

#	Question and its context	Definitions
iii.	<p># of <i>displaced household arrived/ departed from site</i></p> <p>The presence of persons moving from one location to another to seek safety and assistance is a typical phenomenon during disasters. IDPs may seek accommodation in the Evacuation sites provided indicated by the government (including the Army), in official camps, in host families or may settle spontaneously in areas deemed safe.</p> <p>By virtue of their displacement, IDPs have specific needs and vulnerabilities that need to be taken into consideration. Obtaining information on their number and locations is essential to frame an adequate response.</p>	<p>IDPs are defined as those persons forced or obliged to flee from their homes, “...in particular as a result of or in order to avoid the effects of armed conflicts, situations of generalised violence, violations of human rights or natural or human-made disasters, and who have not crossed an international recognised State border”</p> <p><i>Source: Guiding Principles on Internal Displacement</i></p>
	Place of origin or displacement locality	Information on which Union Council the displaced households either originated from or moved to.
iv.	<p><i>How long are people expecting to be in their present locations due to the disaster?</i></p> <p>The length of displacement of the population may be variable, depending on the situation and the severity of the disaster. As opposed to conflict situation, in situation of natural disasters the displacement may be of shorter duration as persons tend to move more quickly as water recedes. In few situations, however, displacement may become protracted. It is important to understand the possible length of displacement to better understand the issues and needs faced by the population</p>	Present location = village/ area where the Key Informant is located (including camp or settlement)
1	<p><i>Total number of houses (shelters) in this community?</i></p>	
	<p><i>Percentage of houses (shelters) completely damaged (un-liveable)?</i></p> <p>The percentage of destroyed houses indicates the physical damages that have been sustained by the residential buildings in each community.</p>	A destroyed house is one that has been either completely demolished / razed to the ground or one that has sustained such significant damages that it would have to be knocked down to enable it to be rebuilt safely. It would not be possible to live in a destroyed house.
	<p><i>Percentage of houses (shelters) partially damaged (liveable)?</i></p> <p>The percentage of damaged houses indicates the physical damages that have been sustained by the residential buildings in each community</p>	A damaged house is one that has been affected by the natural disaster, but it is still possible to live within the house, for all general purposes. This might include e.g. the roof collapsing, but which can temporarily be repaired with a tarpaulin or cracks in the walls etc.
2	<p><i>Current living conditions (% of population)?</i></p> <p>The current living conditions indicate the immediate needs of the affected population. Areas with significant numbers of families without shelter or with only makeshift shelters should be prioritised by subsequent interventions.</p>	<p>The options can be defined as follows:</p> <p>No Shelter - No materials available to protect the family from the elements</p> <p>Makeshift Shelter - twigs, sticks etc. typically covered by very thin plastic sheeting. Very limited protection from the elements.</p> <p>Shelter made of tarpaulin / bamboo - Sufficient short term protection from the elements and of a sufficient size to shelter the whole family. The shelter consists of poles or bamboos that are lashed or joined together and two tarpaulins which are also tied to the bamboos.</p> <p>Tents - Sufficient short term protection from the elements and of a sufficient size to shelter the whole family.</p> <p>House - Typical shelters including loh-kat, katcha and pukka structures.</p> <p>Host Family - Another family has sufficient additional space to help shelter the family that has been displaced.</p>

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3	<p><i>What % of households have following items</i></p> <p>In addition to the main shelter needs, families may have lost additional items during the natural disaster. With many of these it is also important to bear in mind the context (e.g. additional Blankets in winter).</p> <p>The question is phrased in terms of what proportions of households currently have the following, rather than what proportion of households need the items as the answers provided will better represent the true situation.</p>	<p>The options can be defined as follows:</p> <p>Bedding Mats - Padded mats to sleep on</p> <p>Blankets - Many different technical specifications of blankets are available and are suitable for different climatic conditions.</p> <p>Kitchen Sets - A selection of essential kitchen items, including plates, pots and knives.</p> <p>Solar Lights - Require around 5 hours charging during the day and then provide light adequate for most general purposes for about 8 hours.</p> <p>Hygiene Articles - A selection of key items, including soap, a toothbrush, aquatabs etc.</p> <p>Jerry Cans / Covered pots - Water storage vessels</p> <p>Adequate Fuel and / or Firewood</p> <p>Emergency Shelter - e.g. Tents or Tarpaulins / Bamboo</p> <p>Shelter Toolkits - Kits for repairing structures, cleaning up the mud and help to salvage materials, including a Hand saw, shovel, claw hammer, taghari and strong builders bucket</p> <p>Technical Training - Training to help the affected communities to rebuild their shelters better by themselves, including key aspects of disaster risk reduction so that the shelter better resists future natural disasters.</p>
4	<i>Did the community receive any Early warning message?</i>	Has any warning of the event been communicated to the community ahead of the event from official sources (government, media) – as to ensure appropriate measures could be taken.
