

Research Terms of Reference

Humanitarian Situation Monitor (HSM) during COVID Response, Non-government-controlled areas of Eastern Ukraine

UKR 2006

Ukraine

July 2020

Version 1

REACH Informing
more effective
humanitarian action

1. Executive Summary

Country of intervention	Ukraine		
Type of Emergency	<input type="checkbox"/>	Natural disaster	<input checked="" type="checkbox"/> Conflict
Type of Crisis	<input type="checkbox"/>	Sudden onset	<input type="checkbox"/> Slow onset <input checked="" type="checkbox"/> Protracted
Mandating Body/ Agency	Inter-Cluster Coordination Group (ICCG)		
Project Code	64 ECZ		
Overall Research Timeframe	22/06/2020 to 21/06/2021		
Research Timeframe¹	1. Start collect data: 10/08/2020	5. Preliminary presentation: 16/10/2020	
	2. Data collected: 23/09/2020	6. Outputs sent for validation: 23/10/2020	
	3. Data analysed: 02/09/2020	7. Outputs published: 30/10/2020	
	4. Data sent for validation: 09/10/2020	8. Final presentation: TBC May 2021	
Number of assessments	<input type="checkbox"/>	Single assessment (one cycle)	
	<input checked="" type="checkbox"/>	Multi assessment (more than one cycle) <i>Three data collection and reporting cycles completed within the timeframe – Each cycle lasts approximately three months</i>	
Humanitarian milestones	Milestone		Deadline
	<input checked="" type="checkbox"/>	Donor plan/strategy	30 / 04 / 2021
	<input checked="" type="checkbox"/>	Inter-cluster plan/strategy	30 / 04 / 2021
	<input type="checkbox"/>	Cluster plan/strategy	-- / -- / --
	<input type="checkbox"/>	NGO platform plan/strategy	-- / -- / --
<input checked="" type="checkbox"/>	Other (Specify): Monitoring	02 / 10 / 2020	
Audience Type & Dissemination	Audience type		Dissemination
	<input checked="" type="checkbox"/> Strategic <input type="checkbox"/> Programmatic <input type="checkbox"/> Operational <input type="checkbox"/> [Other, Specify]		<input type="checkbox"/> General Product Mailing (e.g. mail to NGO consortium; HCT participants; Donors) <input type="checkbox"/> Cluster Mailing (Education, Shelter and WASH) and presentation of findings at next cluster meeting

¹ The research timeframe indicated here refers only to the first out of three data collection rounds. The second round is to take place in November-December 2020, and the third round in March – April 2021. Two preliminary presentations are planned after the first and the second rounds of data collection and analysis. The third round will be more comprehensive as it will allow for in-depth over time comparisons and trends and will lead to a final presentation at the end of the research cycle, tentatively in May 2021.

			<input type="checkbox"/> Presentation of findings (e.g. at HCT meeting; Cluster meeting) <input type="checkbox"/> Website Dissemination (Relief Web & REACH Resource Centre) <input checked="" type="checkbox"/> Restricted (bilateral dissemination only upon agreed dissemination list, no publication on REACH or other platforms)
Detailed dissemination plan required²	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/> No
General Objective	To strengthen the evidence-base for decision-making around humanitarian needs in non-government controlled areas (NGCA) of Donetsk and Luhansk over 12 months in light of the continuing conflict, trade embargo and economic affects of the COVID-19 outbreak.		
Specific Objective(s)	<ul style="list-style-type: none"> • To measure household economic security of humanitarian hotline users living in NGCA following the outbreak of COVID-19 in the region. • To identify the current level of need felt by humanitarian hotline users living in NGCA, in terms of i) water, sanitation and hygiene (WASH), and ii) healthcare following the outbreak of COVID-19 in the region. • To understand the main barriers experienced by humanitarian hotline users living in NGCA to accessing economic opportunity, WASH resources and supplies and healthcare in NGCA following the outbreak of COVID-19. • To ascertain the level of awareness of and perception amongst humanitarian hotline users living in NGCA of COVID-19 related humanitarian services, and the degree of satisfaction with these services. • To monitor the change in economic security (Objective 1), the level of need (Objective 2), barriers to assessed services (Objective 3) and indicators of accountability to affected populations (Objective 4) between: <ul style="list-style-type: none"> • the period immediately following the first wave of outbreak – short-term effects (May to July, 2020), • the potential second wave outbreak – middle-term effects (August to November 2020), • the winter period, a year after the first wave outbreak – long-term effects (December 2020 to February 2021). • To compare the needs experienced by households in different geographies across the NGCA of Donetsk and Luhansk. • To understand issues faced by households that are unable to cross the contact line due to closure of check-points as a result of COVID-19. • To identify the preferred aid modalities and communication means voiced by survey respondents 		
Research Questions	<ol style="list-style-type: none"> 1. What is the perceived and observed household economic security status of humanitarian hotline users in NGCA? <ol style="list-style-type: none"> a. What is the employment status of household members? b. What barriers exist to accessing livelihoods opportunities? c. How has closure of the crossing points (EECPs) on the line of contact (LoC) affected livelihoods? 		

² A detailed dissemination plan isn't considered necessary within this project. Our dissemination strategy includes sharing first and foremost to the project' donor OCHA outputs once prepared and validated, as well as upon request to a restricted number of other humanitarian partners included in our mailing list.

	<ol style="list-style-type: none"> 2. Do the households of humanitarian hotline users in NGCA have access to required WASH resources and supplies? <ol style="list-style-type: none"> a. What barriers exist to accessing these? b. How has closure of the crossing points (EECPs) on the line of contact (LoC) affected access to WASH resources and supplies? c. How and why has the access to and enjoyment of WASH products / equipment change over the last year? 3. Do the households of humanitarian hotline users in NGCA have access to required healthcare? <ol style="list-style-type: none"> a. What barriers exist to accessing required care? b. How has closure of the crossing points (EECPs) on the line of contact (LoC) affected access to healthcare? c. What are the most pressing priorities and concerns to meet households' medical needs? 4. Are heads of household, in households in NGCA that contacted the humanitarian hotline, aware of humanitarian services related to COVID-19? <ol style="list-style-type: none"> a. Have households accessed these services? b. How is this humanitarian service perceived by the heads of household (both in terms of quality and usefulness)? c. To what degree are heads of household satisfied with these services? d. What are potential future humanitarian needs for households? 5. How do RQ 1 – 4 vary: <ul style="list-style-type: none"> • By geography? Across 6 sub-regional areas in Donetsk and Luhansk oblasts of NGCA in Eastern Ukraine. • By demographic group? Elderly / Non-elderly heads of household (age groups), Male / Female-headed households (gender groups) • Over time? Comparing the effects of COVID-19 and associated containment measures after the first wave outbreak (spring / summer 2020), the pre-winter period (fall / winter 2020), and one-year on from the outbreak (winter / spring 2021). 																				
Geographic Coverage	Donetsk and Luhansk Non-Government Controlled Areas (NGCA)																				
Secondary data sources	News media; partner post-distribution monitoring data; OSCE reports ; REACH NGCA assessments 2016, 2017, 2018 and 2019 ; Food Security and Livelihoods , WASH and Health clusters; INSO reports ; Right to Protection (R2P) publications and IOM publications .																				
Population(s)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 50%;">IDPs in camp</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 40%;">IDPs in informal sites</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>IDPs in host communities</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>IDPs [Other, Specify]</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Refugees in camp</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Refugees in informal sites</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td>Refugees in host communities</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>Refugees [Other, Specify]</td> </tr> <tr> <td style="text-align: center;"><input checked="" type="checkbox"/></td> <td>Host communities</td> <td style="text-align: center;"><input type="checkbox"/></td> <td>[Other, Specify]</td> </tr> </table>	<input type="checkbox"/>	IDPs in camp	<input type="checkbox"/>	IDPs in informal sites	<input checked="" type="checkbox"/>	IDPs in host communities	<input type="checkbox"/>	IDPs [Other, Specify]	<input type="checkbox"/>	Refugees in camp	<input type="checkbox"/>	Refugees in informal sites	<input type="checkbox"/>	Refugees in host communities	<input type="checkbox"/>	Refugees [Other, Specify]	<input checked="" type="checkbox"/>	Host communities	<input type="checkbox"/>	[Other, Specify]
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Stratification	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 40%;">Population type #: 6 strata based on urban versus rural areas³.</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 20%;">[Other Specify] #:</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 25%;">[Other Specify] #:</td> </tr> </table>	<input checked="" type="checkbox"/>	Population type #: 6 strata based on urban versus rural areas ³ .	<input type="checkbox"/>	[Other Specify] #:	<input type="checkbox"/>	[Other Specify] #:														
<input checked="" type="checkbox"/>	Population type #: 6 strata based on urban versus rural areas ³ .	<input type="checkbox"/>	[Other Specify] #:	<input type="checkbox"/>	[Other Specify] #:																

³ This stratification plan is logical, assuming that large urban centres are more prone to COVID-19-related consequences than rural areas. Six strata will be therefore defined based on population density in NGCA – see Annex 1 (Donetsk city, Donetsk large urban, Donetsk other, Luhansk city, Luhansk large urban, Luhansk other). For each strata, a total number of 400 interviews will be carried out at each data collection stage.

