

Participatory Assessment 2024_Adult in Camps

Introductory Notes

Hello, my name is (Enumerator) and I am working for UNHCR as a data collector for this assessment. UNHCR is talking to randomly selected people from different nationality and groups – older people, young people, men, and women, adolescents, and children – to understand the types of problems people in your community face. As you are selected for this interview, I would like to ask you a few questions. Your participation is voluntary, and you can choose not to answer any of the questions. The interview is planned to take around 30-45 minutes. The results of the participatory assessment will provide inputs for 2023 Planning based on the identified priority needs of refugees and asylum seekers. All that you will say during this interview will stay completely confidential, and your name will not appear.

Your participation in this interview does not equate to any benefit, assistance, or disadvantage.

This note must be read out to the beneficiary.

NOTE TO THE ENUMERATOR : For multiple-choices questions, before ticking "Other", please make sure that similar option is not available in the list provided.

Date of interview

Please enter date

yyyy-mm-dd

Please select the Sub-Office

Select the sub-offices from the list

- Melkadida Sub Office
- Assosa Sub Office
- Gambella Sub Office
- Jijiga Sub Office
- Samera Field Office
- Gondar Sub Office
- Mekele Office

Please select the refugee location

The camps(s) linked to the selected sub-office is(are) automatically displayed. Select a camp from the list.

Do you consent to be interviewed?

- Yes
- No

Demographic

1. Beneficiary family number

Family number is available on the Proof of Registration. Please report it properly

2. Age of the respondent *

3. Gender of the respondent *

- Female
- Male
- I Don't want to Disclose
- Other

4. What is your citizenship? *

- Burundi
- Democratic Republic of the Congo
- Djibouti
- Eritrea
- Kenya
- Somalia
- South Sudan
- Sudan
- Syrian Arab Republic
- Yemen
- Others

5. Specify other country of origin of the respondent *

6. What is your level of education? *

- Primary
- Secondary
- Technical and Vocational Education and Training (TVET)
- Tertiary (University)
- No education

7. Respondent specific need *

Select "Not applicable" in case the interviewee is not a person with disability, not elderly or not a woman head of household

- Person with disability (Physical, mental, visual...)
- Female head of household without adult male
- Elderly
- Not applicable

8. What are the top 3 challenges and issues faced by persons with specific needs in your community *

Maximum select 3

- Abandonment
- Anxiety / stress/ trauma
- Assistance not tailored to their needs
- Basic facilities not built to be accessible by persons with disability
- Long distance to reach food distribution point
- Long distance to reach other facilities (latrines, health)
- Exploitation / abuse
- Kidnapping / trafficking
- Marginalization
- Not included in the decision making process
- Not included in distribution lists
- Not enrolled in school / education
- No specific challenge
- Other

9. Please specify other challenges faced by person with disability *

A. Food Security

A. FOOD SECURITY

Enumerator to Inform the respondent that the next section is related to Food Security

A.1 Did you sell any of your portion of the food assistance that you received in the past 12 months? *

- Yes
- No
- No Answer

A.2 What are the items you sell most often? *

Tick all that apply

- Corn Soy Blend (CSB)
- High Energy Biscuits
- Maize
- Millet
- Oil
- Pulse
- Rice
- Salt
- Sogham
- Wheat

A.3 Why do you sell your food ? *

Tick all that apply

- Business, entrepreneurship
- Debt reimbursement
- Education
- Food (Most preferable food)
- Health
- Firewood
- Fertilizer, seed
- Grain milling
- Non-Food Items (Kitchen set, bucket, blanket)
- Purchase of food container
- Sanitary pad
- Savings
- Shelter repair (e.g. rehabilitation, extension, materials)
- Soap
- Shoes/Clothes
- Water
- Others

A.4 Please specify other reason why you are selling your food assistance *

A.5 Do you prefer your food assistance to be provided in: *

- Cash
- In-kind
- Mixed cash and in-kind

A.6 Why would you NOT prefer to receive your food assistance fully in cash? *

A.7 How did you cope with food shortage or meet your basic needs during the food pause? *