5	<i>Percentage of schools/education facilities used for temporary settlement in this community?</i>	Of the total Schools/Education facilities which were providing education how many are used as temporary settlement/ IDP shelter
6	<i>Are other building/facilities available to be used as learning spaces?</i>	Building/ places / transitional places /schools (not damaged) are available in community to start an EIE (Education in Emergency) programme
7	<i># of teachers providing education before and after the event?</i>	# of teachers who were providing education before the emergency /event and after the event
8	<i>Percentage of children (3-18 yrs) going to school? (Before and after for Boys/Girls)</i>	# Male and Female children between 3 to 18 years went to school Before and After the emergency/event
9	<i>What are the main reasons of children being out of school after the event?</i>	Identifying main three reason why children not going to schools after emergency/ event: 1. Safety/security reasons; 2. Roads destroyed; 3. Schools are destroyed/damaged; 4. Schools are occupied by IDP shelters; 5. Children are working; 6. Teachers are not available;. Other
10	<i>Percentage of children whose educational materials have been affected by the emergency?</i>	Of the total children, what % students loss/have no access of school material such as books, pencils, etc.
11	<p><i>What are the main sources of livelihood in the community</i></p> <p>(in % of HH)</p> <p>Sum of all sources should be equal to 100</p>	Agriculture based livelihood should include all agri-based sources including day labouring in agriculture. Whereas day labouring mean non-farm day labours.
12	<p><i>What are the percentage losses to each source of livelihood in the community?</i></p> <p>Each separate source should be out of 100%.</p>	As above

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13	What are the usual crops harvests (staple food)? In mounds	
14	What percent of standing crops are damaged in this community?	
15	What is the average number of poultry and livestock owned by the HH? Poultry/Livestock	
16	What percentage of poultry and livestock was lost in this community? Poultry/Livestock	
17	Are there some signs of animal diseases outbreaks in the community?	<p><i>External-parasites</i> include all type of external diseases like ticks, lice and flies.</p> <p>Whereas <i>Internal-parasite</i> includes all internal worms.</p> <p><i>Respiratory disease</i> include cough, pneumonia etc. Indigestion disease related to stomach and intestine.</p>
18	What percentage of fodder stock has been lost?	
19	Percentage of food stock lost in this community?	
20	For how many days do you think the current food stock is sufficient? Same question posed in Secondary KI interview as to ensure to a gender perspective.	
21	How far is the nearest physically accessible market? Distance in km	
22	Is sufficient food available in the markets? Same question posed in Secondary KI interview as to ensure to a gender perspective.	
23	What percentage of populations has adequate income to buy food? Same question posed in Secondary KI interview as to ensure to a gender perspective.	
24	How many times does the household member eat food in a day on average? Same question posed in Secondary KI interview as to ensure to a gender perspective.	<p>A meal= an instance of eating of prepared food that takes place at a specific time of the day</p> <p>Ensure to record before and after event for comparison</p>
25	Any change in the frequency of solid or semi-solid feeding for children (6-24 months) Same question posed in Secondary KI interview as to ensure to a gender perspective.	<p>Solid= normal cooked food which older people also eat.</p> <p>Semi solid= mashed potatoes, suji ki kheer, dalya, boiled rice etc</p>
26	% of households with children under 2 years received powder milk/infant formula donation? Same question posed in Secondary KI interview as to ensure to a gender perspective.	