		Population size per strata is known? X Yes <input type="checkbox"/> No				
Data collection tool(s)	X	Structured (Quantitative) ⁴	<input type="checkbox"/>	Semi-structured (Qualitative)		
	Sampling method		Data collection method			
Structured data collection tool # 2	<input type="checkbox"/> Purposive <input type="checkbox"/> Probability / Purposive random <input checked="" type="checkbox"/> Probability / Stratified simple random <input type="checkbox"/> Probability / Cluster sampling <input type="checkbox"/> Probability / Stratified cluster sampling <input type="checkbox"/> [Other, Specify]		<input type="checkbox"/> Key informant interview (Target #): <input type="checkbox"/> Group discussion (Target #): <input checked="" type="checkbox"/> Household interview (Target #): 7,200⁵ <input type="checkbox"/> Individual interview (Target #): <input type="checkbox"/> Direct observations (Target #): <input type="checkbox"/> [Other, Specify] (Target #):			
Target level of precision if probability sampling	95% level of confidence		+/- 5% margin of error			
Data management platform(s)	X	IMPACT	<input type="checkbox"/>	UNHCR		
Expected output type(s)	X	Situation overview #: 3	<input type="checkbox"/>	Report #: __	<input type="checkbox"/>	Profile #: __
	X	Presentation (Preliminary findings) #: 2	X	Presentation (Final) #: 1	X	Factsheet #: 3
	<input type="checkbox"/>	Interactive dashboard #: _	<input type="checkbox"/>	Webmap #: __	X	Map #: 9
Access	<input type="checkbox"/>	Public (available on REACH resource center and other humanitarian platforms)				
	X	Restricted (bilateral dissemination only upon agreed dissemination list, no publication on REACH or other platforms)				
Visibility logos	REACH					
	OCHA					

2. Rationale

The conflict in Eastern Ukraine continues to cause significant human suffering. Since 2014, 5.2 million people have been affected and according to the 2019 Humanitarian Needs Overviews (HNO) estimates, around 3.5 million people are in need of humanitarian assistance⁶. The political separation of the area under the control of the Government of Ukraine (GCA), and the non-government controlled area (NGCA), divided by the 'contact line', has significantly constrained the movement of people and goods. This has led to NGCA becoming increasingly isolated, with reduced access to goods and basic services impacting the ability of the population to meet its basic needs. The economy of NGCA, and by extension the livelihoods of NGCA residents, have been weakened consistently as a result of the ongoing conflict and exacerbated by a trade blockade established in 2018. Previous MSNAs have shown that the NGCA has become more isolated, with residents ability to adapt decreasing, access to basic services increasingly difficult and purchasing power on the decline.

⁴ Mostly structured, the questionnaire is built in such a way that it additionally includes some open-ended, qualitative questions as well (views, perceptions, feedbacks, suggestions, preferences).

⁵ This number is obtained by aggregating three rounds of data collection. Each round will aim at surveying the same 2,400 households, with 1,200 for each of the two oblasts under study (Donetsk and Luhansk). This can be further broken down between each unit, 3 per oblast or 400 households surveyed during every data collection exercise. See the methodology section below for more details.

⁶ 2019 Humanitarian Needs Overview. OCHA, 2018. [Available online.](#)

Restricted access to the territory has rendered the conducting of research and data collection activities in NGCA complex. The cumulative impact of government imposed restrictions on the movement of civilians between NGCA and GCA, continued insecurity and limited humanitarian access have caused a significant gap in understanding of the situation in NGCA on the part of humanitarian actors.

Further to challenges presented by the conflict, in March 2020, Ukraine registered its first confirmed COVID-19 case. In response to virus outbreak, EECPs were closed, a move that directly and heavily affects NGCA residents that need to access pensions, social services, and banks in GCA. Based on analysis of 2019 entry and exit flows, each month that the EECPs remain closed, an estimated 362,000 persons on average are unable to recover pensions, and 230,000 are unable to withdraw cash. In February 2020, just prior to the COVID-19 outbreak and closure of the EECPs, more than 489,000 persons crossed the EECPs to enter the GCA. Of these, 97% were residents of NGCA who cited recovering pensions (63%), withdrawing cash (36%), visiting relatives (22%), solving issues with documents (16%, mostly passports) and shopping (16%) as the reason for crossing when surveyed. The vast majority (67%) of persons that were obliged to cross, and therefore will likely be affected by the closure of EECPs, were elderly (67%, total 44% female and 23% male). Based on this analysis, it is estimated that 362,000 persons per month will not be able to recover pensions because of the restrictions on movement and 230,000 will not be able to withdraw cash.

As most people that cross the LoC come from the large urban centers of NGCA, restrictions on crossing the line of contact will likely lead to a significant increase in poverty rates across urban areas. In addition, household food insecurity and barriers to accessing healthcare will likely significantly increase, as data from the 2020 REACH MSNA shows that food and healthcare are primary household expenses and, of the 16% that cross the line from NGCA into GCA for shopping, most do so for food (72%) and medicines (51%). Data, however, is limited on the extent to which these two consequences have in fact materialized following the closure of EECPs and COVID-19 related restrictions.

This assessment seeks to gather data on the post-outbreak humanitarian situation in NGCA, with a particular focus on the impact on household economic security and resulting effects on access to basic services such as healthcare, NFI markets and education. To address these information gaps, REACH will leverage its capabilities to gather data from NGCA, providing other humanitarian actors with the means to construct an evidence-based strategy or advocacy plan. With years of experience in remote data collection techniques, its well-functioning established partnership with Donbas SOS operating in NGCA, and its ability to grasp complex socioeconomic dynamics in a fast-changing and conflict-affected environment, REACH is appropriately positioned to meet the information needs highlighted above.

The assessment will secondarily focus on the degree to which aid providers practice accountability to affected populations (AAP), seeking to monitor and fill this critical information gap during the COVID-19 response. Efforts to strengthen AAP are bound to be more challenging to implement in NGCA, given access restrictions and lower capacities of aid providers to implement such mechanisms in these areas. The REACH 2020 MSNA found knowledge around the availability of complaint mechanisms among population receiving assistance in NGCA to be lower (25%) when compared with populations receiving assistance in (33% in 2018, all GCA), suggesting NGCA to be a priority geography for AAP activities.

3. Methodology

3.1. Methodology overview

The assessment will employ a mixed-methods approach that will produce a two-tiered analysis:

1. Firstly, REACH will **review existing secondary data** to evaluate the dynamics of conflict, using information produced by INSO, OSCE, Right 2 Protection, and IOM, and the COVID-19 health related situation, based on discussions with WHO representatives. This review will focus on understanding conflict dynamics, status of the crossing-point closures and the status of the COVID-19 outbreak in NGCA.
2. Secondly, REACH will **implement a household survey, similar to the [NGCA MSNA](#) questionnaires utilised in 2016, 2017, 2018 and 2019, with COVID-19 adaptations**. The survey is designed to identify and understand the impacts of COVID-19 on household vulnerability and to track the evolution of a set of core indicators in light of the economic and service-provision impacts of the outbreak. This information will be used to inform the humanitarian community in their humanitarian response.

A total of 7,200 household telephone interviews are planned over three rounds of data collection (August/September 2020, November/December 2020 and March/April 2021). Each data collection exercise is meant to lead to the production of specifically identified outputs (including graphics, reports, factsheets) and all the analysis emerging will help monitor developments over time.

For the purpose of this assessment, the NGCA is divided into six geographic entities⁷, three in Donetsk and three in Luhansk (Tables 1 and 2). With this method, REACH can compile an area-based profile looking at the specific needs and circumstances of an area rather than using a settlement approach, which may be too narrowly focused. By grouping differing geographic entities into “areas”, the overall picture of humanitarian conditions across NGCA as a whole will be clearer, while the individual needs and realities in differing geographies can be compared and emphasised. This will be essential for clusters in planning their interventions, possibly increasing effectiveness and efficiency. This information can then be used to inform the humanitarian community of the existing needs, enabling them to plan an efficient response by having a better understanding of the circumstances in each area, the possible causes of said circumstances and the probable future needs.

Considering COVID-19 and the risks of infection in highly populated areas, as well as income and other socioeconomic differences, it was found more useful to adopt a stratification based on population density as one may see below. The units chosen are the capitals of each oblast, other large urban areas and “other”⁸ areas. See Annex 1 for more details on target entities in NGCA.

