food hygiene? Do you implement your learning in your daily life? Can you please give me some examples? **Probe for each activity mentioned** তুমি কি খাবারের পরিচ্ছন্নতা সম্পর্কিত কোনও তথ্য পেয়েছ? তুমি এ সম্পর্কে কোথা থেকে শিখেছ? তুমি খাবারের পরিচ্ছন্নতা সম্পর্কে কোথা থেকে শিখেছ? তুমি কি তোমার দৈনন্দিন জীবনে এখান থেকে শেখা বিষয়গুলো কাজে লাগাতে পার? আমাকে কিছু উদাহরণ দিতে পার? **উল্লিখিত প্রতিটি বিষয়ের জন্য প্রব করুন**
- Have you received any information related to personal hygiene? Where did you learn about the topic? What have you learned about personal hygiene? Do you implement your learning in your daily life? Can you please give me some examples? **Probe for each activity mentioned** তুমি কি ব্যক্তিগত পরিচ্ছন্নতা বা শরীরের যত্ন সম্পর্কিত কোনও তথ্য পেয়েছ? তুমি এ সম্পর্কে কোথা থেকে শিখেছ? তুমি ব্যক্তিগত পরিচ্ছন্নতা বা শরীরের যত্ন সম্পর্কে কোথা থেকে শিখেছ? তুমি কি তোমার দৈনন্দিন জীবনে এখান থেকে শেখা বিষয়গুলো কাজে লাগাতে পার? আমাকে কিছু উদাহরণ দিতে পার? **উল্লিখিত প্রতিটি বিষয়ের জন্য প্রব করুন**
- Have you received any information on Personal hygiene, COVID-19 and Hand-washing, Water Hygiene and acute Watery Diarrhea (AWD), Sanitation Hygiene, Environmental Hygiene and Food Hygiene? Where did you learn about the topic? What have you learned about these topics? Do you implement your learning in your daily life? Can you please give me some examples? **Probe for each activity mentioned** তুমি কি ব্যক্তিগত স্বাস্থ্যবিধি, COVID-19 এবং হাত ধোওয়া, পানি সম্পর্কিত স্বাস্থ্যবিধি এবং পানির কারণে তীব্র ডায়রিয়া, টয়লেট এর স্বাস্থ্যবিধি, পরিবেশগত স্বাস্থ্যবিধি এবং খাদ্য স্বাস্থ্যবিধি সম্পর্কিত কোনও তথ্য পেয়েছ? তুমি এ সম্পর্কে কোথা থেকে শিখেছ? তুমি এই বিষয় গুলো সম্পর্কে কি শিখেছ? তুমি কি তোমার দৈনন্দিন জীবনে এখান থেকে শেখা বিষয়গুলো কাজে লাগাতে পার? আমাকে কিছু উদাহরণ দিতে পার? **উল্লিখিত প্রতিটি বিষয়ের জন্য প্রব করুন**

- Have you received any information environmental hygiene? Where did you learn about the topic? What have you learned about environmental hygiene? Do you implement your learning in your daily life? Can you please give me some examples? **Probe for each activity mentioned** তুমি কি পরিবেশগত স্বাস্থ্যবিধি সম্পর্কিত কোনও তথ্য পেয়েছ? তুমি এ সম্পর্কে কোথা থেকে শিখেছ? তুমি পরিবেশগত স্বাস্থ্যবিধি সম্পর্কে কোথা থেকে শিখেছ? তুমি কি তোমার দৈনন্দিন জীবনে এখান থেকে শেখা বিষয়গুলো কাজে লাগাতে পার? আমাকে কিছু উদাহরণ দিতে পার? **উল্লিখিত প্রতিটি বিষয়ের জন্য প্রব করুন**
- Do you know what are the main causes of diarrhea? What happens when someone suffers from diarrhea? What should one do when someone suffers from diarrhea? তুমি কি জান, ডায়রিয়ার মূল কারণগুলি কি কি? কেউ ডায়রিয়ায় আক্রান্ত হলে কী হয়? কেউ ডায়রিয়ায় আক্রান্ত হলে একজনকে কী করা উচিত?

**Menstrual Management (Ask only for the female students of Sufia Gov. school and Kobra Madrasa)** মাসিক ব্যবস্থাপনা শুধুমাত্র সুফিয়া সরকারী বিদ্যালয় এবং কোবরা মাদ্রাসার ছাত্রীদের জন্য

- Are you receiving adequate information on menstruation? What information on menstruation would you like to receive? Do you feel comfortable to discuss on menstruation with others? তুমি কি মাসিক সম্পর্কে পর্যাপ্ত তথ্য পাচ্ছে? মাসিক সম্পর্কিত কোন কোন তথ্য তুমি পেতে চাও? তুমি কি অন্যের সাথে মাসিক নিয়ে আলোচনা করতে স্বাচ্ছন্দ্য বোধ কর?
- What do you use to manage your menstruation? Do you have access to enough of these product? Do you use the product that you desire to use? Why or why not? মাসিকের সময় সাধারণত তুমি কী ব্যবহার করে থাকো? তুমি কি এই পণ্য প্রয়োজন মতো পেয়ে থাকো? তুমি যে পণ্যটি ব্যবহার করতে চাও তা কি ব্যবহার করতে পার? কেন অথবা কেন নয়?
- Was there any incidence that you or student like you could not go to school due menstruation? Why is that so? Please tell in details. তুমি বা তোমার মতো ছাত্রীরা মাসিকের কারণে স্কুলে যেতে পারেনি এমন কোনও ঘটনা কি ছিল? কেন এমন হয়? আমাকে বিস্তারিত বলবেন কি?
- Think a situation where you are at school and menstruation has started? What would you do? Are you aware of your menstrual cycle? Do you keep sanitary pad with you during menstrual cycle? এমন একটা পরিস্থিতির কথা চিন্তা কর, যখন তুমি স্কুলে এবং তোমার মাসিক শুরু হয়েছে? তখন তুমি কি কর? তুমি কি তোমার মাসিকচক্র সম্পর্কে জান? তুমি কি মাসিক চক্রের সময় সাথে স্যানিটারি প্যাড রাখ?
- Can you change your sanitary napkin at school/madrasa? Do you feel comfortable to change sanitary napkin at school? Why or why not? What facility do you want at school tor better menstruation management? তুমি কি স্কুল / মাদ্রাসায় স্যানিটারি ন্যাপকিন পরিবর্তন করতে পার? তুমি কি স্কুলে স্যানিটারি ন্যাপকিন পরিবর্তন করতে স্বাচ্ছন্দ্য বোধ করেন? কেন অথবা কেন নয়? মাসিকের আরও ভাল ব্যবস্থাপনার জন্য তুমি বিদ্যালয়ে কি সুবিধা চাও?

**Ask all Students /সকল ছাত্রীদের জিজ্ঞেস কর**

**(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- When you receive any information on Personal hygiene, COVID-19 and Hand-washing, Water Hygiene and acute Watery Diarrhea (AWD), Sanitation Hygiene, Environmental Hygiene and Food Hygiene, do you think the information is relevant to you? Why do you think so? Can you utilize the information in your real life? তুমি যখন ব্যক্তিগত স্বাস্থ্যবিধি, COVID-19 এবং হাত ধোওয়া, পানি সম্পর্কিত স্বাস্থ্যবিধি এবং পানির কারণে তীব্র ডায়রিয়া, টয়লেট এর স্বাস্থ্যবিধি, পরিবেশগত স্বাস্থ্যবিধি এবং খাদ্য স্বাস্থ্যবিধি সম্পর্কে কোনও তথ্য পাও, তখন কি তোমার মনে হয় যে তথ্যটি তোমার জন্য প্রাসঙ্গিক? কেন তুমি এমনটা মনে কর? তুমি কি তোমার বাস্তব জীবনে তথ্যটি ব্যবহার করতে পার?