Maximum select 3

- Adults have taken on dangerous/exploitive work
- Begging
- Borrow or loan money from a formal lender
- Borrowed food from local merchants
- Early marriage for girls
- Illegal activities (such as theft)
- Return to the country of origin
- Sell or exchange personal possessions or productive assets
- Selling of live animals
- Send household members under the age of 16 to work
- Support from relatives in the camp or elsewhere in Ethiopia
- Support from relatives out of Ethiopia (Remittances)
- Support from host community
- Support from other refugees (not relatives) in the camp (well wishers)
- Transactional sex
- Use savings
- Went entire day without eating
- Withdrew children from school
- Working and salaries
- Other

A.8 Specify other coping mechanism *

B. EDUCATION**B. EDUCATION**

B.1 How many girls (3 – 17 years old) do you have in your household? *

Report 0 if no girl 3-17 years in the household. Please consider only 3-17 years

B.2 How many of your girls are currently enrolled in school? *

All education levels kindergarten, primary, secondary school

B.3 Why all your girls are not enrolled in school? *

Select multiple choices

- Bullying in school
- Child obliged to work
- Congestion in schools
- Disability
- Distance
- Early/forced marriages
- Lack of food, Hunger
- Lack of school materials
- Not afford to pay school fee
- Pregnancy
- Schools are closed
- Schools are damaged, destroyed or looted
- Unsafe road to school
- Other

B.4 Please specify other reasons why all your girls are not enrolled in school? *

B.5 How many boys (3 – 17 years old) do you have in your household? *

Report 0 if no boy 3-17 years in the household. Please consider only 3-17 years

B.6 How many of your boys are currently enrolled in school? *

All education levels kindergarten, primary, secondary school

B.7 Why all your boys are not enrolled in school? *

Select multiple choices

- Bullying in school
- Child obliged to work
- Congestion in schools
- Disability
- Distance
- Early/forced marriages
- Lack of food, Hunger
- Lack of school materials
- Not afford to pay school fee
- Pregnancy
- Schools are closed
- Schools are damaged, destroyed or looted
- Unsafe road to school
- Other

B.8 Please specify other reasons why all your boys are not enrolled in school? *

B9. In the past 30 days, has any of your child boy/girl missed school? *

- Yes
- No

B10. If so what were the reasons *

- Bullying in school
- Child obliged to work
- Congestion in schools
- Disability
- Distance
- Early/forced marriages
- Lack of food, Hunger
- Lack of school materials
- Not afford to pay school fee
- Pregnancy
- Schools are closed
- Schools are damaged, destroyed or looted
- Unsafe road to school
- Other

B11. Specify other reasons why your boys/girls missed school... *

C Registration and documentation services

REGISTRATION AND DOCUMENTATION
Enumerator to Inform respondent that next questions are related to registration and documentation

C.1 Do you have any family members in the camp who are not registered? *
Family members who don't appear in the proof of registration

Yes
 No

C1b. Why are they not registered? *

C.2 Do you know that birth notification issued by any health structure is enough to register your newborn baby? *

Yes
 No

C.3 Have you tried to register a new born in the last 3 years? *

Yes
 No

C.4 Did you face denial of a new born Registration due to lack of documentation? *

Yes
 No

C.5 Are you satisfied with the registration and documentation services provided by UNHCR and RRS? *

Yes
 No

D Livelihood and Economic Inclusion

LIVELIHOOD AND ECONOMIC INCLUSION

Enumerator to Inform respondent that next section is related to Livelihoods and Economic Inclusion

D.1 What is your current employment status *

- Self-employed, running own-business (included cooperatives and livelihood groups: agriculture, farmers, livestock)
- Wage employed (Working for someone or an humanitarian orgnaization)
- Casual (daily labour with payment in cash or in-kind)
- Incentive workers
- Unemployed / Student / Housewife