⁷ The geographic entities are defined following the 2018 NGCA MSNA due to low responses rates in Donetsk South. Whereas, previous assessments comprised eight geographic units, the present assessment will comprise of six units. Entities were defined through a consultative process involving members of GIS, Data and Assessment teams, including members of national NGOs who have experience working and engaging with residents of the NGCA. Entities were purposely designed so as to have coverage of areas close to the contact line, as well as internal areas, sporadically inhabited areas as well as built up areas (including the responding infrastructure built-up in both). The entities were also defined so as to ensure more ease of data collection by allowing more NGCA residents to be part of the survey.

⁸ “Other” areas here refers to smaller urban settlements as well as rural areas.

Table 1: Number of settlements per each strata in NGCA

Strata	Number of settlements		
	Donetsk Oblast	Luhansk Oblast	Grand total
Donetsk	12		12
Donetsk_large_urban	75		75
Donetsk_other	362		362
Luhansk		5	5
Luhansk_large_urban		54	54
Luhansk_other		324	324
Grand total	449	383	832

3.2. Population of interest

The study will seek to explore the humanitarian needs of NGCA residents in the areas listed above⁹. The NGCA makes up approximately a third of Donetsk and Luhansk oblasts but it includes the most densely populated areas that made up almost half of the total population of 6.64 million. The current population is unknown, the de facto government put the figure at 3.75 million. Other estimates put the figure at below three million taking into account the 1.5 million internally displaced persons (IDPs) and 600,000 Ukrainian asylum seekers abroad, most of whom are from the NGCA.¹⁰

In this survey, REACH will randomly target humanitarian hotline users that have called during the two years year prior to the COVID-19 outbreak (February 2018 to February 2020). While we are aware that the sample drawn cannot be fully representative of the larger NGCA population, we believe that the data collected will help us produce a solid analysis over the period covered (June 2020 to June 2021). The sample frame considered should be large enough to meet the defined target of precision. As an illustration, for the year 2019 only, Donbas SOS has received 4,754 calls from NGCA residents – or 396 per month on average.

⁹ That is, humanitarian hotline users who have called the hotline from these areas at one point in time – during the two years the sampling frame is drawn from.

¹⁰ The State of the Donbas. A study of Eastern Ukraine's separatist-held areas, Nikolaus von Twickel. Pp.55-57. In *Beyond Frozen Conflict*. [Available online](#).

3.3. Secondary data review

Table 2: Key sources for secondary data collection

Source	Assessment
OSCE Special Monitoring Mission to Ukraine	Daily and spot reports from the Special Monitoring Mission to Ukraine
International NGO Safety Organisation	Security Incident Reports
State Statistics Service of Ukraine	Team will continue to review data.
REACH	Multi-Sector Needs Assessment in Donetsk and Luhansk Non-Government Controlled Areas 2016, 2017, 2018 and 2019
Right to Protection	Reports and snapshots
DSNEWS.UA	Demography of ORDLO (separate districts of Donetsk and Luhansk regions)
International Crisis Group	"Nobody Wants Us": The Alienated Civilians of Eastern Ukraine
IOM	National Monitoring System
Organization for Security and Co-operation in Europe, 2017	Assessment of environmental damage in Eastern Ukraine and recovery priorities
OHCHR	Reports on the human rights situation in Ukraine
R2P/UNHCR	Crossing the contact line (2020)

3.4 Primary Data Collection

Household Surveys

A household survey will be developed that incorporates some of the core indicators of the annual NGCA multi-sectoral needs assessment (MSNA) to track the change in severity and level of need during and following the first wave of COVID-19 outbreak in Ukraine. Adaptions to the questionnaire will be made to emphasise health and economic security components, as well as other COVID-19-related consequences (i.e. containment measures, closure of EECs).

Given the limited access to NGCA and the added restrictions as a result of COVID-19, data collection will be carried out by an implementing partner, [Donbas SOS](#), who provide hotline services to NGCA residents requiring humanitarian aid. The telephone surveys will be collected using Computer-Assisted Telephone Interviewing (CATI) in which the interviewer follows a script provided by a software application. The data will be stored in an .xlsx format on REACH servers in country and globally. Employing a purposive sampling approach, [Donbas SOS](#) will conduct 3 rounds of data collection each consisting of 2,400 phone interviews with hotline users. The survey will be used to gather data on household basic needs, status and access to key dimensions in the three months prior to the assessment, underlying drivers of vulnerability and perceptions of humanitarian aid in relation to COVID-19. In order to minimise the likelihood of respondent fatigue and a high interview refusal rate¹¹, the interview length will be kept to a minimum (ideally 25 minutes maximum), enumerators will undertake refusal aversion training and coaching, and enumerator performance will be monitored.

¹¹ The refusal rate will be collected and monitored by adding response options "Reject" and "Didn't pick up" at the very beginning of the questionnaire. Additionally, using a data collection tracker it will be possible to monitor progress of completed interviews on a daily basis. However, it should be pointed out that in terms of calls management, enumerators who will receive a training will eventually be responsible for following-up closely and distinguishing between respondents who have not picked up yet (and therefore who should be called back) and those forms that have been commenced but were not submitted – for which cannot be considered as "completed".

Sampling will take advantage of the database¹² of phone numbers maintained by *Donbas SOS*. Households who called the hotline between 01/02/2018 and 29/02/2020¹³, that is, during the two years leading up to the COVID-19 outbreak, and who agreed to having their phone number securely stored, will be randomly selected and called to participate in the survey. Based on previous data collections utilising similar methods, a response rate of approximately 50% is expected. Households who were called in a previous round of data collection will be excluded from subsequent rounds.

The most recent population data available to facilitate calculation of target sample sizes is the population data for voting precincts dating from 2014. It should be noted that this does not account for displacements since 2014 and accurate estimates for population in NGCA are not available.

The sampling strategy will allow reporting of findings at 95% confidence and a 5% margin of error. However, it should be noted that this is not generalisable to the population of NGCA, rather results will only be generalisable to the cohort of households requiring humanitarian assistance and proactively calling the *Donbas SOS* hotline.

REACH acknowledges that given the constraints in terms of access to the population of concerns, and the limited sampling frame to select respondents / beneficiaries from, some issues of representativeness have to be outlined. Indeed, while surveying humanitarian hotline users, it cannot be inferred that this pool of respondents reflect the broader NGCA population in sharing similar characteristics. In this way, it can be argued that hotline users will tend to generally have more knowledge of and access to humanitarian aid. They would also be using phone and internet on a more frequent basis than non hotline users.

It is interesting to note that thanks to *Donbas SOS* demographic analysis of their hotline users, it is known that women are more likely to be reached than men (58% against 42%). In the same vein, respondents aged between 50-60 are more likely to be called and pensioners respondents the first category of respondents, ahead of employees. The first reason for humanitarian hotline users to call until February 2020 (before COVID-19 outbreak) was regarding the issuance of documents in GCA. However, from March 2020 onwards, the first motive consistently became the procedure of crossing the line of contact and associated queries (documents, pensions). Specific COVID-19 related questions asked by the hotliner users have had to do with self-isolation following the crossing of the line of contact, as well as when were points of contact likely to reopen. Eventually, given the sensitivity of income-related topics, it is quite difficult to obtain a reliable and clear estimate of income / expenses indicators.

¹² The database will be further improved by REACH data specialists, assigning a unique number ID to each respondent, in order to estimate the number of unique respondents and the date of their last call.

¹³ To qualify for the survey, household member must have called *Donbas SOS*' hotline between February 2018 and February 2020 as mentioned above. However, this does not exclude households that may have called after March 2020 up to this day provided that they have also called during the timeframe for eligibility.

Table 3: Sampling strategy for NGCA Household Surveys (households that used humanitarian hotline)

Data collection round	Oblast	Geographic entities	Date	Samples	Periods of interest for comparison across rounds
NGCA Round 1 (R1)	Donetsk	Donetsk City Donetsk Large Urban Donetsk Other	August / September 2020	400 HH surveys in each of the 3 entities.	May to July 2020 (3 months before round 1)
	Luhansk	Luhansk City Luhansk Large Urban Luhansk Other		400 HH surveys in each of the 3 entities.	
NGCA Round 2 (R2)	Donetsk	Donetsk City Donetsk Large Urban Donetsk Other	November / December 2020	400 HH surveys in each of the 3 entities.	August to November 2020 (3 months before round 2)
	Luhansk	Luhansk City Luhansk Large Urban Luhansk Other		400 HH surveys in each of the 3 entities.	
NGCA Round 3 (R3)	Donetsk	Donetsk City Donetsk Large Urban Donetsk Other	March / April 2021	400 HH surveys in each of the 3 entities.	December 2020 to February 2021 (3 months before round 3)
	Luhansk	Luhansk City Luhansk Large Urban Luhansk Other		400 HH surveys in each of the 3 entities.	