- Have you received any information related to Corona virus? What type of information did you receive? Do you think the hygiene you need to maintain due to Corona virus was easy to follow? Why or why not? তুমি কি করোনার ভাইরাস সম্পর্কিত কোনও তথ্য পেয়েছেন? তুমি কি ধরণের তথ্য পেয়েছেন? তুমি কি মনে করেন যে করোনা ভাইরাসের কারণে যে স্বাস্থ্যবিধি মেনে চলতে হয়, তা অনুসরণ করা সহজ ছিল? কেন অথবা কেন নয়?

**(CHS\_2) IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?**

মানবিক সাড়া কার্যকর এবং সময়োপযোগীভাবে মেটানো?

- Do you think the information you received was appropriate for meeting the need by students like you? Why do you think so? তুমি যে ব্যক্তিগত স্বাস্থ্যবিধি, পানির স্বাস্থ্যবিধি, খাদ্য স্বাস্থ্যবিধি বা জনস্বাস্থ্যের কোনও তথ্য পাও, তখন কি তোমার মনে হয় যে তথ্যটি তোমার জন্য প্রাসঙ্গিক? কেন তুমি এমনটা মনে কর? তুমি কি তোমার বাস্তব জীবনে শেখা তথ্যগুলো ব্যবহার করতে পার?

**(CHS\_3) IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?**

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করেছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Have you ever met any Rohingya boys or girls of your age? Do you have any friends from the Rohingya community? How do you feel about them? Do you think this project will help you to make new friends from Rohingya community? তোমার কি কখনও তোমার বয়সের কোন রোহিঙ্গা ছেলে বা মেয়েদের সাথে দেখা হয়েছে? তোমার কি রোহিঙ্গা সম্প্রদায়ের কোনও বন্ধু আছে? তাদের সম্পর্কে তোমার ধারণা কি? তুমি কি মনে কর এই প্রকল্পটি তোমাকে রোহিঙ্গা সম্প্রদায়ের সাথে নতুন বন্ধু তৈরি করতে সহায়তা করবে?

**(CHS\_4) IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Were you able to provide feedback throughout the different stages of WASH related program? Was the feedback from you incorporated into the project design? তুমি কি পানি বা ল্যাট্রিন এর কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিলেন? তোমার কাছ থেকে প্রাপ্ত মতামত কি প্রকল্পে অন্তর্ভুক্ত করা হয়েছিল?

**(CHS\_5) ARE COMPLAINTS WELCOME AND ADDRESSED?** অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?

- Do you know how to share a complaint for this project if you have any? Did you share any complaints during the implementation of the project? What are those complaints? Can you give some example? Were the complaints or observations addressed properly? How was those addressed or why those were not addressed? তুমি কি জান এই প্রকল্পের জন্য কোনও অভিযোগ কীভাবে করতে হয়? প্রকল্পটি বাস্তবায়নের সময় তোমার কোনো অভিযোগ ছিল কি? অভিযোগগুলো কী ছিল? তুমি কি কয়েকটির কথা বলতে পারেন? অভিযোগ বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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### IDI Guide for Teachers

#### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

#### Introduction ভূমিকা/পরিচিতি

Salam/adab. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about water, sanitation and hygiene in your community.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 45 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি।

বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা বা হাইজিন এর সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি।

প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের এলাকার পানি, ল্যাট্রিন এবং ফরিস্কার-পরিচ্ছন্নতা বা হাইজিন সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৪৫ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

#### Main Discussion মূল আলোচনা

Thanks for sparing time for us from your busy schedule. Let us start by your association with this school-  
আপনার ব্যস্ত সময়সূচী থেকে আমাদেরকে সময় দেওয়ার জন্য ধন্যবাদ। এই স্কুলের সাথে আপনার সম্পর্ক দিয়ে শুরু করা যাক-



- how long are you working as a teacher in this school? আপনি কতদিন যাবত এই স্কুলে শিক্ষক হিসাবে কর্মরত আছেন?
- how frequently do you need to interact with the local people? for what purposes? স্থানীয় লোকদের সাথে কত ঘন ঘন আপনার যোগাযোগ করার প্রয়োজন হয়? কী কী উপলক্ষে যোগাযোগের প্রয়োজন হয়?
- we know that because of your position in the society, people come to you for a variety of purposes? আমরা জানি যে সমাজে আপনার অবস্থানের কারণে লোকেরা বিভিন্ন উদ্দেশ্যে আপনার কাছে আসে-
  - what are most recurrent reasons for their visit? কী কী কারণে তারা সবচেয়ে বেশি আসে?
  - what suggestions and help they mostly seek? তারা বেশিরভাগ কী কী পরামর্শ বা সহযোগিতা চায়?

### **Public Health Situation জনস্বাস্থ্য পরিস্থিতি**

- how is the overall public health situation here? এখানে সামগ্রিকভাবে জনস্বাস্থ্য পরিস্থিতি কেমন?
- what are the good parts of it here? এখানে এর ভালো দিকগুলো কী কী?
- what are not so good parts? কোনগুলো ভালো দিক নয়?
- how are the people in terms of health consciousness? স্বাস্থ্য সচেতনতার দিক থেকে এখানকার লোকেরা কেমন?

### **Sanitation Scenario স্যানিটেশন পরিস্থিতি**

- how is the overall scenario? সামগ্রিক পরিস্থিতি কেমন?
- how conscious are the people? মানুষ কতটা সচেতন?
- how much is the government coverage of sanitary latrine? সরকারের দেওয়া স্যানিটারী ল্যাট্রিনের সংখ্যা কত শতাংশ?
- how are NGOs contributing? এনজিওগুলো কীভাবে অবদান রাখছে?
- are there any people who do not use sanitation facility? if so, why do you think about the reason? আপনাদের এলাকায় এমন কোন মানুষ আছে যারা স্যানিটেশন সুবিধা ব্যবহার করে না? যদি তা হয় তবে এর কারণ সম্পর্কে আপনি কি মনে করেন?
- What would you do to keep latrine clean? ল্যাট্রিন পরিষ্কার রাখতে আপনারা কী করেন?
- if some people come to you to understand what hygienic latrine means, what would you say? যদি কিছু লোক আপনার কাছে স্বাস্থ্যসম্মত ল্যাট্রিনের অর্থ বোঝার জন্য আসে, তাহলে আপনি কী বলবেন?
- Is there any impact on the sanitation situation after the influx? রোহিঙ্গারা আসার পর কি স্যানিটেশন পরিস্থিতির উপর কোনো প্রভাব পড়েছে?
- Do the students in this school have access to sanitary latrine? এই বিদ্যালয়ের শিক্ষার্থীদের কি স্যানিটারী ল্যাট্রিন ব্যবহার করার সুযোগ আছে?
- What is the current condition of the latrines? ল্যাট্রিনগুলোর বর্তমান অবস্থা কেমন?