D.2 What are the top 3 challenges you face with your own business *

Applies only for Self-employed, refugee running their own-business

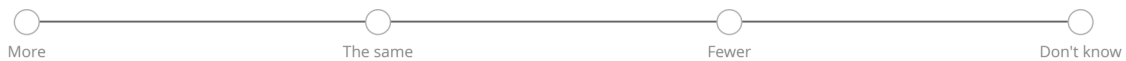
- Checkpoints
- Debts (Costumers borrow items and don't pay back)
- Drought
- Flood
- Inflation (Price increase)
- Insecurity/Thefts
- Items for business not available
- Lack of capital to expand business
- Lack of Fuel/Electricity
- Lack of seed and fertilizer
- Non-acceptance of the host community
- Restricted movements for refugees
- Taxes
- Work permit
- No specific challenge
- Other

D.3 Please specify other challenge you face with your own business *

D.4 What is your average wage/income per month in Ethiopian Birr? *

Put 0 the interviewee has no income per month

D.5 Compared to this time last year, do you think you can now afford more goods and services, the same, or fewer goods and services? *



D.6 Did you receive financial support from any relative outside of Ethiopia over the last 6 months? *

- Yes
- No

D.7 Have you benefitted from any training, productive assets, seed funding over the last 12 months? *

- Yes
- No

D.8 Are you a member of a cooperative, association or network? *

- Yes
- No

D.9 Do you currently have an account at a bank or other financial institution ? *

- Yes
- No

D.10 Have you tried to access loans/micro-credit from a financial or a credit institutions in the past 12 months? *

- Yes
- No

<p>D.11 Did you get the loan requested? *</p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>D.12 Does at least one member of your household have a cell phone? *</p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>D.13 In the past 12 months, have you used a mobile phone to make payments, to buy things, or to send or receive money? *</p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>D.14 Who is/are main responsible/s for making the money in your household? *</p> <p><i>Multiple select</i></p> <p><input type="checkbox"/> The male head of household</p> <p><input type="checkbox"/> The female head of household</p> <p><input type="checkbox"/> The children (under 17 years) in the household</p> <p><input type="checkbox"/> Other adults in the household</p> <p><input type="checkbox"/> Family members out of the country (remittances)</p> <p><input type="checkbox"/> Others</p>
<p>D.15 Other responsible persons, please specify? *</p> <hr/>
<p>D.16 When you have cash, what do you spend it on? *</p> <p><i>Maximum select 3</i></p> <p><input type="checkbox"/> Assets for a livelihood activity (e.g. seeds, tools, establishing a farm , fishing, petty trade, livestock etc.)</p> <p><input type="checkbox"/> Clothes / shoes</p> <p><input type="checkbox"/> Debt repayment</p> <p><input type="checkbox"/> Education (e.g. school fees, uniform, books).</p> <p><input type="checkbox"/> Entertainment</p> <p><input type="checkbox"/> Firewood / Fuel for cooking or heating</p> <p><input type="checkbox"/> Food</p> <p><input type="checkbox"/> Give some to other family members / relatives / friends</p> <p><input type="checkbox"/> Health costs (including medicines)</p> <p><input type="checkbox"/> Household items (e.g. mattress, blankets, jerry can)</p> <p><input type="checkbox"/> Hygiene items (soap,detergents, etc)</p> <p><input type="checkbox"/> Khat,alcohol,cigarettes, etc</p> <p><input type="checkbox"/> Rent</p> <p><input type="checkbox"/> Saved some money</p> <p><input type="checkbox"/> Shelter repair (e.g. rehabilitation, extension, materials)</p> <p><input type="checkbox"/> Transport</p> <p><input type="checkbox"/> Utilities and bills (e.g. electricity, water bills, phone calling credit)</p> <p><input type="checkbox"/> Water</p> <p><input type="checkbox"/> Other</p>
<p>D.17 Please specify other types of expenditure *</p> <hr/>

E. Energy and Environment

ENERGY AND ENVIRONMENT

Enumerator to Inform respondent that next section is related to Energy and Environment

E.1 What do you use for lighting at night in your home? *

Select one

- No light at night
- Firewood
- Generator (Personal, own)
- Generator (Private business)
- Mobile phone flash
- National grid connection
- Oil lamp
- Solar home system
- Solar Lantern
- Torch
- Other