Prior to data collection, REACH will translate, program and test the questionnaire, and perform quality assurance checks to ensure the questionnaire has been programmed as per the specifications in the data analysis plan and is functioning as intended.

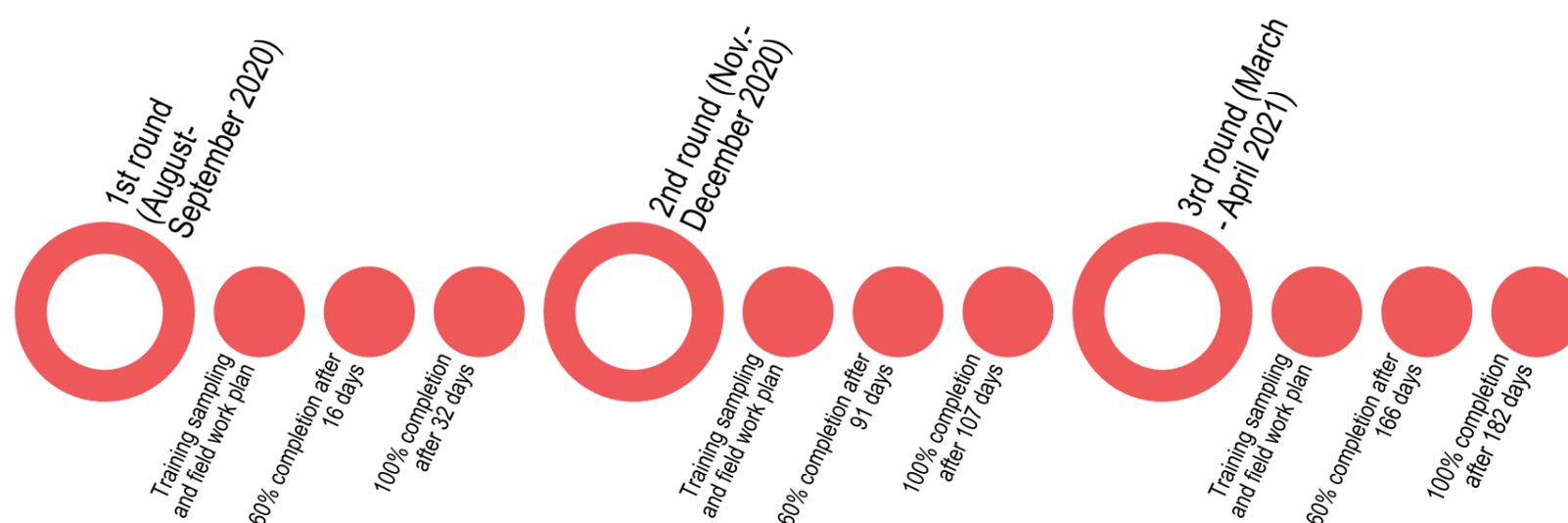
A training of enumerators will be conducted remotely via the Zoom web-application prior to each round of data collection. The Assessment Officer will provide feedback to the Donbas SOS on issues with interviewer performance when needed and keep a log of any issues encountered during data collection. REACH will maintain a log of any changes to the data, including the steps taken during the cleaning of data.

A versioning file system will be controlled by the REACH database officer through daily storage of data collection and monitoring progress.

Table 4: Deliverables from Partner organization collecting data – Donbas SOS

Round Number	Data collection sample	Type ¹⁴	Deliverables			REACH quality check	
1. August 2020	NGCA residents using hotlines for humanitarian assistance	Structured Survey	HH	1st deliverable	2nd deliverable	3rd deliverable	
			Enumerators training attendance sheet, sampling and fieldwork plan 3 business days from signing on contract.	60% of interviews completed 16 days business days from signing of contract , and daily interim data collection reports (including record of enumerator performance feedback) and interim raw dataset meeting target number of completed surveys.	100% of interviews completed 32 days business days from signing of contract , and complete data collection report (including record of enumerator performance feedback) and final raw dataset meeting target number of completed surveys	Remote monitoring	
2. November 2020	NGCA residents using hotlines for humanitarian assistance	Structured Survey	HH	4th deliverable	5th deliverable	6th deliverable	
			Enumerators training attendance sheet, sampling and fieldwork plan 78 business days from signing on contract, (or no later than 19th November 2020).	60% of interviews completed 91 days business days from signing of contract (or no later than 8th December 2020) , and interim data collection report (including record of enumerator performance feedback) and interim raw dataset meeting target number of completed surveys.	100% of interviews completed 107 days business days from signing of contract (or no later than 30th December 2020) , and completed data collection report (including record of enumerator performance feedback) and final raw dataset meeting target number of completed surveys.	Remote monitoring	
3. March 2021	NGCA residents using hotlines for humanitarian assistance	Structured Survey	HH	7th deliverable	8th deliverable	9th deliverable	
			Enumerators training attendance sheet, sampling and fieldwork plan 153 business days from signing on contract. (or no later than 4th March 2021).	60% of interviews completed 166 days business days from signing of contract (or no later than 23rd March 2021) , and interim data collection report (including record of enumerator performance feedback) and interim raw dataset meeting target number of completed surveys.	100% of interviews completed 182 days business days from signing of contract (or no later than 14th April 2021) , and completed data collection report (including record of enumerator performance feedback) and final raw dataset meeting target number of completed surveys.	Remote monitoring	

Title: Expected deliverables from partner organization Donbas SOS



¹⁴ Remote data collection – TBC telephone survey.

Under supervision of REACH assessment teams, *Donbas SOS* will provide direct implementation of three data collection exercises in NGCA, targeting households who solicited them through the hotline. For each schedule line, *Donbas SOS* is responsible to share progress on targeted achieved with REACH focal points via email. A more specific agenda will have to be determined based on implementation starting dates.

Already, see below the tentative table to keep aware of developments and needed outputs:

Table 5: Timetable for data collection implementation

Implementation period	Starting date	Deliverables 1 (Enumerators training, sampling and fieldwork plan)	Deliverables 2 (60% of interviews completed)	Deliverables 3 (100% of interviews completed – Partnership Completion Report)
1. August – September 2020	10 th August 2020	13 th August 2020	1 st September 2020	23 rd September 2020
2. November – December 2020	16 th November 2020	19 th November 2020	8 th December 2020	30 th December 2020
3. March – April 2021	1 st March 2021	4 th March 2021	23 rd March 2021	14 th April 2021

In order to provide clarity and to support the evidence of implementation support, it is suggested that *Donbas SOS* keeps track of survey implementation through an excel file, which is to be shared with regard to the timetable initially set.

3.5. Data Processing & Analysis

Primary data will be collected using Kobo Toolbox within the IMPACT Global Kobo account. Collected data will be downloaded on a daily basis.

During primary data collection, the IMPACT Database Officer and Assessment Officer will perform quality assurance checks on the data on 2 day of data collection, and twice a week there after, to ensure the data collection methodology is being followed by enumerators. Checks will be performed against the [IMPACT Data Cleaning Minimum Standards Checklist](#), ensuring the sampling methodology was carried out in accordance with the sampling plan, confirming the questionnaire is functioning as intended, and investigating any extreme outliers or other problematic data.

Table 6: Checking responsibilities

Database Officer	Assessment Officer
Sampling instructions are followed	Secondary check that the questionnaire functioning as intended
Outliers	Illogical or otherwise unusual response patterns
Errors in skip patterns	Overuse of “Don’t know” response options
Indications of data falsification	

Cleaning will be performed using rules formulated in the final version of the data analysis plan. Rules will include outlier checks, analysis of “Other” inputs, cross-check of linked questions, and review of enumerators comments. All the discrepancies within the data will be clarified with the field team on a daily basis. At the final stage of data cleaning all changes to the raw dataset will be written up in the Value Change Log generated with the R-script.

To facilitate expedient production of data outputs, the data cleaning phase will commence while data collection is ongoing. The IMPACT Database Officer and Assessment Officer will review interim raw data and begin preparation for production of

clean, translated datasets 14 days prior to the end of data collection. Final data outputs incorporating all feedback will be submitted to the IMPACT Data unit 7 days after the end of data collection.

Data analysis will be conducted by REACH in the form of frequency tables disaggregated by strata decided at the sampling stage. Frequency tables and all additional calculations will be done with the `hypegrammaR` R-tool developed by the IMPACT Data unit. The final data package will include raw and cleaned datasets, value change logs, datasets with weight calculations and frequency tables formatted as XLSX-report. All personally identifiable information will be removed during the data cleaning stage and will not occur in the final data package.