## Emptying Pit পিট খালি করা

- how serious is the school authority in emptying the pit in time? সময়মতো পিট খালি করার ক্ষেত্রে স্কুল কর্তৃপক্ষ কতটা আন্তরিক?
- how well do they know when the pit needs to be emptied? what are the signs do they need to follow to do it in time? কখন পিট খালি করতে হবে সে ব্যাপারে তারা কতটা ভালো জানে? এটি সময় মতো করার জন্য তাদের কী কী লক্ষণ খেয়াল করতে হয়?
- when the pit is filled, what they do temporarily? পিট পূর্ণ হয়ে গেলে তারা অস্থায়ীভাবে কী করে?
- what they do eventually? তারা শেষ পর্যন্ত কী করে?
- is there instances when the students of your school abandon a latrine? why do they do such thing? আপনার স্কুলের শিক্ষার্থীদের ল্যাট্রিন পরিত্যাগ করার বা ব্যবহার করা বাদ দেওয়ার কোনো উদাহরণ আছে কি? তারা কেন এমন কাজ করে?
- what do you do to promote timely pit emptying to them? সময়মতো পিটগুলো খালি করার জন্য আপনি কী করেন?

## Handwashing হাতধোয়া

- how important do you think is handwashing a concern among the students of your school? আপনার বিদ্যালয়ের শিক্ষার্থীদের মধ্যে হাত ধোয়া নিয়ে চিন্তা করার বিষয়টি কতটা গুরুত্বপূর্ণ বলে আপনি মনে করেন?
- do the students of your school suffer from diseases because of lack of seriousness in handwashing? can you please give us an example? হাত ধোয়ার ক্ষেত্রে গুরুত্ব না দেওয়ার কারণে আপনার স্কুলের শিক্ষার্থীরা কি রোগে ভুগছেন? আপনি দয়া করে আমাদের একটি উদাহরণ দিতে পারেন?
- what do you do to promote handwashing in particular times to them? তাদের কাছে বিশেষ বিশেষ সময়ে হাত ধোয়ার বিষয়ে প্রচার করার জন্য আপনি কী করেন?
- which times would you advise them to definitely wash hand? NOTE THE CRITICAL OCCASIONS MENTIONED কোন সময় অবশ্যই হাত ধোয়ার জন্য আপনি তাদেরকে পরামর্শ দেন? সবচেয়ে গুরুত্বপূর্ণ যে সব সময়ের কথা বলবেন সেগুলো নোট করুন
- what other times may also be important? অন্য আর কোন কোন সময়ও গুরুত্বপূর্ণ?
- what are items they use for handwashing? তারা হাত ধোয়ার জন্য কোন কোন জিনিস ব্যবহার করে?
- based on the overall economic situation do you think it is a challenge for them to buy soaps? সামগ্রিক অর্থনৈতিক পরিস্থিতির কথা চিন্তা করে আপনি কি মনে করেন যে সাবান কেনা তাদের পক্ষে কঠিন?
- if so, what do you suggest them to use instead as an affordable solution? যদি তাই হয়, তাহলে সাবানের পরিবর্তে কম খরচে হাত ধোয়ার জন্য তাদেরকে কী ব্যবহার করার পরামর্শ দিচ্ছেন?

## Menstrual Management (only for Sufia Gov. school and Kobra Madrasa) মাসিক ব্যবস্থাপনা শুধুমাত্র সুফিয়া সরকারী বিদ্যালয় এবং কোবরা মাদ্রাসার জন্য

- how comfortable do you feel when you think about adolescent girls' menstrual health? আপনি যখন কিশোরীদের মাসিক সংক্রান্ত স্বাস্থ্যের কথা চিন্তা করেন তখন কতটা স্বাচ্ছন্দ্য বোধ করেন?
- how comfortable are they about this biological phenomenon in this society? তারা এই বিষয় নিয়ে কথা বলতে কতটা স্বাচ্ছন্দ্যবোধ করেন?

- tell me the situation shedding light on economical, mindset and infrastructural situations with regards to using sanitary napkin and other products? স্যানিটারি ন্যাপকিন এবং অন্যান্য পণ্য ব্যবহারের ক্ষেত্রে আর্থিক, মানসিকতা এবং অবকাঠামোগত অবস্থার আলোকে পরিস্থিতির কথা আমাকে বলুন?
- does this somehow impact mobility of the girls during period now? এটি কি এখন পিরিয়ডের সময় মেয়েদের চলাফেরায় প্রভাব ফেলে?
- where do they learn from about hygienic menstrual practices and products? মাসিকের সময় পরিষ্কার-পরিচ্ছন্ন থাকা এবং মাসিকের কী ব্যবহার করতে হবে সে ব্যাপারে তারা কোথা থেকে বা কার কাছ থেকে জানতে পারে?
- how is situation in schools here regarding a safe and comfortable place for changing the pad? এখানে স্কুলে কি তারা নিরাপদে এবং চিন্তামুক্তভাবে প্যাড পরিবর্তন করতে পারে, অর্থাৎ প্যাড পরিবর্তন করার জন্য স্কুলের পরিস্থিতি কেমন?
- how available are the products? মাসিকের সময় তারা যে সব পণ্য ব্যবহার করে সেগুলো পাওয়া কতটা সহজ?
- how comfortable is the situation for the girls in availing or purchasing the products? মাসিকের সময় যে সব পণ্য ব্যবহার করা হয় সে সব পণ্য পাওয়া বা কেনার ক্ষেত্রে মেয়েদের পরিস্থিতি কতটা স্বাচ্ছন্দ্যময় বা স্বস্তিদায়ক?

### **(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- As a teacher, people in the community respects you, listen to you, take suggestion from you. Were you consulted on the location and design of infrastructure related to WASH? Did the project team consult on the location and design of infrastructure related to sanitation? If you are consulted now, what suggestions would you provide on the location and design of infrastructure related to water and sanitation? শিক্ষক হিসাবে সম্প্রদায়ের লোকেরা আপনাকে শ্রদ্ধা করে, আপনার কথা শোনেন, আপনার কাছ থেকে পরামর্শ নেয়। আপনার এলাকার লোকদের থেকে কি পানি বা ল্যাট্রিন এর সাথে সম্পর্কিত অবকাঠামোর অবস্থান এবং নকশার বিষয়ে কেউ কোন পরামর্শ নিয়েছে? প্রকল্প দলটি স্যানিটেশন সম্পর্কিত অবকাঠামোর অবস্থান এবং নকশার বিষয়ে পরামর্শ নিয়েছিল? যদি এখনই আপনার সাথে পরামর্শ করা হয় তবে আপনি পানি এবং স্যানিটেশন সম্পর্কিত অবকাঠামোর অবস্থান এবং নকশার বিষয়ে কি ধরনের পরামর্শ প্রদান করবেন?

### **(CHS\_3) IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?**

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- Do you think, the information distributed related to water, sanitation and hygiene, it will help to strengthen communities' and local capacities? How? Do you think, the information will support the people in the community to face the water, sanitation and hygiene related challenges in the long run? Why do you think so? আপনি কী মনে করেন, পানি, স্যানিটেশন এবং হাইজিন সম্পর্কিত যে তথ্য বিতরণ করা হয়েছে, তা এলাকার মানুষের সক্ষমতা বৃদ্ধি করতে সহায়তা করবে? কীভাবে? আপনি কি মনে করেন, এই তথ্য দীর্ঘস্থায়ীভাবে পানি, স্যানিটেশন এবং স্বাস্থ্যবিধি সম্পর্কিত সমস্যাগুলো মোকাবেলায় এলাকার মানুষের সহায়তা করবে? কেন আপনি এমনটা মনে করেন?
- According to you, what are the main barriers to involve local actors in the WASH related activities? How this can be overcome? আপনার মতে, পানি বা ল্যাট্রিন সম্পর্কিত কার্যক্রমগুলিতে স্থানীয় লোকদের জড়িত করার প্রধান বাধাগুলি কী? কীভাবে এটি কাটিয়ে ওঠা যায়?
- Do you think, this project contribute to ease the tension between host communities and Myanmar refugees? How? আপনি কি মনে করেন, এই প্রকল্পটি হোস্ট সম্প্রদায় এবং মায়ানমার শরণার্থীদের মধ্যে উত্তেজনা লাঘব করতে অবদান রাখবে? কীভাবে?