E.2 Please specify other source of lighting in your home *

E.3 What are the top 2 benefits of lighting for your family? *

2 choices max

- Reduced risks of gender-based violence (GBV) risks
- Children can read at night
- Reduced the risks of shelter burning
- Feeding of children at night is easy
- Accessing latrines at night was made easy
- Reduced in security threats
- We can easily charge our mobile phones
- Other

E.3b Please specify other benefit of lighting *

E.4 What does your household use for cooking most of the time, including cooking food, making tea/coffee, boiling drinking water? *

Select one

- Briquettes
- Charcoal
- Cooking gas stove
- Cow dung
- Electric stove
- Firewood
- Fuel (Gasoline, diesel...)
- Others

E.5 Please specify other source of energy for cooking *

E.6 What is your most preferred cooking energy? *

Select one

- Briquettes
- Charcoal
- Cooking gas stove
- Cow dung
- Electric stove
- Firewood
- Fuel (Gasoline, diesel...)
- Others

E.6b Please specify other preferred *

E.7 What challenges do women face when collecting firewood? *

Tick all that apply

- Attacks/ insecurities
- Conflict
- Gender Based Violence risks
- Jail
- Killing
- Long distances leading to exhaustion
- No specific challenge
- Other

E.8 Please describe other challenge women face while collecting firewood *

E.9 Do you spend money to meet your energy needs (firewood, fuel)? *

- Yes
- No

E.10 How much do you spend on average per month for your energy needs? In Ethiopian Birr *

F. Health

HEALTH

Enumerator to Inform respondent that next section is related to Health

F.1 Have you visited the health facility over the past 3 months? *

- Yes
- No

F.2 Did you receive the health services you were seeking? *

- Yes
- No

F.3 Are you satisfied with the quality of services you or your family members received from the health facilities (e.g., health center, hospital, health post)? *

- Yes
- No

F.4 Why are you not fully satisfied with health services? *

Tick all that apply

- Discrimination in receiving services
- Inability to pay for health services
- Long distance
- Misconduct of healthcare staff
- No Healthcare staff
- No medication
- Pay to receive favor
- Too long waiting hours
- Other

F.5 Specify other reasons why you are not satisfied with health services *

G. Nutrition

NUTRITION

Enumerator to Inform respondent that next section is about Nutrition

G.1 Do you have a child under 5 years old? *

- Yes
- No

G.2 Did you visit the nutrition center over the past 6 months? *

- Yes
- No

G.3 Why you didn't visit the nutrition center? *

G.4 Are you satisfied with the quality of the services at the nutrition centers? *

- Yes
- No

G.5 Why are you not fully satisfied with nutrition services? *

Tick all that apply

- Discrimination in receiving services
- Gender based violence
- Inability to pay for Nutrition services
- Long distance
- Long waiting hours
- Misconduct of staff
- No staff
- No medication
- Payment to receive favor
- Other

G.6 Specify other reasons why you are not satisfied with Nutrition services? *

H. Sexual Abuse and Exploitation/SEA

SEXUAL ABUSE AND EXPLOITATION

Enumerator to Inform respondent that next section is about sexual abuse and exploitation

Enumerator to explain SEA to the interviewee

Sexual Exploitation and Abuse (SEA): Particular forms of gender-based violence that have been reported in humanitarian contexts, specifically alleged against humanitarian workers. Sexual Exploitation: Any actual or attempted abuse of a position of vulnerability, differential power, or trust, for sexual purposes, including, but not limited to, profiting monetarily, socially or politically from the sexual exploitation of another. Sexual Abuse: "The actual or threatened physical intrusion of a sexual nature, whether by force or under unequal or coercive conditions"

H.1 Have you seen or heard about Sexual Exploitation and Abuse (SEA) happening in your location? *

If yes, enumerator should follow up with respondents individually after session

- Yes
 No
 No Answer

H.2 What are situations or places where the risk of SEA is higher? *

Tick all that apply

- At home
 Food distribution Points
 Health facilities
 Humanitarian organizations/NGO offices
 Market
 Nutrition center
 On the way to fetch firewood
 School (including the way to school)
 Streets
 Toilets and latrines
 Travelling outside the community
 Water points (including the way to fetch water)
 Others