The data will be accompanied by a data cleaning log to document changes to the data and track changes or edits based on logical checks. This information will be collected and stored in the dataset documents. The metadata will follow the basic level of details required from HDX including: organization, locations, tags, formats and licenses. The data will be compared to the data collected in the 2018 (August) and 2019 (December) MSNAs conducted by REACH, where possible (i.e. data on similar indicators were collected to allow for crosscheck and comparison). Through targeted knowledge products, REACH aims to inform its partner OCHA – as well as other partners who make a request – about the evolving nature of needs, vulnerabilities and resources of specific layers of the NGCA population.

Such products include specifically the *situation overviews*, *factsheets*, *maps* and *presentations*, with each of them playing a particular role in conveying specific, useful and updated data. A *factsheet* is a brief summary displaying more quantitative figures while a *situation overview* aims at providing additional context into the assessment and its methodological considerations. Through our maps and other visuals designed by the GIS unit, we hope to increase partners' understanding of the conflict dynamics with a more user-friendly format. Finally, presentations present an opportunity to stimulate curiosity and interest and have a two-ways exchange with our partners. Combined, these different data communication outputs provide additional chances for decision-makers and humanitarian actors to tackle the matter involved and to act on it.

4. Roles and responsibilities

Table 7: Description of roles and responsibilities

Task Description	Responsible	Accountable	Consulted	Informed
<i>Research design</i>	Assessment Officer	Assessment Manager	GIS / Data Team / Clusters / HQ Research Design & Data unit / Country Coordinator	
<i>Data collection</i>	Provider	Database Assistant	Assessment Officer / Assessment Manager	Country Coordinator
<i>Data processing (checking, cleaning)</i>	Database Assistant	Assessment Officer	Assessment Manager	Country Coordinator
<i>Data analysis</i>	Database Officer / Assessment Officer	Assessment Manager	HQ Reporting and Data units / Clusters	
<i>Output production</i>	Assessment Officer	Assessment Manager	Country Coordinator / Clusters / HQ Reporting unit	
<i>Dissemination</i>	Assessment Officer	Assessment Manager	Country Coordinator	RDDU
<i>Monitoring & Evaluation</i>	Assessment Officer	Assessment Manager	Country Coordinator	HQ
<i>Lessons learned</i>	Assessment Officer	Assessment Manager	GIS/Data Team / Country Coordinator	HQ

5. Data Analysis Plan

Number	Research question	Section	Indicator group / sector	Indicator / Variable	Questionnaire Question	Instructions	Instructions 2	Questionnaire Responses	Data collection level
		Metadata							
1			Contact		What is the phone number you are dialing?	Fill	Only for enumerator	<i>(phone number)</i>	Enumerator
2			Contact		Comment to the phone number, if any	Fill	Only for enumerator	<i>(comment)</i>	Enumerator
3			Survey management		Indicate enumerator ID	Choose one	Only for enumerator	<i>(enumerator id)</i>	Enumerator
4	Demographics, analysis variables	1. Introduction (A)	Screening	Informed consent	Hello, I represent the public organization Donbass SOS, together with our REACH Initiatives, we are conducting a study in order to better understand the humanitarian situation in your region. The data obtained will help to better understand the needs and contribute to better planning. Your household was randomly chosen as part of a database of people who have contacted Donbas SOS during the past two years. Your responses will only be used for research purposes and you will not be personally identifiable in any reporting. It will take no longer than 20 minutes. We are aware that some of our questions may not represent your situation fully. Please do let us know in such a case. Your participation is greatly appreciated. Do you agree to take part in the survey? *Please keep in mind that participation in the survey does not guarantee the receipt of humanitarian assistance.	Choose one	Read introduction	1_Yes; 2_Refused survey; 3_Didn't pick up	Individual
5	Demographics, analysis variables		Screening	NGCA residence	Do you live in NGCA most of the time?	Choose one	If no, finish interview	1_Yes; 2_No	Individual
6	Demographics, analysis variables		Screening	Rate of HH representation	During the interview I will ask a few questions about your household economic security and access to employment, health and water. Can you respond on behalf of your household? Note: for the purpose of our assessments, a household is defined as a group of people who live under the same roof, share income and meals	Choose one	If no, ask when HoH will be available to call back, and take phone number and preferred time to call	1_Yes; 2_No	Individual

7	Demographics, analysis variables	2. Place of residence (B)	Place of residence	Place of residence: oblast	Main place of residence in NGCA: specify oblast	Choose one		1_Donetsk oblast; 2_Luhansk oblast; 3_Won't answer	HH
8	Demographics, analysis variables		Place of residence	Place of residence: raion	Main place of residence in NGCA: specify raion	Choose one		(Choose one from list)	HH
9	Demographics, analysis variables		Place of residence	Place of residence: settlement	Main place of residence in NGCA: specify settlement	Choose one		(Choose one from list)	HH
10	Demographics, analysis variables		Place of residence	Place of residence: settlement	If other settlement, specify settlement	Fill		(settlement)	HH
11		3. Demographics (C)			We will start with some general questions regarding your household composition, and move towards more specific ones. It is very important that you are as honest as possible in your answers. All the information we collect will be protected and strictly restricted to a few persons working on the survey.	Read text			
12	Demographics, analysis variables		Demographics	Sex of respondent	Sex	Choose one		1_Male; 2_Female; 3_Won't answer	Individual
13	Demographics, analysis variables		Demographics	Age of respondent	Age	Fill		(age)	Individual
14	Demographics, analysis variables		Demographics	% of respondent being HoH	Are you the HoH (i.e. decision-maker for most important issues)?	Choose one		1_Yes; 2_No; 3_Don't know; 4_Won't answer	Individual
15	Demographics, analysis variables		Demographics	Sex of HoH	If not HoH, Sex of the HoH?	Choose one		1_Male; 2_Female; 3_Won't answer	HH
16	Demographics, analysis variables		Demographics	Age of HoH	If not HoH, Age of the HoH?	Fill		(age)	HH
17	Demographics, analysis variables		Vulnerability	% HoHs with at least one vulnerability criteria	Does any of the following describe the HoH?	Choose all that apply	Read out answer options	1_Pensioner; 2_Person with disability; 3_Veteran of war; 4_No income for more than three months; 5_Single parent; 6_Isolated woman; 7_Family with 3 and more than 3 children; 8_Family with foster children under 18 years old; 9_Chronical illness; 10_No; 11_Don't know; 12_Other (specify)	HH
18				% HoHs with at least one vulnerability criteria	Specify if other	Fill		(any other characteristics of importance)	HH
19	Demographics, analysis variables		Vulnerability	% HoHs with disability	If disability, What type of disability does the HoH have?	Choose all that apply		1_Physical; 2_Auditory (ex: deafness); 3_Visual (ex: blindness); 4_Mental; 5_Other (specify); 6_Won't answer	HH
20				% HoHs with disability	Specify if other	Fill		(disability)	HH

21	1. Household economic security status?	4. Employment status (D)	Employment status	HoH employment status	What is the employment status of the HoH today?	Choose all that apply		1_Full-time employed; 2_Part-time employed; 3_Employed time to time / Seasonal worker; 4_Unemployed actively looking for jobs; 5_Unemployed not looking for jobs (for other reasons); 6_Retired; 7_Physically unable to work; 8_Self-employed; 9_Don't know / Won't answer	HH
22	1. Household economic security status?		Employment sector	Employment sector of HoH	If HoH employed (full-time employed, part-time employed, employed time-to-time, self employed), in which sector is the HoH employed?	Choose one		1_Agriculture; 2_Trade; 3_Industry; 4_Transportation; 5_Mines; 6_Education; 7_Healthcare; 8_State service; 9_Municipal sector; 10_Service; 11_Construction; 12_IT; 13_Social service; 14_Military; 15_Other (specify); 16_Won't answer	HH
23				Employment sector of HoH	Specify if other	Fill		(sector of employment)	HH
24	1. Household economic security status?		Employment sector	HoH employment sector before COVID-19	What was the HoH employment sector prior to COVID-19?	Choose one		1_Agriculture; 2_Trade; 3_Industry; 4_Transportation; 5_Mines; 6_Education; 7_Healthcare; 8_State service; 9_Municipal sector; 10_Service; 11_Construction; 12_IT; 13_Social service; 14_Military; 15_Other (specify); 16_Won't answer; 17_Was unemployed	
25				HoH employment sector before COVID-19	Specify if other	Fill		(sector of employment prior to COVID-19)	HH
26	1. Household economic security status?		Employment - change	Reason for change in employment sector between before and after COVID-19	If not the same sectors before/after COVID-19, What was the reason for the changed job / employment sector?	Choose all that apply	Read out answer options	1_Employer closed; 2_Have to pass checkpoint to GCA; 3_Lack of vacancies; 4_Livelihoods assets destroyed (tools, equipment, etc.); 5_Less pay; 6_Missing documentation; 7_Place of work in insecure location; 8_Skills no longer relevant; 9_Conflict-related causes; 10_Covid-19-related causes; 11_End of contract; 12_Health reasons; 13_Family / personal reasons; 14_Other (specify); 15_Don't know / Won't answer	HH
27				Reason for change in employment sector between before and after COVID-19	Specify if other	Fill		(reason for change of job / employment sector)	HH