#### **(CHS\_4) IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Did you share your opinion about the location and design of the WASH facilities? Was the feedback from you incorporated into the project design? আপনি বা এলাকার লোক কি পানি বা ল্যাট্রিন এর কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিলেন? আপনি কি ‘ওয়াশ’ ফ্যাসিলিটিজের অবস্থান এবং নকশা সম্পর্কে আপনার মতামত দিতে পেরেছিলেন? আপনার কাছ থেকে প্রাপ্ত মতামত কি প্রকল্পে অন্তর্ভুক্ত করা হয়েছিল?

**(CHS\_5) ARE FEEDBACK WELCOME AND ADDRESSED? মতামত কি নেয়া হয় এবং সমাধান করা হয়?**

- Do you know how to share a feedback for this project if you have any? Did you share any feedback or observation during the implementation of the project? What are those feedback or observations? Can you give some example? Were the feedback or observations addressed properly? How was those addressed or why those were not addressed? আপনি কি জানেন এই প্রকল্পের জন্য কোনও মতামত কীভাবে করতে হয়? প্রকল্পটি বাস্তবায়নের সময় আপনার কোনো মতামত বা পর্যবেক্ষণ ছিল কি? মতামত বা পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? মতামত বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

**(CHS\_7) ARE HUMANITARIAN ACTORS CONTINUOUSLY LEARNING AND IMPROVING? যারা মানবিক কাজ করছে তারা কি ধারাবাহিকভাবে শিখছে এবং উন্নতি করছে?**

- Since the beginning of the project, have you noticed any modifications based on your feedback, or complaint? If yes, could you please explain how the changes made? প্রকল্পের শুরু থেকে, আপনাদের মতামত, পরামর্শ অথবা মতামত এর উপর ভিত্তি করে প্রকল্পে কোনো পরিবর্তন হয়েছে কি? যদি হ্যাঁ হয়, তাহলে আপনি কি দয়া করে বলতে পারেন, পরিবর্তনগুলো কি কি ?

**End the interview by thanking respondent for his/her valuable time and responses.**

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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# Key Stakeholder Interview (KII) Guide for Implementing NGO for WASH

## Introduction ভূমিকা/পরিচিতি

Salam/adab. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on WASH in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about WASH in your project area.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 45 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, স্যানিটেশন এবং স্বাস্থ্যবিধি সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি। প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের এলাকার পানি, স্যানিটেশন এবং স্বাস্থ্যবিধি সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৪৫ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

### Note to the Moderator মডারেটরের জন্য নোট

- Please probe for details where required যেখানে প্রয়োজন, বিস্তারিত বোঝার জন্য প্রোব করুন।
- Please frame your questions depending on the type of activities the project has দয়া করে প্রজেক্ট এর কার্যক্রম অনুযায়ী প্রশ্ন করুন।

### General Questions

- Overall, what are the challenges have you noticed for the WASH situation of your project location? সামগ্রিকভাবে, আপনার প্রকল্প এলাকায় ‘ওয়াশ (পানি, ল্যাট্রিন এবং হাইজিন)’ পরিস্থিতির জন্য আপনি কী কী চ্যালেঞ্জ লক্ষ্য করেছেন?
- How optimistic are you that the project will address the WASH related problems properly? প্রকল্পটি ‘ওয়াশ’ সম্পর্কিত সমস্যাগুলি সঠিকভাবে মোকাবেলা করবে বলে আপনি কতটা আশাবাদী?
- Did you see any visible changes throughout the project? আপনি কি পুরো প্রকল্প জুড়ে কোনো দৃশ্যমান পরিবর্তন দেখতে পেয়েছেন?
- What % of the project has been completed so far? How the project can carry it forward in the future? এখন পর্যন্ত প্রকল্পের কত শতাংশ শেষ হয়েছে? ভবিষ্যতেও এই প্রকল্প কীভাবে চলবে বলে আপনি মনে করেন?
- Can you tell us if there is anything which are not going well? আপনার মতে এই প্রকল্পের অগ্রগতিতে এমন কিছু আছে, যা নিয়ে আপনি উদ্বিগ্ন, বা আপনার কাছে মনে হচ্ছে এটা ঠিকভাবে চলছে না।
- What about the security situation in the project area related to WASH? Do the women in the community feel comfortable to use the WASH facilities? Are there any concerns? How is AAR planning to address them? প্রকল্প এলাকার ওয়াশ (পানি, ল্যাট্রিন এবং হাইজিন) সম্পর্কিত নিরাপত্তা পরিস্থিতি সম্পর্কে আপনার ধারণা কি? আপনার এলাকার মহিলা কি স্বাস্থ্যদেয় ওয়াশ (পানি, ল্যাট্রিন এবং হাইজিন) সুবিধা ব্যবহার করতে পারে? আপনার নিজের এই ব্যাপারে কোন উদ্বেগ আছে কি? এএআর তাদের কীভাবে সমাধান করার পরিকল্পনা করছে?

### IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?

#### মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- How the target was set for the project? Did you conduct any need assessment to understand the needs of the community people in this area? How was the need assessment conducted? Do you think the project addressed the needs of the project beneficiaries in a consistent manner as per project design? If not, what should have been done instead? (**probe for students and households separately**) প্রকল্পের জন্য কীভাবে লক্ষ্য নির্ধারণ করা হয়েছিল? এই ক্যাম্পে স্থানীয় লোকদের চাহিদা বোঝার জন্য আপনারা কি কোনো প্রয়োজনের নিড অ্যাসেসমেন্ট করেছিলেন? নিড অ্যাসেসমেন্ট কীভাবে করা হয়েছিল? আপনার কি মনে হয় প্রকল্পের পরিকল্পনা অনুযায়ী প্রকল্পটি ধারাবাহিকভাবে প্রকল্পের সুবিধাভোগীদের প্রয়োজন মেটাতে পারছে? যদি না হয়, তাহলে এর পরিবর্তে কী করা উচিত ছিল? (**স্কুলের ছাত্র ও স্থানীয় মানুষদের জন্য আলাদা ভাবে প্রোব করুন**)
- Till now do you think the project was relevant to needs of the project beneficiaries? Why do you think so? What could have been done to design the project more relevant to the needs of the project beneficiaries? Have you noticed any difference among female students specially in case of MHM? How did you address those? আপনি কি মনে করেন যে প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে সম্পর্কিত ছিল? আপনি কেন এমনটি মনে করছেন? প্রকল্পটি প্রকল্পের সুবিধাভোগীদের প্রয়োজনের সাথে আরও সম্পর্কযুক্ত ডিজাইন করার জন্য কী করা যেত? আপনি কি ছাত্রীদের মাসিক ব্যবস্থাপনার ক্ষেত্রে বিশেষত মেয়ে শিক্ষার্থীদের মধ্যে কোনও পার্থক্য লক্ষ্য করেছেন কি? আপনারা কিভাবে এর সমাধান করেছেন?
- Was there any change made in the project plan during the implementation of the project? Why the changes were necessary? Was there any change made due to the COVID-19 outbreak? What were the changes? How did it impact on the overall project? প্রকল্পটি বাস্তবায়নের সময় কি প্রকল্পের পরিকল্পনায় কোনো পরিবর্তন আনা হয়েছিল? কেন পরিবর্তন করার প্রয়োজন হয়েছিল? কোভিড-19 বা করোনানাভাইরাসের প্রাদুর্ভাবের কারণে কি কোনো পরিবর্তন করা হয়েছিল? কী কী পরিবর্তন করা হয়েছিল? এটি সামগ্রিক প্রকল্পে কীভাবে প্রভাব ফেলেছিল?