H.3 Other situations of higher SEA risks, please specify *

H.4 Do you know that all humanitarian who are involved in delivering assistance have the duty not to request any payment or sexual favors in exchange for services? *

- Yes
 No

H.5 How do/would you report SEA if it occurs in your community? *

- Community leaders
 Complaints boxes
 Family and friends
 Helpline/Hotline (Call)
 Police
 Protection desks
 Religious leaders
 UNHCR or partner staff
 I don't know how to report
 Others

H.6 Other reporting media for SEA, please specify *

H.7 Are you comfortable discussing a scenario related to domestic violence? *

- Yes
 No

» Group

H.9 Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:	Answer
If she goes out without telling him?	<input type="radio"/> Yes <input type="radio"/> No *
If she neglects the children?	<input type="radio"/> Yes <input type="radio"/> No *
If she argues with him?	<input type="radio"/> Yes <input type="radio"/> No *
If she refuses to have sex with him?	<input type="radio"/> Yes <input type="radio"/> No *
If she burns the food?	<input type="radio"/> Yes <input type="radio"/> No *

J. Water, Sanitation and Hygiene (WASH)

WASH	
<i>Enumerator to Inform respondent that next section is about WASH</i>	
J.1 How long does it take to go to the MAIN source of drinking water , get water, and come back, including waiting time	*
<input type="radio"/> Less than 30 minutes <input type="radio"/> Between 30 minutes and 1 hour <input type="radio"/> Between 1 and 2 hours <input type="radio"/> More than 2 hours <input type="radio"/> Unknown	
J.2 Are you willing to contribute to latrine construction for example digging or with local materials?	*
<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> I don't know	
J.3 When was the last time your household received soap assistance?	*
<input type="radio"/> Less than 6 months <input type="radio"/> Between 6 months and 12 months <input type="radio"/> More than 12 months (1 year) <input type="radio"/> can't remember <input type="radio"/> Never received	
J.4 When was the last time you received dignity kit or Menstrual Hygiene Management Kit (MHM)?	*
<i>Only for female respondents</i>	
<input type="radio"/> Less than 6 months <input type="radio"/> Between 6 months and 12 months <input type="radio"/> More than 12 months (1 year) <input type="radio"/> can't remember <input type="radio"/> Never received	
J.5 Do you use to buy water for either drinking, domestic hygiene or livestock?	*
<input type="radio"/> Yes <input type="radio"/> No	
J.6 For which purpose do you buy water	*
<i>Multiple choices</i>	
<input type="checkbox"/> Drinking <input type="checkbox"/> Domestic hygiene <input type="checkbox"/> Livestock <input type="checkbox"/> Crops/Agriculture <input type="checkbox"/> Other	
J.7 Please specify other reasons for which you buy water	*
<hr/>	
J.8 How much do you spend on average per month on water (in Ethiopian Birr)	*
<hr/>	

K. Protection and Safety

PROTECTION AND SAFETY

Enumerator to Inform respondent that next section is about Protection and Safety

K.1 What are the main concerns for safety, human rights and protection within your community? *

Ask for maximum of 3 to be volunteered by the respondents. Enumerator may prompt with examples from the list if necessary

- Abduction / kidnapping
- Access to justice and legal aid
- Arbitrary Arrest/Detention
- Birth registration
- Conflict with nearby/host populations
- Forced return to the country of origin (Deportation)
- Discrimination and exclusion from assistance
- Harassment
- Inter-communal tensions (within the camp)
- Lack of documentation
- Payment to receive services
- Persons with disabilities have challenges / are unsafe
- Presence of armed groups
- Restriction of movements / checkpoints / road blocks
- Sexual exploitation or abuse by providers of humanitarian aid
- Sexual exploitation or abuse by someone other than providers of humanitarian aid
- Sexual violence
- Theft
- Trauma/anxiety / stress
- No problem
- Don't know
- Others

K.2 Please specify other protection and safety concern you face *

K.3 Where would you feel confident to report security concerns? *

- Community Watch Groups
- Family, friends
- Police
- Refugee leaders
- Religious leaders
- UNHCR, RRS or partners
- I do not report them
- Others

K.4 Other, to whom security concern reported, please specify *

K.5 Do you have any family members registered with you and currently living outside the camp? *