28	1. Household economic security status?		Unemployment	Reasons why HoH unemployed	If HoH unemployed, Why?	Choose all that apply		1_Previous employer closed; 2_Have to pass checkpoint to GCA; 3_Lack of vacancies; 4_Lack of relevant vacancies; 5_Livelihoods assets destroyed (tools, equipment, etc.); 6_Missing documentation; 7_Skills no longer relevant; 8_Conflict-related causes; 9_Covid-19-related causes; 10_Health reasons; 11_Family / personal reasons; 12_Want to be unemployed / not actively looking for a job; 13_Maternity leave; 14_Other (specify); 15_Don't know / Won't answer	HH
29				Reasons why HoH unemployed	Specify if other	Fill		(reason why unemployed)	HH
30	1. Household economic security status?		Unemployment - sector	Sector of employment for HoHs unemployed due to COVID-19	If HoH unemployed due to COVID-19, In which sector was the HoH employed?	Choose one		1_Agriculture; 2_Trade; 3_Industry; 4_Transportation; 5_Mines; 6_Education; 7_Healthcare; 8_State service; 9_Municipal sector; 10_Service; 11_Construction; 12_IT; 13_Social service; 14_Military; 15_Other (specify); 16_Won't answer	HH
31				Sector of employment for HoHs unemployed due to COVID-19	Specify if other	Fill		(former sector of employment if unemployed due to COVID-19)	HH
32	Demographics, analysis variables	5. HH profile (E, F)	Demographics	HH members profile	Including yourself, what is the number of persons in the HH?	Fill	Ask respondent to disaggregate answer by sex and age	(number of HH members)	HH
					Profile of the HH members per group				
					Write number of **Female 0-15**	Fill			
					Write number of **Female 16-30**	Fill			
					Write number of **Female 31-45**	Fill			
					Write number of **Female 46-60**	Fill			
					Write number of **Female 61-75**	Fill			
					Write number of **Female 76+**	Fill			
					Write number of **Male 0-15**	Fill			
					Write number of **Male 16-30**	Fill			
					Write number of **Male 31-45**	Fill			
					Write number of **Male 46-60**	Fill			
					Write number of **Male 61-75**	Fill			

				Write number of **Male 76+**	Fill			
				The sum of numbers doesn't match with the general number of HH members. Please go back, and check it again.	Check information	Only for enumerator		
33	1. Household economic security status?	Employment	HH members working in past 3 months	Including yourself, how many members of your household worked (for a salary) during the last 3 months?	Fill (if none - 0)	Ask respondent to disaggregate answer by sex and age		HH
				Profile of household members per group				
				Write number of worked household members **Female 0-15**	Fill			
				Write number of worked household members **Female 16-30**	Fill			
				Write number of worked household members **Female 31-45**	Fill			
				Write number of worked household members **Female 46-60**	Fill			
				Write number of worked household members **Female 61-75**	Fill			
				Write number of worked household members **Female 76+**	Fill			
				Write number of worked household members **Male 0-15**	Fill			
				Write number of worked household members **Male 16-30**	Fill			
				Write number of worked household members **Male 31-45**	Fill			
				Write number of worked household members **Male 46-60**	Fill			
				Write number of worked household members **Male 61-75**	Fill			
				Write number of worked household members **Male 76+**	Fill			
				The sum of numbers of worked household doesn't match with the general worked number of HH members. Please go back, and check it again.	Check information	Only for enumerator		
34	1. Household economic security status?	6. EECPs (G)	EECPs and occupation	% of HHs with at least one member involved in crossing EECPs pre-COVID-19	Did at least one member of your household's occupation involve crossing EECPs pre-COVID-19?	Choose one	1_Yes; 2_No; 3_Not sure; 4_Won't answer	HH
35	1. Household economic security status?		EECPs and occupation	Regularity of EECPs crossing	If yes, How regularly?	Choose one	1_Daily; 2_Several times a week; 3_Several times a month; 4_Few times every three months; 5_Few times every six months (or less); 6_Won't answer	HH
36	1. Household economic security status?		Impact of EECPs on occupation	Average perception of impact of closure of EECPs on occupation	If yes, Do you feel that the closure of EECPs has impacted on your occupation? On a scale from 0 to 10. (0: No impact; 10: Great impact)	Choose one	0: No impact; 10: Great impact	0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know

37	1. Household economic security status?	Impact of EECPs on livelihoods	Challenges related to EECPs	If 1 to 10, What were the main consequences on livelihoods faced by your HH as a result of the closure of EECPs?	Choose all that apply	Read out answer options	1_Partial loss of income; 2_Temporary complete loss of income; 3_Partial unemployment; 4_Termination of contract; 5_Change of work sector; 6_Additional or different HH members seeking work; 7_Cannot access pensions / social benefits in GCA; 8_Other (specify); 9_Don't know / Won't answer	HH
38	1. Household economic security status?	Impact of EECPs on livelihoods	Challenges related to EECPs	Specify if other	Fill		(main consequences on livelihoods face by HH)	HH
39	1. Household economic security status?	Impact of EECPs on livelihoods	Strategies to overcome closure of EECPs	Do you intend to rely upon any of the following strategies to overcome this/these problem(s)?	Choose all that apply	Read out answer options	1_Change of work sector; 2_Work additional hours; 3_Move to another area in NGCA; 4_Move to GCA; 5_Move abroad (Russia); 6_Move abroad (other); 7_Rely on savings; 8_Rely on pensions and social benefits; 9_Rely on family / friends; 10_Additional or different HH members seeking work; 11_Other (specify); 12_Don't know / Won't answer; 13_None	Individual
40	1. Household economic security status?	Impact of EECPs on livelihoods	Strategies to overcome closure of EECPs	If move abroad (other), specify to which country	Fill		(country)	Individual
41	1. Household economic security status?	Impact of EECPs on livelihoods	Strategies to overcome closure of EECPs	Specify if other	Fill		(strategy to overcome problem)	Individual
42	1. Household economic security status?	Impact of EECPs on access to services	Challenges related to EECPs and access to services	Did the closure of EECPs lead to barriers in your household members accessing any of the following services?	Choose three	Read out answer options	1_Education; 2_Health; 3_Legal; 4_Markets; 5_Agricultural land; 6_Social payments / Pensions; 7_Other (specify); 8_Don't know / Won't answer; 9_None	HH
43	1. Household economic security status?	Impact of EECPs on access to services	Challenges related to EECPs and access to services	Specify if other	Fill		(services affected by closure of EECPs)	HH
44	1. Household economic security status?	Impact of EECPs on HH	Impact of EECPs on HH	How severely did the closure of EECPs affect your household? On a scale from 0 to 10. (0: Not at all; 10: To a great extent)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	HH

45	1. Household economic security status?		HH concerns with EECPs / COVID-19	Concerns related to EECPs and COVID-19	What are your HH top concerns relating to COVID-19 and associated government response measures (e.g. closure of EECPs), if any?	Choose all that apply		1_Contracting COVID-19; 2_Friends or family contracting COVID-19; 3_Restrictions on movement; 4_Unavailability of medical supplies; 5_Disruption of transportation; 6_Impossibility to follow-up with usual practitioner; 7_Loss of job; 8_Loss of income; 9_Being unable to access healthcare services; 10_Being unable to access basic services; 11_Long-term economic decline; 12_Lack of social interaction; 13_Increase in the value of good/lack of goods; 14_Mental health or wellbeing; 15_Lack of safety while staying home; 16_Increased instances of violence; 17_No access to education; 18_No concerns; 19_Other (specify); 20_Don't know / Won't answer	Individual
46	1. Household economic security status?		HH concerns with EECPs / COVID-19	Impact of EECPs on HH	Specify if other	Fill		(concerns)	Individual
47	1. Household economic security status?	7. Coping strategies (H)	Coping strategies	% of HHs resorting to coping strategies, per type	In the past three months, did anyone in your HH have to engage in any of the following coping strategies to cope with a lack of resources to meet basic needs?	Read text		1_No, but needed; 2_No, not needed; 3_No, already done so can't do it anymore; 4_Yes; 5_Won't answer	HH
					Sold household assets/goods (radio/furniture/TV...)	Choose one	Read out options / Probe if no - "No, but needed", "No, not needed", "No, already done"		
					Spent savings	Choose one			
					Purchased food on credit or borrowed food	Choose one			
					Sent household members to eat / live with another family or friends	Choose one			
					Sold productive assets or means of transport (sewing machine, bicycle, car, etc.)	Choose one			
					Withdrew children from school / kindergarten	Choose one			
					Reduced essential health expenditures (including drugs)	Choose one			
					Reduced essential education expenditures	Choose one			
					Sold house or land	Choose one			
					Entire household migrated / displaced	Choose one			
HH member(-s) moved elsewhere in search of work	Choose one								