- Do you think the project design was appropriate for meeting the need by gender, age, and people with disability? Did you have a separate plan to address the need for people with disability? Did you make any special plan for women to use the wash facilities at night? Can the women and people with disability use the wash facilities at night or during monsoon season safely? আপনি কি মনে করেন প্রকল্পের নকশাটি নারী-পুরুষ, বয়স্ক এবং প্রতিবন্ধীদের চাহিদা পূরণের জন্য যথাযথ ছিল? প্রতিবন্ধী লোকদের প্রয়োজন মিটানোর জন্য আপনারা কি আলাদা কোনো পরিকল্পনা ছিল? রাতের বেলায় নারীদের জন্য পানির উৎস এবং ল্যাট্রিন/ওয়াশ ফ্যাসিলিটিজ ব্যবহার করার জন্য আপনারা কি কোনো বিশেষ পরিকল্পনা করেছিলেন? রাতের বেলায় অথবা যে কোনো বৃষ্টির সময় নারী ও প্রতিবন্ধীরা কি পানির উৎস এবং ল্যাট্রিন/ওয়াশ ফ্যাসিলিটিজ ব্যবহার করতে পারে?
- Did you consider any safety factors (e.g. ramp, rope, floor on the way) while implementing the project? Did you consider the privacy required for different vulnerable people, especially women while using the community latrine or common bathing cubicle? প্রকল্পটি বাস্তবায়ন করার সময় আপনারা কি কোনো সুরক্ষা (যেমন রাম্প, দড়ি, রাস্তা) বা সেফটি ফ্যাক্টরের কথা বিবেচনা করেছিলেন? আপনারা কি বিভিন্ন ঝুঁকিগ্রস্ত লোকের জন্য প্রয়োজনীয় গোপনীয়তার কথা বিবেচনা করেছিলেন, বিশেষ করে নারীদের কথা যখন তারা অনেক লোক ব্যবহার করে এমন ল্যাট্রিন বা গোসলখানা ব্যবহার করেন?

### IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?

মানবিক সাড়া কার্যকর এবং সময়োপযোগী?

- What are the differences the project has made to individuals targeted and the wider community? How the project has addressed different needs of women, students and female students? একটি প্রকল্প এলাকায় বিভিন্ন ধরনের লোক থাকে। প্রকল্পটি কিভাবে বিভিন্ন ব্যক্তি এবং বৃহত্তর সম্প্রদায়ের প্রয়োজন অনুযায়ী বাস্তবায়িত হচ্ছে? প্রকল্পটি কীভাবে নারী, ছাত্র ও ছাত্রীদের বিভিন্ন প্রয়োজনকে সামনে রেখে বাস্তবায়িত হচ্ছে?
- How was the teacher targeted for the project? How the teachers contributed to the project? আপনারা শিক্ষকদের কিভাবে প্রকল্পের আওতায় নিয়ে আসলেন। শিক্ষকরা কিভাবে এই প্রকল্পে অবদান রাখছেন?
- What were the major factors influencing the achievement or non-achievement of the objectives? উদ্দেশ্যগুলি অর্জন করা বা অর্জন না করাকে প্রভাবিত করার প্রধান কারণগুলি কী ছিল?

### IS HUMANITARIAN RESPONSE STRENGTHENING LOCAL CAPACITIES AND AVOIDING NEGATIVE EFFECTS?

মানবিক সাড়া কি স্থানীয় সক্ষমতা (ক্যাপাসিটি) শক্তিশালী করছে এবং নেতিবাচক প্রভাব থেকে মুক্তি দিচ্ছে?

- As you have disseminated some information regarding WASH and COVID 19 among community people, how did you select them? How did you see the response from the community people? Did you see same response from all respondent type including male, female, students and teacher? Do you think they will be able to use the information in the future? (**probe for students, teachers and households separately**) আপনি এলাকার লোকদের মধ্যে ওয়াশ এবং কভিড ১৯ সম্পর্কিত কিছু তথ্য প্রদান করেছেন, আপনি তাদের কীভাবে নির্বাচন করেছেন? আপনি লোকদের মাঝে কেমন প্রতিক্রিয়া দেখলেন? আপনি কি পুরুষ, মহিলা, ছাত্র এবং শিক্ষক সহ সকল ধরনের লোকদের মাঝে একই রকম প্রতিক্রিয়া দেখেছেন? আপনি কি ভাবেন যে তারা ভবিষ্যতে তথ্য ব্যবহার করতে সক্ষম হবেন? (**স্কুলের ছাত্র, শিক্ষক ও স্থানীয় মানুষদের জন্য আলাদা ভাবে প্রোব করুন**)
- What measures have you taken to make the project sustainable in the long run? Can you please share some example? প্রকল্পটি দীর্ঘকালীন সময়ের জন্য টেকসই করতে আপনারা কী ব্যবস্থা নিয়েছেন? আপনি কি কিছু উদাহরণ দিতে পারেন?
- Were there any social, political, environmental, and economic factors that have an impact on the project? What are those? Was the influx of the Rohingya people an issue to implement the project? What were those? প্রকল্পটির উপর প্রভাব রয়েছে এমন কোনো সামাজিক, রাজনৈতিক, পরিবেশগত এবং আর্থিক বিষয় ছিল কি? (যদি থাকে) সেগুলো কী কী? প্রকল্পটি বাস্তবায়নের জন্য রোহিঙ্গাদের আগমন কি কোনো সমস্যা ছিল? (যদি থাকে) কি কি সমস্যা ছিল?
- What is the perception of the people of the host to Rohingya community? Do you think the project contributes to ease the tension between the host community and the Rohingya community? Why do you think so? What steps can be taken to improve the perception of people of the host towards the Rohingya community? রোহিঙ্গা জনগোষ্ঠীর সম্পর্কে স্থানীয় লোকদের ধারণা কী? আপনি কি মনে করেন যে প্রকল্পটি স্থানীয় লোক এবং রোহিঙ্গা সম্প্রদায়ের

মধ্যে উত্তেজনা হ্রাস করতে অবদান রাখবে? কেন আপনি এমনটা মনে করছেন? রোহিঙ্গা জনগোষ্ঠীর প্রতি হোস্টের ধারণার উন্নতি করতে কি কি পদক্ষেপ নেওয়া যেতে পারে?

## **IS HUMANITARIAN RESPONSE BASED ON COMMUNICATION, PARTICIPATION AND FEEDBACK?**

মানবিক প্রতিক্রিয়া কি যোগাযোগ, অংশগ্রহণ এবং প্রতিক্রিয়া ভিত্তিক?

- Were the beneficiaries able to provide feedback throughout the different stages of program? Did they share their opinion about the location and design of the WASH facilities? সুবিধাভোগীরা কি কর্মসূচির বিভিন্ন পর্যায়ে প্রতিক্রিয়া জানাতে পেরেছিল? তারা কি ‘ওয়াশ’ ফ্যাসিলিটিজের অবস্থান এবং নকশা সম্পর্কে তাদের মতামত দিতে পেরেছিল? Was the feedback from beneficiaries able to be incorporated into the project design? Why/why not? Did you have to change the location or design of the WASH facilities? What were the enabling/ hindering factors for this? সুবিধাভোগীদের কাছ থেকে প্রাপ্ত ফিডব্যাক কি প্রকল্পের নকশায় অন্তর্ভুক্ত করা হয়েছিল? কেন করা হয়েছিল/কেন করা হয়নি? আপনাদের কি ‘ওয়াশ’ ফ্যাসিলিটিজগুলোর অবস্থান বা নকশা পরিবর্তন করতে হয়েছিল? এর জন্য কী করা হয়েছিল বা বাধাগুলো কী ছিল?