Here it's about family members registered with the household, appearing on the proof of registration who are living outside the camp

- Yes
- No

K6. Where are they living? *

Please select the region in Ethiopia for family members living in Ethiopia. Select "Outside Ethiopia" if any family member is living outside Ethiopia

- Addis Ababa
- Afar
- Amhara
- Benishangul Gumz
- Dire Dawa
- Gambela
- Harari
- Oromia
- Sidama
- Southern Nations, Nationalities and Peoples (SNNP)
- Somali
- South West Ethiopia
- Tigray
- Outside Ethiopia

K7. What are the reasons for living outside the camp? *

Multiple select. Enumerators to listen the reasons provided by the interviewee and tick the corresponding reasons from the list below. Before selecting "Other" please be sure the reason provided by the interviewee doesn't appear in the list below

- Education
- Work/livelihood
- Health/Medical reasons
- Unsecurity, threats
- Other..Specify

K8. Specify other reason why family members are living outside the camp *

L. Resettlement and Complementary Pathways

RESETTLEMENT AND COMPLEMENTARY PATHWAYS

Enumerator to Inform respondent that next section is about Resettlement and Complementary Pathways

L.1 Do you know what resettlement (RST) is? *

- Yes
- No

L.2 Do you know what complementary pathways mean? *

- Yes
- No

L.3 Have you ever been asked to pay for resettlement services? *

- Yes
- No

M. Social Cohesion

SOCIAL COHESION

Enumerator to Inform respondent that next section is about Social Cohesion

M.1 What is your relationship with host and neighbouring community? *

Good
 Fair
 Poor

M.2 In the past 12 months, were there any tensions or conflicts involving refugees and host communities? *

- Yes
 No

M.3 What was the reasons of the conflict or tension between host community and refugees? *

Multiple select

- Access to basic services (school, hospital...)
 Access to Firewood / Forest
 Access to land for farming
 Access to market place
 Access to water (for livestock, farm, domestic...)
 Politic alignment
 Refugees have lived in area for a while
 Religious reasons
 Social reasons (clan...)
 Thefts (Food)
 Thefts (other goods)
 Other

M.4 Other reasons of conflict between host communities and refugees? *

M.5 What are the natural resources, basic service or facilities located in the host community that you and your family members are denied or have difficulties to access? *

Select all that apply. Please do not consider food

- Bank and financial services
 Difficult to open a business
 Firewood, Forest
 Health services
 Hygiene items (soap, detergents, etc)
 Internet
 Land for farming
 Local market
 Nutrition center
 Playground, Play area
 Primary school
 River
 Sanitary Pad
 Shelter, construction material
 Transport
 Water pump
 Work permit
 All services and resources accessible without impediment
 Other

M.6 Specify other natural resources, basic service or facilities not accessible? *

N. Shelter

SHELTER

Enumerator to Inform respondent that next section is about Shelter.

N.1 Do you feel safe in your shelter? *

- Yes
 No

N.2 What is the main challenge you are facing with your shelter? *

- Damaged shelter
 Insecurity and thieves
 Lack of privacy
 No lock on doors
 No power in my street
 Old emergency shelter
 Overcrowded
 Plastic sheeting shelter
 Water drops inside, Flood area
 Others

N.3 Please specify other challenge you are facing with your shelter *

N.4 Are you willing to contribute to own shelter construction? *

- Yes
 No

P. Core Relief Items (CRIs)

CORE RELIEF ITEM

Enumerator to Inform respondent that next section is about Core Relief Item (Blanket, Bucket, Clothing, Cooking stove, Jerry can, Kitchen set, Mattress, foam, Mosquito net, Plastic tarpaulin, Sanitary napkins, Sleeping mat, Soap, Solar lamp).