					Used degrading sources of income, illegal work, or high risk jobs	Choose one			
48	1. Household economic security status?	8. Income (I)	New HH Debt	% of HHs contracting new debts	Has your household taken on new debts in the past three months? Note: Debt include in-kind (e.g. food), being late in paying rent, loans from family, official and unofficial loans.	Choose one	Read out options / Probe if yes - "Yes, was planned", "Yes, wasn't planned"	1_Yes, was planned; 2_Yes, wasn't planned; 3_No; 4_Won't answer	HH
49	1. Household economic security status?		Sources of income	Two most important sources of HH income	In the past three months, which income sources was your HH most dependent on?	Choose two	Read out options	1_Social benefits / pensions (NGCA); 2_Social benefits / pensions (GCA); 3_Sale of assets; 4_ Informal small trade / bussiness; 5_Savings; 6_Salary from Employment; 7_Credits / Borrowing money; 8_Remittances; 9_NGO / Humanitarian assistance; 10_Family / friends support; 11_Other (specify); 12_No income; 13_Won't answer; 14_Don't know	HH
50	1. Household economic security status?		Sources of income	Two most important sources of HH income	Specify if other	Fill		<i>(main source of income)</i>	HH
51	1. Household economic security status?		Income before COVID-19	Most important source of HH income before COVID-19	Which income was your HH most dependent on before COVID-19?	Choose one	Read out options	1_Social benefits / pensions (NGCA); 2_Social benefits / pensions (GCA); 3_Sale of assets; 4_ Informal small trade / bussiness; 5_Savings; 6_Salary from Employment; 7_Credits / Borrowing money; 8_Remittances; 9_NGO / Humanitarian assistance; 10_Family / friends support; 11_Other (specify); 12_No income; 13_Won't answer; 14_Don't know	HH
52	1. Household economic security status?		Income before COVID-19	Most important source of HH income before COVID-19	Specify if other	Fill		<i>(main source of income pre-covid)</i>	HH
53	1. Household economic security status?		HH female member income	% of female income in HH	Which share of the total HH income is generated by female members?	Choose one		1_0 %; 2_Less than 20%; 3_Between 21% and 50%; 4_Between 51% and 80%; 5_More than 81%; 6_100 %; 7_Don't know; 8_Won't answer	HH
54	1. Household economic security status?		Unexpected expenses	Average confidence in covering unexpected expenses	Considering your HH current assets (income + savings altogether), how confident are you that you could cover unexpected expenses in the next three months? On a scale from 0 to 10 (0: Not confident at all; 10: Very confident)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	HH
55	1. Household economic security status?	9. Social benefits (J)	Entitlement to social benefits	Pensions/Social benefits entitled to	Which of the following payments or social benefits are members of your HH entitled to receive, if any?	Choose all that apply	Read out options	1_Pension from LPR/DPR; 2_Social benefits from LPR/DPR; 3_Pension from Ukraine; 4_Social benefits from Ukraine; 5_Other (specify); 6_Don't know / Won't answer; 7_None	HH
56	1. Household economic security status?		Entitlement to social benefits	Pensions/Social benefits entitled to	Specify if other	Fill		<i>(payments or social benefits entitled to receive)</i>	HH

57	1. Household economic security status?		Issues with social benefits	% of HHs receiving all required social payments	If none, skip. Was there any issue in receiving any of the social benefits / pensions entitled to receive in the last three months?	Choose one		1_Yes; 2_No; 3_Don't know; 4_Won't answer	Individual
58	1. Household economic security status?		Issues with social benefits	Pensions/Social benefits not received	If yes (not received), specify which one(s) you have not received in the last three months	Choose all that apply	Read out options	1_Pension from LPR/DPR; 2_Social benefits from LPR/DPR; 3_Pension from Ukraine; 4_Social benefits from Ukraine; 5_Other (specify); 6_Don't know / Won't answer; 7_None	Individual
59	1. Household economic security status?		Issues with social benefits	Pensions/Social benefits not received	Specify if other	Fill		(social benefits / pensions not received)	Individual
60	1. Household economic security status?		Issues with social benefits	Reasons why Pensions/Social benefits not received	If yes (not received), why have not you received all of the payments in the last three months?	Choose all that apply	Read out options	1_Lack of documentation and other administrative reasons; 2_Physical limitations for disabled or due to trauma; 3_Suspended by government of Ukraine; 4_Serious illness; 5_Suspended from DPR/LPR; 6_Have to pass through an external checkpoint / EECF; 7_Transport was unavailable / unaffordable; 8_Other (specify); 9_Don't know; 10_Won't answer	Individual
61	1. Household economic security status?		Issues with social benefits	Reasons why Pensions/Social benefits not received	Specify if other	Fill		(reason why not received all of the payments)	Individual
62		Transition 1			Thank you very much for all your answers. I will now ask you some questions about your access to water, sanitation and health.	Read text			
63	3. Access to required healthcare?	10. Access to healthcare (L)	Access to healthcare	Status of nearest health facility	Did your nearest healthcare facility stay functional at all times following COVID-19?	Choose one	Probe if yes - "Yes, for all services", "Yes, but only for COVID-19 services", "Yes, but not for COVID-19 services", "Yes, but don't know"	1_Yes for all services (COVID + routine); 2_Yes but only for COVID-19 services; 3_Yes but not for COVID-19 services; 4_Yes, but don't know; 5_Not functional; 6_Don't know / Won't answer	HH
64	3. Access to required healthcare?		HH need healthcare	% of HHs with at least one member requiring healthcare	Did anyone in your household require health services in the last three months?	Choose one		1_Yes; 2_No; 3_Don't know / Won't answer	HH
65	3. Access to required healthcare?		HH need healthcare	% of healthcare needed related to COVID-19	If yes, Do you believe it was related to COVID-19?	Choose one		1_Yes; 2_No; 3_Don't know; 4_Won't answer	Individual
66	3. Access to required healthcare?		Access to healthcare	% of HHs reporting difficulties in accessing healthcare	If yes, Did they face problems in accessing health care?	Choose one		1_Yes; 2_No; 3_Don't know; 4_Won't answer	HH

67	3. Access to required healthcare?		Access to healthcare	Difficulties in accessing healthcare	If yes, Why?	Choose all that apply	Read if necessary	1_Lack of functional health facility; 2_Distance to medical facility; 3_Security constraints; 4_Lack of referral system; 5_Expensive transportation cost; 6_Expensive healthcare (consultation); 7_Expensive healthcare (treatment); 8_LoC closed; 9_Pharmacy or healthcare facility inaccessible to PwD; 10_Lack of documentation / other administrative issues; 11_Could not afford COVID-19 testing; 12_Medical facility was too busy; 13_Avoid seeking healthcare because of COVID-19; 14_Movement restrictions; 15_Suspension of public transportation; 16_Quality of health staff; 17_Quality of medical equipment; 18_Availability of information; 19_Other (specify); 20_Don't know / Won't answer	HH
68	3. Access to required healthcare?		Access to healthcare	Difficulties in accessing healthcare	Specify if other	Fill		(problems in accessing healthcare)	HH
69	3. Access to required healthcare?		Access to healthcare	Type of care needed	If yes, What type of care was needed?	Choose all that apply		1_Ambulatory care; 2_Urgent care; 3_Primary care; 4_Birth center; 5_Imaging and radiology center; 6_Mental health and addiction treatment center; 7_Nursing home; 8_Orthopedic and other rehabilitation center; 9_Clinics and medical center; 10_Other (specify)	HH
70			Access to healthcare	Type of care needed	Specify if other	Fill		(type of care needed)	HH
71	3. Access to required healthcare?		Access to healthcare	Change in access to healthcare following covid-19	How do you think new COVID-19 -related challenges have affected your access to healthcare?	Choose one	Read out answer options	1_Positively; 2_Nothing has changed; 3_Negatively; 4_Don't know / Won't answer	Individual
72	3. Access to required healthcare?		HH need healthcare	Preferred oblast for COVID-19 related healthcare services	If a HH member require healthcare, where would you seek healthcare services related to COVID-19? Specify oblast in NGCA	Choose one		1_Donetsk oblast; 2_Luhansk oblast; 3_Don't know; 4_Other (specify)	Individual
73			HH need healthcare	Preferred location / country for COVID-19 related healthcare services	If "Other", specify the settlement and where it is located: GCA, Russia, another country (specify the name)	Fill		(GCA, Russia, other country, etc.)	Individual
74	3. Access to required healthcare?		HH need healthcare	Preferred raion for COVID-19 related healthcare services	If a HH member require healthcare, where would you seek healthcare services related to COVID-19? Specify raion in NGCA	Choose one		Choose one from list	Individual
75	3. Access to required healthcare?		HH need healthcare	Preferred settlement for COVID-19 related healthcare services	If a HH member require healthcare, where would you seek healthcare services related to COVID-19? Specify settlement in NGCA	Choose one		Choose one from list	Individual