## **ARE COMPLAINTS WELCOME AND ADDRESSED? অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?**

- Did targeted beneficiaries feel safe and trusted the confidentiality when communicating with NGO Forum staff? এনজিও ফোরামের কর্মীদের সাথে সম্পর্কিত স্টেকহোল্ডারদের সাথে যোগাযোগ করার সময় সুবিধাভোগীরা কী নিরাপদ বোধ করে এবং গোপনীয়তায় বিশ্বাস করে?
- Did they share any complaints or observation during the implementation of the project? What are those complaints or observations? Can you give some example? Were the complaints or observations addressed properly? How was those addressed or why those were not addressed? প্রকল্পটি বাস্তবায়নের সময় তাদের কোনো অভিযোগ বা পর্যবেক্ষণ ছিল কি? অভিযোগ বা পর্যবেক্ষণগুলো কী ছিল? আপনি কি কয়েকটির কথা বলতে পারেন? অভিযোগ বা পর্যবেক্ষণ কি সঠিকভাবে সমাধান করা হয়েছিল? সেগুলো কীভাবে সমাধান করা হয়েছিল বা সেগুলো কেন সমাধান করা হয়নি?

## **IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- How were you engaged with the local opinion leaders including chairman or member of union council? Did you have to keep in touch with other local government authorities while implementing the project? Did the local opinion leaders including chairman or member of union council and/or local government authorities provided their feedback on the project? How was the feedback addressed? আপনারা কীভাবে ইউনিয়নের চেয়ারম্যান বা মেম্বার দের এই প্রকল্পের সাথে জড়িত করেছিলেন? প্রকল্পটি বাস্তবায়নের সময় আপনাদের কি অন্যান্য স্থানীয় সরকার কর্তৃপক্ষের সাথে যোগাযোগ রাখতে হয়েছিল? ইউনিয়নের চেয়ারম্যান বা মেম্বাররা বা স্থানীয় সরকার কর্তৃপক্ষ কি প্রকল্পটি সম্পর্কে তাদের ফিডব্যাক বা মতামত দিয়েছিল? তাদের দেওয়া ফিডব্যাক কীভাবে কাজে লাগানো হয়েছিল?
- Has the project complemented and been compatible with government approach? প্রকল্পটি কি সরকারী উদ্যোগ এর সাথে পরিপূরক এবং সামঞ্জস্যপূর্ণ হয়েছে?
- Is there any other NGOs implementing similar project in your project area? If yes, how did you coordinate and complement its interventions with others? আপনাদের প্রকল্প এলাকায় কি অন্য কোনো এনজিও একই



রকম প্রকল্প বাস্তবায়ন করছে? যদি হ্যাঁ হয়, তাহলে আপনারা কীভাবে অন্যদের সাথে এটার সমন্বয় এবং পরিপূরক করেছিলেন?

### **ARE HUMANITARIAN ACTORS CONTINUOUSLY LEARNING AND IMPROVING?**

যারা মানবিক কাজ করছে তারা কি ধারাবাহিকভাবে শিখছে এবং উন্নতি করছে?

- Since the beginning of the project, have you made any modifications because of monitoring, feedback, or complaint-handling? If yes, could you please explain how the changes made had positive / negative effects to the achievement of the outputs & outcomes? প্রকল্পের শুরু থেকে, আপনারা কী পর্যবেক্ষণ, ফিডব্যাক বা মতামত, অথবা অভিযোগ নিষ্পত্তি করার কারণে কোনো পরিবর্তন করেছেন? যদি হ্যাঁ হয়, তাহলে আপনি কি দয়া করে বলতে পারেন, পরিবর্তনগুলো যেভাবে করা হয়েছিল তাতে আউটপুট এবং ফলাফল অর্জনে ইতিবাচক বা নেতিবাচক প্রভাব ফেলেছিল?

### **ARE STAFF SUPPORTED TO DO THEIR JOB EFFECTIVELY, AND ARE THEY TREATED FAIRLY AND EQUITABLY?**

স্টাফরা কি তাদের কাজ সাফল্যের সাথে করতে পারে এবং তাদের সাথে কি নিরপেক্ষভাবে এবং ন্যায়সঙ্গতভাবে আচরণ করা হয়?

- How much happy are you with the expertise and competencies of your project staff to implement the project? Did they have sufficient knowledge of the context, and WASH? Have they gone through any training before implementing the project? প্রকল্পটি বাস্তবায়নে আপনাদের প্রকল্প কর্মীদের অভিজ্ঞতা এবং দক্ষতা নিয়ে আপনি কতটা খুশি? তাদের কি কনটেক্সট, পানি, স্যানিটেশন এবং স্বাস্থ্যবিধি সম্পর্কিত বিষয়ে যথেষ্ট জ্ঞান আছে? তাদের কি কোন প্রশিক্ষণ দেয়া হয়েছিল?

### **ARE RESOURCES MANAGED AND USED RESPONSIBLY FOR THEIR INTENDED PURPOSE?**

তাদের অন্তর্নিহিত উদ্দেশ্যের জন্য কি রিসোর্স পরিচালনা করা হয় এবং প্রতিক্রিয়া ব্যবহার করা হয়?

- How much happy are you with the budget spent against plan? পরিকল্পনার জন্য ব্যয় করা বাজেটে আপনি কতটা খুশি?
- How the most recent audit recommendations have been addressed? সর্বশেষ অডিটে সুপারিশগুলোকে কীভাবে অ্যাড্রেস করা হয়েছে?
- How Value for Money was achieved through effective procurement and contracting? কার্যকর কেনাকাটা এবং চুক্তির মাধ্যমে কীভাবে টাকা উসুল হয়েছিল?
- How well were the inputs (funds, people, materials, and time) used to produce results? সুফল পেতে ইনপুটগুলো (তহবিল, লোক, উপকরণ এবং সময়) কতটা ভালোভাবে ব্যবহার করা হয়েছিল?
- Was the impact on the environment considered when using local and natural resources? স্থানীয় এবং প্রাকৃতিক সম্পদ ব্যবহার করার সময় কি পরিবেশের উপর প্রভাব বিবেচনা করা হয়েছিল?

End the interview by thanking respondent for his/her valuable time and responses.

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

## KII Guide for Sub Assistant Engineer (SAE)

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## KII Guide for Sub Assistant Engineer (SAE)

### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলো।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about water, sanitation and hygiene in your area.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 30 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুয়ালাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি। প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনাদের ক্যাম্প এর পানি, ল্যাট্রিন এবং হাইজিন সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

- First of all could you please define your role as Sub Assistant Engineer (SAE)? What role do you have to play in WASH sector? Could you please define your role in this project implemented by AAR? Please tell the details. প্রথমেই আমরা আপনার কাছে জানতে চাইব, উপ সহকারী প্রকৌশলী হিসেবে আপনাকে কি কি দায়িত্ব পালন করতে হয়? আপনাকে

পানি, ল্যাট্রিন এবং হাইজিন সম্পর্কিত কি কি দায়িত্ব পালন করতে হয়? এএআর যেই প্রকল্পটি বাস্তবায়ন করেছে, সে ক্ষেত্রে আপনার এর ভূমিকা কি ছিল?