27	What percentage of population received food assistance in this community?	
28	For how long is the food aid received sufficient? (number of days) (999=don't know)	
29	Do people in the community face problems in obtaining assistance? If yes, indicate what	The KI states that there has been problem, disturbance issue with the deliver of assistance or not. If yes,

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	<p><i>type of problems</i> (Tick all that apply)</p> <p>In disasters situation, assistance – whether provided by the Government or by the humanitarian community - should reach the beneficiaries according to the principles of humanity, impartiality, independence and should be distributed equitably, exclusively based on needs, be adequate and do not create additional problems to the population in need (“Do No harm”). It is important to detect and signal cases where the distribution of assistance creates problems (e.g. safety or security, including due to social tension), it is conditional to non-humanitarian considerations (e.g. political, social, religious, ethnic), it creates situation of danger for members of the population with specific needs; it is hindered by lack of documentation; or it is distributed in a way that hinders the full participation of various segments of the population.</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>the options will be listed.</p> <ol style="list-style-type: none"> 1. Fighting for all possible reasons, creating an unsafe environment 2. Assistance did not cover all intended beneficiaries 3. Beneficiaries were turned away as not in possession of a valid ID Document (this is important as it will justify an advocacy with NADRA to increase efforts to provide documentation (absent or lost) 4. Exclusion due to deliberate discrimination due to gender, ethnicity, social status, political or religious beliefs 5. Assistance packages are not suitable (e.g. too heavy, inadequate) for persons with specific needs in the community (women, persons with disabilities, elderly) 6. Actors delivering assistance ask for money or other favours in exchange for assistance 7. Assistance is provided to persons that are not affected by the disaster 8. Political authorities, politicians, party representatives are instructing to deliver assistance only to their affiliated or ask for political support as a condition for assistance 9. The assistance is insufficient to cover the needs or inadequate 10-12: the distribution points are not adequately organised to meet the needs of women, elderly, persons with disabilities (no separate queues, difficult access etc.) 13. See above 999. Families are being excluded but the KI does not know why
30	<p><i>a. Is the lack of (C)NIC a problem in your community?</i></p> <p>In situation of disasters, personal documentation is often lost. In addition, lack of personal documentation (CNIC) may be an endemic problem. The possession of personal documentation is an essential measure of legal safety (identification) In addition, although assistance during the first phases of a disaster should not be conditioned to the lack of CNIC, the GoP has adopted this criteria for registration and assistance in conflict-affected areas and for delivery of certain flood-related assistance. The lack of CNIC may be therefore a reason for exclusion or delay in receiving assistance, in addition to a primary security concern.</p> <p><i>b. Do you know the % of people who may need a CNIC?</i></p> <p>An estimation of the population who may need CNIC in the community is useful to advocate with Government service providers (NADRA) for specific initiatives (e.g. mobile clinics).</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>CNIC = Computerised NIC card. The question refers to both CNIC and NIC.</p>
31	<p><i>Who does the community rely on for security?</i></p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>Self explanatory alternatives.</p>
32	<p><i>If there is security concerns affecting the community, what types of concerns/ incidents</i></p>	<p>The KI states that there has been problem, disturbance issue with the deliver of assistance or not. If yes,</p>

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	<p><i>have occurred?</i> (Tick all that apply, if number of cases known specify)</p> <p>During disasters, communities and families are in distress, community links are lost, communities may be displaced and live in precarious situations with lack of space/ privacy/ adequate living conditions. Security problems may arise for the general population and particularly for categories with specific needs such as women, children, elderly, religious and ethnic minorities. Seemingly, existing protection issues may be exacerbated due to the situation.</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>the options will be listed. Also, indicate which groups are affected of the different options.</p> <ol style="list-style-type: none"> 1. Act of intentional killing of a person 2. Disputes amongst different communities (inter-communal) and disputes within the community (communal) leading to tension, violence, riots, acts of revenge 3. Intentional act of stealing from individuals, business 4. Intentional cause of physical harm causing injuries (beating, aggressions) not within the sphere of the house (NB see domestic violence point 12) <p>5-6. Threat = any act of threatening behaviour anticipating harm; Extortion = obtaining property/asset from another person by an illegal use of actual or threatened force, violence, or fear</p> <p>Harassment = the act of systematic and/or continued unwanted and annoying actions. It can be a) Sexual (unwelcome sexual advance, request for sexual favours, or other verbal/ non-verbal/ physical conduct of sexual nature); b) physical (pushing, hitting , unwanted touching); verbal (yelling, verbal communication that results uncomforted, damaging the image and the honour etc.)