P.1 When was the last time your household received Core Relief Item assistance? *

CRI assistance include Blanket, Bucket, Clothing, Cooking stove, Jerry can, Kitchen set, Mattress, foam, Mosquito net, Plastic tarpaulin, Sanitary napkins, Sleeping mat, Soap, Solar lamp

- In 2023
 In 2022
 In 2021
 In 2020
 Before 2020
 Don't remember
 Never received

P.2 What do you think could be the best modality for CRI intervention in this location? *

- Cash
 In-kind
 Mixed cash and in-kind

P.3 When was the last time your household received menstrual hygiene? *

- Less than 6 months
 Between 6 months and 12 months
 More than 12 months (1 year)
 can't remember
 Never received

P.4 Would you prefer to receive your menstrual hygiene in cash or in-kind? *

- Cash
 In-kind

Q. Mental Health and Psychosocial Support Services

MENTAL HEALTH AND PSYCHOSOCIAL SUPPORT

Enumerator to Inform respondent that next section is about Mental Health and Psychosocial Support

Q.1 Have you experienced stress or any other mental health problem e.g (painful flashbacks on traumatic events, uncontrolled Anger, Loss of interest on things you used to enjoy e.t.c) in the last 6months? *

- Yes
 No

Q.2 what are the causes of your stress/mental health problems? *

Tick all that apply

- Chronic illness
 Conflict with family or other refugees
 Conflicts with host community
 Difficult living conditions in the camp
 Discrimination / Stigma
 Displacement
 Harassment
 Insecurity
 Lack of food, Hunger
 Lack of livelihood opportunities
 Long stay in the camp
 Loss and separation from the family
 Loss of property
 No perspective of return in the country of origin
 Poverty
 Sexual violence
 Others (specify)

Q.3 Please specify other causes of stress and mental health *

Q.4 Are there times when you have thought about harming yourself or ending your life? *

- Yes
 No
 No Answer

Q.5 Where do people with mental health problems seek help? *

Tick all that apply

- Family members
 Community leaders
 Religious leaders /churches/mosques
 Humanitarian workers/service providers
 Teachers
 Health facilities
 Discussion with peers/friends
 Holy water
 Traditional healers
 No where
 Others (specify)

Q.6 If other, please specify *

Q.7 What helps you to deal with stress/mental health problems? *

Tick all that apply

- Family
- Talking with friends
- Taking Medication
- Counseling session
- Prayers
- Holy water
- Recreational activities
- Sports/Exercise
- Drama/Music/Dancing
- Sleeping
- Traditional healers
- Take support from community members
- Staying alone
- Alcohol and substance abuse
- Smoking
- Chewing khat
- Nothing
- Other (Specify)

Q.8 If other, please specify *

Q.9 From the list below select one group of population most affected by sign of distress in your community *

- Child-headed households
- Female-headed households and single women
- Older persons
- Persons with chronic illnesses
- Persons with disabilities
- Unaccompanied or Separated children (UASC)
- Male-headed households

R. Accountability, Feedback and Response

R.1 Do you know that all services provided by UNHCR and its partners are free of charge? *

Yes

No

R.2 Have you been asked to pay for a service provided by UNHCR and its partners inside the camp over the past 12 months? *

Yes

No

No answer

R.3 For which service have you been asked to pay? *

Tick all that apply

Cooking service (briquette...)

Counseling session

Documentation

Education (including training and capacity building)

Energy

Food

Health

Nutrition

Registration

Resettlement

Shelter

Water, Sanitation

Other

R.4 Specify other service for which you have been asked to pay *

R.5 How much have you been requested to pay? (in Ethiopian Birr) *

R.6 Who did ask you to pay? *

Tick all that apply

Refugee leaders (RCC, food committee...)

Religious leaders

Fellow refugees

RRS

UNHCR staff

UNHCR partners

Others

R.7 Specify other who asked you to pay *

R.8 Do you know how to report if asked to pay for services? *

Yes

No

R.9 Are you able to reach UNHCR staff in person when you need? *

Never Rarely Sometimes Often Always

R10. In case you want to give feedback or complain about any assistance or services provided to you by humanitarian organizations that work in the area where you live, do you know what feedback mechanisms to use? *

Yes

No

R11. Would you generally feel safe using these mechanisms to provide feedback, make a complaint or seek assistance to organizations working in your area? *

Yes

No

ENUMERATOR

Enumerator's Name *

Please enter your name

This is the end of the interview. Thank the interviewees for their time.