- How would you describe the current situation of water, latrine and hygiene at Nhila union?. নিলা ইউনিয়নে আপনি পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) এর বর্তমান পরিস্থিতি কে কিভাবে বর্ণনা করবেন?
- What were the common problems for the residents of these union regarding water, latrines and hygiene services? Please tell the details. আপনার জানা মতে, এই এলাকার অধিবাসীদের জন্য পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) সেবা সম্পর্কিত সাধারণত কী কী সমস্যা ছিল? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes in the problems related to water, latrines and hygiene services for the residents of this area since the project was implemented? What changes have you noticed? Anything else? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই এলাকার অধিবাসীদের জন্য পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) সেবা সম্পর্কিত সমস্যার ক্ষেত্রে কি কোনো পরিবর্তন আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? আর কিছু? দয়া করে বিস্তারিত বলুন।
- Do you provide any recommendations to the implementation NGO regarding the construction or repair of the WASH facilities in the project area? What type of recommendation do you provide? (**Please probe for design, location, materials etc.**). Did you provide any recommendation to the implementation partners regarding addition of extra features at the WASH facilities to support people with disability or elderly people? Please tell me in details. আপনি প্রকল্পের এলাকায় WASH সুবিধাগুলি নির্মাণ বা মেরামতের বিষয়ে বাস্তবায়নকারী এনজিওগুলিকে কোনও সুপারিশ সরবরাহ করেছেন কি? আপনি কি ধরনের সুপারিশ করেছিলেন? (**দয়া করে নকশা, অবস্থান, উপকরণ ইত্যাদি সম্পর্কে প্রোব করুন**)। প্রতিবন্ধী ব্যক্তি বা বয়স্ক ব্যক্তিদের সহায়তার জন্য আপনি ওয়াশ সুবিধাগুলিতে অতিরিক্ত কোন কিছু সংযোজন সম্পর্কিত কোনও পরামর্শ কি আপনি এনজিওদের দিয়েছেন? বিস্তারিত আমাকে বলুন।

## **(CHS\_1) IS HUMANITARIAN RESPONSE APPROPRIATE AND RELEVANT?**

মানবিক সাড়া কি যথাযথ এবং প্রাসঙ্গিক?

- As per your best knowledge was there a need assessment to understand the needs of the community in this area? How was the Need Assessment done? Was the need assessment report shared with you? Please tell me in details আপনার জানা মতে এই ক্যাম্পে রোহিঙ্গা কমিউনিটির চাহিদা বোঝার জন্য কি কোনো নিড অ্যাসেসমেন্ট হয়েছিল? নিড অ্যাসেসমেন্ট কীভাবে করা হয়েছিল? নিড অ্যাসেসমেন্ট রিপোর্ট কি আপনার সাথে শেয়ার করা হয়েছিল? আপনি কি স্থানীয় জনগণের প্রয়োজন মেটাতে ওয়াশ সুবিধাগুলির নকশা বা অবস্থানের কোনও পরিবর্তন করেছেন কি? আমাকে বিস্তারিত বলুন
- Was there any change made due to the COVID-19 outbreak? What were the changes? How did this change affect the project? কোভিড-19 বা করোনাভাইরাসের প্রাদুর্ভাবের কারণে কি কোনো পরিবর্তন করা হয়েছিল? কী কী পরিবর্তন করা হয়েছিল? এই পরিবর্তন প্রকল্পটির উপরে কীভাবে প্রভাব ফেলেছিল?

## **(CHS\_5) ARE COMPLAINTS WELCOME AND ADDRESSED? অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?**

- Did you receive any complaint from the people in the community or their representative? What are the general complaints they have? How are the complaints addressed? আপনি কি কখনও স্থানীয় জনগোষ্ঠী বা তাদের প্রতিনিধিদের কাছ থেকে কোনও অভিযোগ পেয়েছেন? তাদের যে সাধারণ অভিযোগ রয়েছে তা কী কী? অভিযোগগুলি কীভাবে সমাধান করা হয়?
- Do you visit the project locations for monitoring purpose? What do you check during your visit for monitoring? Do you prepare any report based on your visit? What actions do you take based on your monitoring of the activities or constructions? আপনি কি পর্যবেক্ষণের উদ্দেশ্যে প্রকল্পের স্থান পরিদর্শন করেন? আপনার পরিদর্শনকালে আপনি কী পর্যবেক্ষণ করেন? আপনি কি আপনার পরিদর্শনের উপর ভিত্তি করে কোনও প্রতিবেদন প্রস্তুত করেন? প্রকল্পের কার্যক্রম বা স্থাপনা পর্যবেক্ষণের ভিত্তিতে আপনি কি কি পদক্ষেপ গ্রহণ করেন?

## **CHS\_6) IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Is there any other NGOs implementing similar project in these area? How did the project coordinate and complement its interventions with others? এই এলাকায় কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? প্রকল্পটি কীভাবে অন্য প্রকল্পের সাথে সমন্বয় হয়ে কাজ করছিল?

Do you have any feedback and recommendations to the future projects and programme improvement?

ভবিষ্যতের প্রকল্পগুলি এবং প্রোগ্রামের উন্নতির বিষয়ে আপনার কি কোনো প্রতিক্রিয়া/মন্তব্য এবং সুপারিশ আছে? থাকলে অনুগ্রহ করে বলুন।

*End the interview by thanking respondent for his/her valuable time and responses.*

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

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## KII Guide for Union Council Member

### Note to the Moderator মডারেটরের জন্য নোট

- Please be more than humble with the person you are interviewing আপনি যে ব্যক্তির সাক্ষাত্কার নিচ্ছেন তার সাথে দয়া করে নম্র আচরণ করবেন।
- Make sure any of your behavior or question doesn't offend him/her or put him/her in a uncomfortable situation খেয়াল রাখবেন যে আপনার কোনো আচরণ বা প্রশ্ন তাকে আঘাত না করে বা অস্বস্তিকর পরিস্থিতিতে না ফেলে।
- Give time to make the person comfortable and ask if he needs more time before starting the discussion উত্তরদাতাকে সহজ হওয়ার জন্য সময় দিন এবং আলোচনা শুরু করার আগে তার আরও সময় প্রয়োজন কিনা তা জিজ্ঞাসা করুন।
- Please frame your questions depending on the type of skill the person has দয়া করে উত্তরদাতার দক্ষতার ধরন অনুযায়ী প্রশ্ন করুন।

### Introduction ভূমিকা/পরিচিতি

Assalamu Alaikum. My name is \_\_\_\_\_. I have come from a research firm named Org-Quest Research Limited. We conduct research on various social and business related topics as well as on different products and services. Currently we are conducting a survey on water, sanitation and hygiene in Cox's Bazar.

First of all, I would like to thank you for agreeing to be interviewed. We would like to ask you a few questions about water, sanitation and hygiene in your location.

Your comments and opinions will remain confidential and will only be used for this research, not for any other purpose. Our conversation should take about 60 minutes to complete. With your permission I want to record our conversation on tape. Do you have any questions before we begin?