</p> <p>Authorities/ Security = civil authorities (including police) and military authorities</p> <p>Armed groups = non-state actors engaged in armed opposition against the State</p> <ol style="list-style-type: none"> 7. Incidents caused by the explosion of anti-personnel/ anti-tank mines, unexploded Ordinances and Improvised Explosive Devices (IED) 8. Any type and form of violence against children (killing, injuring, beating, maiming , sexual abuse of children, sexual exploitation ...) by anyone <p>10. Forced recruitment = compulsory, forced or voluntary conscription in a regular or irregular armed force in ANY capacity (combatants, cooks, porters, messengers, individuals recruited for sexual purposes</p> <p>11. Gender based Violence = act that results in physical, sexual or psychological harm or suffering to women <i>because of being women and men because of being men, in public or in private life</i>. It includes:</p> <p>Sexual Violence: any violence, physical or psychological carried out through sexual means, e.g. rape, attempted rape, sexual exploitation, forced prostitution, inappropriate touching and molestation, female genital mutilation</p> <p>Domestic Violence = act of violence in the sphere of the house/ home by any family related person e.g. physical aggression (hitting, kicking, biting, slapping, acid throwing etc). It includes also threats that can cause emotional distress and denial of access to resources.</p> <p>12. Kidnapping/ Abduction = person is taken and moved to a place that is under the control of the perpetrator, for illegal reasons by means of force, threat, trick, and in any case without the consent.</p> <p>Disappearance = a person is arrested, detained or abducted , deprived of liberty against his/her will by officials of different branches or levels of Government, or by organized groups or private individuals acting with the authorisation, support or acquiescence of state authorities, followed by a refusal to disclose the fate or locations, placing such person outside the protection of the law.</p> <p>13. Forced Labour = all work or service which is demanded from any person under the menace of any</p>

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		<p>penalty and for which the said person has not offered himself voluntarily. This includes Bond labour, where a labourer becomes bonded when his or her labour is demanded in repayment for a loan</p> <p>14. Child labour = Any work that is mentally, physically, socially or morally dangerous, to the health and well-being of a child</p> <p>15. Human trafficking: recruitment, transport, transfer of persons by threat or force, abduction and fraud,, abuse of vulnerability for the purpose of exploiting the person.</p>
33	<p><i>What are the known situations in this community where women and children are at increased risk of violence or harassment?</i></p> <p>In situation of disasters, particularly in situation of displacement, women and children may find themselves in situation of increased risk due to the precarious accommodation situation, the set-up of the camps/ settlements, the disruption of community links, their presence in unknown places/ communities. The question attempts to highlight which are the main situation of risks of violence and harassment</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>Tick the stated situations and indicate which groups are affected of the different options.</p> <p>Harassment = the act of systematic and/or continued unwanted and annoying actions. It can be a) Sexual (unwelcome sexual advance, request for sexual favours, or other verbal/ non-verbal/ physical conduct of sexual nature); b) physical (pushing, hitting , unwanted touching); verbal (yelling, verbal communication that results uncomforted, damaging the image and the honour etc.)</p>
34	<p><i>Are children still being separated from their caregivers due to the event?</i></p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>Question apply to both separated and unaccompanied children</p> <p>Definitions (IASC Guidelines 2007)</p> <p>Child = any person under the age of 18, unless under the (national) law applicable to the child, majority is attained earlier (Convention on the Rights of the Child, or CRC, Article 1).</p> <p>Unaccompanied children/ minors are children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so</p> <p>Orphans are children, both of whose parents are <u>known to be dead</u>.</p> <p>Separated children are those separated from both parents, or from their previous legal or customary primary care-giver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members.</p>
35	<p><i>Are persons with disabilities/ elderly persons in the community facing neglect, marginalization or abandonment?</i></p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>People with a disability may include:</p> <ul style="list-style-type: none"> • people who are blind or partially sighted • people with learning or intellectual disabilities • people who are deaf or hearing impaired • people with a physical disability • people with long term illnesses • people with mental health or psychological difficulties • people with an acquired brain injury <p><i>Neglect and marginilization</i></p> <p>The persons are left behind and neglected by the communities and deliberately excluded form assistance.</p>
36	<p><i>What % of households are mainly relying on the listed water sources?</i></p> <p>A maximum total of 100%</p>	<p>Protected water points – wells with covered top, hand pumps with concrete platforms & drainage, and safe surrounding, soil or other contaminants not able to fall into water.</p>

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37	<p>a) Does water from the main source appear clean?</p> <p>b) If not, what are the impurities you may think?</p>	<p>1. Smell –if the water source itself has a smell, and if water drawn from the source smells not right</p> <p>3. Suspended solids – can see particles/impurities in the water</p>