আসসালামুআলাইকুম, আমার নাম \_\_\_\_\_। আমি ঢাকায় অবস্থিত “ওআরজি-কোয়েস্ট রিসার্চ লিমিটেড” নামক একটি গবেষণা সংস্থা থেকে এসেছি। আমরা বিভিন্ন সামাজিক ও ব্যবসা সম্পর্কিত বিষয়ে এবং পণ্য ও সেবা নিয়ে গবেষণা জরিপ পরিচালনা করে থাকি। বর্তমানে আমরা কক্সবাজার জেলায় পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতার (হাইজিন) সাথে সম্পর্কিত একটি গবেষণা জরিপ পরিচালনা করছি। প্রথমেই, সাক্ষাৎকার দিতে রাজী হওয়ার জন্য আমি আপনাকে ধন্যবাদ জানাতে চাই। আপনারদের এলাকায় এর পানি, ল্যাট্রিন এবং হাইজিন সম্পর্কে আমি আপনার কাছ থেকে জানতে চাইবো।

আপনার দেয়া সমস্ত মন্তব্য এবং মতামতের গোপনীয়তা রক্ষা করা হবে এবং শুধুমাত্র গবেষণার কাজে ব্যবহার করা হবে, অন্য কোনো উদ্দেশ্যে ব্যবহার করা হবে না। আমাদের এই আলোচনাটি শেষ করতে আনুমানিক ৬০ মিনিট সময় লাগবে। আপনার অনুমতি নিয়ে আমাদের আলোচনাটি রেকর্ড করতে চাই। শুরু করার আগে আপনি কি আমার কাছ থেকে আর কিছু জানতে চান?

- Tell me about yourself. How do you spend your time in your daily routine? আপনার নিজের সম্পর্কে বলুন। আপনি প্রতিদিন কীভাবে সময় কাটান?

- You are a union council member in this union. As a union council member what exactly do you have to do in your work area? আপনি তো এই ইউনিয়নের একজন মেম্বর, দয়া করে বলবেন একজন মেম্বর হিসাবে আপনাকে আপনার কর্ম এলাকায় ঠিক কী কী দায়িত্ব পালন করতে হয়?
- Are you involved in a water, latrine and hygiene related activity in your area? Are you involved with this project implemented by AAR and NGO forum What is your role in the project? Please tell the details. আপনি কি এএআর ও এনজিও ফোরাম কর্তৃক বাস্তবায়নকৃত এলাকার পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) প্রকল্পের সাথে জড়িত আছেন? যদি হ্যাঁ হয়, এই এএআর এর প্রকল্পের সাথে আপনি কি জড়িত আছেন? প্রকল্পে আপনার ভূমিকা কি? দয়া করে বিস্তারিত বলুন।
- What were the common problems for the residents of this area regarding water, latrines and hygiene services? Please tell the details. এই এলাকার অধিবাসীদের জন্য পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) সেবা সম্পর্কিত সাধারণত কী কী সমস্যা ছিল? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes or improvement related to water, latrines and hygiene services for the residents of this camp since the project was fully launched? What changes have you noticed? What changes have you noticed? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই ক্যাম্পের অধিবাসীদের জন্য পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) সেবা সম্পর্কিত সমস্যার ক্ষেত্রে কি কোনো পরিবর্তন বা উন্নতি আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? দয়া করে বিস্তারিত বলুন।
- Have you noticed any changes in the behavior of the residents in relation to water, latrines and hygiene services since the project was fully launched? What changes have you noticed? Please tell the details. এই প্রকল্প পুরোপুরি চালু হওয়ার পরে এই এলাকার অধিবাসীদের পানি, ল্যাট্রিন এবং পরিষ্কার-পরিচ্ছন্নতা (হাইজিন) সেবা সম্পর্কিত ব্যবহার বা আচরণের ক্ষেত্রে কি কোনো পরিবর্তন আপনি লক্ষ্য করেছেন? আপনি কি কি পরিবর্তন লক্ষ্য করেছেন? দয়া করে বিস্তারিত বলুন।
- How to select the locations for latrines, bathing cubes or hand washing devices? ল্যাট্রিন, গোসলখানা বা হাত ধোয়ার ব্যবস্থাগুলির জন্য কিভাবে স্থান নির্বাচন করা হয়েছিল?
- Did you think about the safety and privacy of the community people when choosing a place for a latrine, bathroom or hand washing system? ল্যাট্রিন, গোসলখানা বা হাত ধোয়ার ব্যবস্থার জন্য জায়গা নির্বাচন করার সময় আপনি কি এলাকার অধিবাসীদের সুরক্ষা এবং গোপনীয়তার কথা চিন্তা করেছিলেন?

## **(CHS\_2) IS HUMANITARIAN RESPONSE EFFECTIVE AND TIMELY?**

মানবিক সাড়া কার্যকর এবং সময়োপযোগী?

- What are the differences the project has made to individuals targeted and the wider community? How the project has addressed different needs of women and people with disability? একটি প্রকল্প এলাকায় বিভিন্ন ধরনের লোক থাকে। প্রকল্পটি কিভাবে বিভিন্ন ব্যক্তি এবং বৃহত্তর সম্প্রদায়ের প্রয়োজন অনুযায়ী বাস্তবায়িত হচ্ছে? প্রকল্পটি কিভাবে নারী ও প্রতিবন্ধী মানুষের বিভিন্ন প্রয়োজনকে সামনে রেখে বাস্তবায়িত হচ্ছে?

## **(CHS\_5) ARE COMPLAINTS WELCOME AND ADDRESSED? অভিযোগ কি নেয়া হয় এবং সমাধান করা হয়?**

- To what extent were the complaints mechanisms understood, relevant, trusted and appropriate to the context? Can the beneficiaries submit complaints if required? উপকারভোগীদের কোন অভিযোগ থাকলে অভিযোগের প্রক্রিয়াগুলি কতটা সহজ, প্রাসঙ্গিক, বিশ্বাসযোগ্য এবং উপযুক্ত? প্রয়োজনে সুবিধাভোগীরা কি অভিযোগ জমা দিতে পারে?
- Did the beneficiaries share any complaints on the project through you? If yes, please let me know in details? How the complaint was resolved? সুবিধাভোগীরা কি আপনার মাধ্যমে প্রকল্পের ব্যাপারে কোনও অভিযোগ করেছেন? যদি হ্যাঁ, দয়া করে আমাকে বিস্তারিত বলবেন কি? কিভাবে অভিযোগের সমাধান হয়েছিলো?

## **CHS\_6) IS HUMANITARIAN RESPONSE COORDINATED AND COMPLEMENTARY?**

মানবিক সাড়া কি সমন্বিত এবং পরিপূরক?

- Are any other NGOs implementing similar projects in your area of work? How the project is complementing with other project? আপনার কর্ম এলাকায় কি অন্য কোনো এনজিও একই রকম প্রকল্প বাস্তবায়ন করছে? প্রকল্পটি কিভাবে অন্যান্য প্রকল্পের পরিপূরক হিসাবে কাজ করছে?
- As a local government representative, you may also have plan for the development in WASH sector. How the project is complementing with government approach? স্থানীয় সরকার প্রতিনিধি হিসাবে আপনার ওয়াশ সেক্টরের উন্নয়নের জন্য পরিকল্পনা থাকতে পারে। এই প্রকল্পটি কিভাবে সরকারের কার্যক্রমের পরিপূরক হয়?

Do you have any feedback and recommendations to the future projects and programme improvement?

ভবিষ্যতের প্রকল্পগুলি এবং প্রোগ্রামের উন্নতির বিষয়ে আপনার কি কোনো প্রতিক্রিয়া/মন্তব্য এবং সুপারিশ আছে? থাকলে অনুগ্রহ করে বলুন।

*End the interview by thanking respondent for his/her valuable time and responses.*

মূল্যবান সময় এবং মতামত দেয়ার জন্য উত্তরদাতাকে ধন্যবাদ দিয়ে সাক্ষাৎকার শেষ করুন।

### Appendix 3: Evaluation Photos



**Training Session for Enumerators are in progress**



**Enumerators are washing their hands with soap before entering into the training venue**





**Enumerators are conducting the Survey**



**Enumerators are conducting the Survey**