38	<p>What % of households use water treatment options at home before usage?</p> <p>Perhaps give categories to prompt % (<10%, 10 – 50%, over 50%) if difficult to get a more accurate answer</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>Water treatment options include aqua-tabs, PUR sachets, or filtration systems including boiling</p>
39	<p>What % of households have pots to collect and store (covered) potable water?</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	
40	<p>What % of households defecate at listed locations after the event?</p> <p>Percentage of people practicing the 5 options, total aggregate has to reach 100%</p>	<p>What are the existing sanitation facilities that people access in general</p> <p>Pit latrine: a simple latrine with a super structure and a drop hole</p> <p>Pour flush latrine, connected with drainage or ditch outside HH</p> <p>WC: Conventional HH latrine with proper septic tank/ connected to sewerage line</p>
41	<p>Do women have a separate access & space to sanitation/bathing facilities?</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	<p>Do women have access to facilities and have privacy?</p>
42	<p>Are there any latrines/bathing facilities suitable for use by disabled people?</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	
43	<p>What % of people practice hand washing?</p> <p>Same question posed in Secondary KI interview as to ensure to a gender perspective.</p>	
44	<p>How far is the nearest health facility?</p> <p>Distance (in km)</p> <p>Time (in minutes)</p> <p>Access to health services should be based on the principles of equity and impartiality, ensuring equal access according to need without any discrimination.</p> <p>In practice, the location and staffing of health services should be organized to ensure optimal access and coverage. The particular needs of vulnerable people should be addressed when designing health services. Barriers to access may be physical, financial, behavioral and/or cultural, as well as communication barriers. Identifying and overcoming such barriers to the access of prioritized health services are essential for avoiding morbidity and mortality.</p>	<p>Provide health services at the appropriate level of the health system. Levels include household and community, clinic or health post, health center and hospital. The nearest health facility should cover population living in 5 km of health facility.</p>
45	<p>Nearest Health facility type:</p>	<p>Health facilities are categorized by level of care according to their size and the services provided.</p>
46	<p>Is Health Facility still functional, if not reasons?</p>	<p>The damaged/destroyed health facility structure cannot provide essential health services therefore temporary arrangements for delivery of services are needed.</p>
47	<p>Who provides health services?</p>	<p>The health workforce includes a wide range of health workers including medical doctors, nurses, midwives, clinical officers or physician assistants, lab technicians, pharmacists, CHWs, etc., as well as management</p>

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		and support staff. TBA – Traditional Birth Attendant
48	What type of services provided at the health facility?	OPD - Out Patient Diagnosis (not admitted to health facility, but receive treatment/diagnosis) Inpatients – Admitted to health facility
49	<i>What are the main health problems in the community? (Tick all that apply)</i> Same question posed in Secondary KI interview as to ensure to a gender perspective.	People have access to information and services that are designed to prevent the communicable diseases that contribute most significantly to excess morbidity and mortality. Morbidity and mortality due to communicable diseases tend to increase with disasters. In many conflict-affected settings, between 60 per cent and 90 per cent of deaths have been attributed to four major infectious causes: acute respiratory infections, diarrhea, measles and malaria where endemic. Acute malnutrition exacerbates these diseases, especially in children under 5 years of age. Outbreaks of communicable diseases are far less commonly associated with acute-onset natural disasters. When outbreaks occur, they are generally associated with risk factors such as population displacement, overcrowding, inadequate shelter, insufficient and unsafe water and inadequate sanitation.
50	<i>If problem to access health services, this would be? (Tick all that apply)</i> Same question posed in Secondary KI interview as to ensure to a gender perspective.	Access to health services means the timely use of health care services for avoiding morbidity and mortality. There is no minimum threshold figure for the use of health services, as this will vary from context to context. In analyzing utilization rates, consideration should ideally also be given to utilization by sex, age, ethnic origin and disability. People have equal access to effective, safe and quality health services that are standardized and follow accepted protocols and guidelines.
51	What primary sources of communication the community uses to get information (Tick all that apply) It is important to detect what main sources of information people rely on to be able to efficiently circulate information of life-saving nature related to the disaster and related to the assistance. Same question posed in Secondary KI interview as to ensure to a gender perspective.	
52	<i>What are the three main topics on which the community is requesting information? (Tick the three most important)</i> Information needs to be targeted to the needs of the population. It is important to detect what are the topics that the communities may need more information. Same question posed in Secondary KI interview as to ensure to a gender perspective.	