76	3. Access to required healthcare?		HH need healthcare	Actions taken (by type) if one HH member is suspected to have COVID-19	If you suspected you or a member of your HH had COVID-19, what would you do?	Choose all that apply	Read out answer options	1_Stay at home and monitor health; 2_Call doctor; 3_Call other (specify); 4_Go to hospital / clinic from first symptoms; 5_Other (specify); 6_Don't know / Won't answer	HH
77	3. Access to required healthcare?		HH need healthcare	Person / Institution called if one HH member is suspected to have COVID-19	Specify if call (other)	Fill		(person / institution called)	HH
78	3. Access to required healthcare?		HH need healthcare	Actions taken (by type) if one HH member is suspected to have COVID-19	Specify if other	Fill		(action taken if contracted COVID-19)	HH
79	3. Access to required healthcare?	11. Perspectives on COVID-19 (L)	Perspectives on COVID-19	Average perception of importance of COVID-19	To what degree do you consider the current COVID-19 outbreak to be an important issue for your HH? On a scale from 0 to 10 (0: Not important at all; 10: Very important)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Individual
80	3. Access to required healthcare?		Perspectives on COVID-19	Average perception of fear of COVID-19	How do you feel about COVID-19? On a scale from 0 to 10 (0: Not fearful at all; 10: Very fearful)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Individual
81	3. Access to required healthcare?		Perspectives on COVID-19	Average perception of likelihood to contract COVID-19	In your opinion, how likely is it that you will contract COVID-19? On a scale from 0 to 10 (0: Not likely at all; 10: Very likely)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Individual
82	2. Access to required WASH supplies and resources?	12. WASH (water) (M)	Access to water	Absence of drinking water when needed	In the past month, was there any time when your household did not have sufficient quantities of drinking water when needed?	Choose one	Probe if yes - "Yes, several times", "Yes, once"	1_Yes, several times; 2_Yes, once; 3_No; 4_Don't know / Won't answer	HH
83	2. Access to required WASH supplies and resources?		Access to water	Absence of water for domestic purposes when needed	In the past month, was there any time when your household did not have sufficient quantities of water for domestic purposes when needed?	Choose one	Probe if yes - "Yes, several times", "Yes, once"	1_Yes, several times; 2_Yes, once; 3_No; 4_Don't know / Won't answer	HH
84	2. Access to required WASH supplies and resources?		Access to water	Challenges in accessing water when needed	What is the main reason you were unable to access sufficient quantities of water when needed?	Choose one	Read out answer options	1_Water not available from source; 2_Water is too expensive; 3_Source is not accessible; 4_Other (specify); 5_Don't know / Won't answer	HH
85	2. Access to required WASH supplies and resources?		Access to water	Challenges in accessing water when needed	Specify if other	Fill		(reason why unable to access sufficient quantities of drinking water)	HH
86	2. Access to required WASH supplies and resources?		Access to water	Main source of drinking water	What is the main source of drinking water in your HH at home?	Choose one		1_Tap drinking water (centralized water supply); 2_Trucked in water (e.g. truck with a tank); 3_Drinking water from water kiosk (e.g. booth with water for bottling); 4_Bottled water (water purchased in bottles); 5_Personal well or borehole; 6_Public well or boreholes (shared access); 7_Other (specify); 8_Don't know / Won't answer	HH
87	2. Access to required WASH	Access to water	Main source of drinking water	Specify if other	Fill		(main source of drinking water)	HH	

	supplies and resources?								
88	2. Access to required WASH supplies and resources?		Access to water	Average number of hours water supplied	How many hours per day is tap water supplied, on average?	Choose best fit		1_24 h per day; 2_18-24 h per day; 3_12-17 h per day; 4_6-11 h per day; 5_less than 6 h per day; 6_Few days a week; 7_Few days a month; 8_Very irregular access to water; 9_No access to water; 10_Other (specify); 11_Don't know / Won't answer	HH
89	2. Access to required WASH supplies and resources?		Access to water	Average number of hours water supplied	Specify if other	Fill		(regularity of water supply)	HH
90	2. Access to required WASH supplies and resources?	13. WASH (hygiene) (N)	Access to WASH products	Presence of soap/detergent in HH	Do you have soap or detergent in your household for washing hands?	Choose one		1_Yes; 2_No; 3_Don't know / Won't answer	HH
91	2. Access to required WASH supplies and resources?		Access to WASH products	% of HHs not accessing soap / detergent	As far as you're aware, could you or anyone in your household not access the following in the past month: soap / detergent?	Choose one	Probe if yes - "Yes, several times", "Yes, once"	1_Yes, several times; 2_Yes, once; 3_No; 4_Not applicable; 5_Don't know / Won't answer	HH
92	2. Access to required WASH supplies and resources?		Access to WASH products	% of HHs not accessing hand sanitizer	As far as you're aware, could you or anyone in your household not access the following in the past month: hand sanitizer?	Choose one	Probe if yes - "Yes, several times", "Yes, once"	1_Yes, several times; 2_Yes, once; 3_No; 4_Not applicable; 5_Don't know / Won't answer	HH
93	2. Access to required WASH supplies and resources?		Access to WASH products	% of HHs not accessing hygiene / menstrual products	As far as you're aware, could you or anyone in your household not access the following in the past month: hygiene and menstrual products?	Choose one	Probe if yes - "Yes, several times", "Yes, once"	1_Yes, several times; 2_Yes, once; 3_No; 4_Not applicable; 5_Don't know / Won't answer	HH
94	2. Access to required WASH supplies and resources?	14. WASH (other) (O)	Change in access to WASH	Perception of change in access to water	Compared to the same time last year (2019), would you say that the situation in terms of access to and enjoyment of water and related infrastructures...	Choose one	Read out answer options	1_Has considerably improved; 2_Has improved slightly; 3_Has worsened slightly; 4_Has worsened considerably; 5_No changes; 6_Don't know / Won't answer	Individual
95	2. Access to required WASH supplies and resources?		Change in access to WASH	Perception of change in access to hygiene / menstrual products	Compared to the same time last year (2019), would you say that the situation in terms of access to and enjoyment of hygiene and menstrual products...	Choose one	Read out answer options	1_Has considerably improved; 2_Has improved slightly; 3_Has worsened slightly; 4_Has worsened considerably; 5_No changes; 6_Don't know / Won't answer	Individual
96		Transition 2			Thank you so much for your participation so far. We are now close to the end of the survey, and we will end with a few questions relating to your awareness and satisfaction of humanitarian aid. Once again, please be assured that the data you share with us will not be disclosed to anyone and only help us better target future humanitarian aid interventions.	Read text			
97	4. Awareness of COVID-19-related humanitarian services?	15. AAP (communication / information) (P)	Information need	% of HHs wishing to receive more COVID-19 related information	Would you like to receive more information on the spread of COVID-19?	Choose one		1_Yes; 2_No; 3_Won't answer	Individual

98	4. Awareness of COVID-19-related humanitarian services?	Information need	% of HHs wishing to receive more humanitarian assistance information related to COVID-19	Would you like to receive more information on humanitarian assistance related to COVID-19?	Choose one		1_Yes; 2_No; 3_Won't answer	Individual
99	4. Awareness of COVID-19-related humanitarian services?	Communication preference	Preferred means of communication	If yes, specify your preferred mean(s) of communication	Choose all that apply	Read out answer options	1_E-mail; 2_Sms; 3_Phone call; 4_Website; 5_Flyer or other printed material; 6_Community meeting; 7_Messengers (Telegram, Viber, WhatsApp); 8_Other (specify); 9_Don't know / Won't answer	Individual
100	4. Awareness of COVID-19-related humanitarian services?	Communication preference	Preferred means of communication	Specify if other	Fill		(preferred means of communication)	Individual
101	4. Awareness of COVID-19-related humanitarian services?	Information need	Information on COVID-19 needed by HH	If yes, specify what kind of information on COVID-19 would you like to get?	Choose all that apply	Read out answer options	1_Main symptoms of COVID-19; 2_Protective measures; 3_What to do if symptoms appear; 4_Other (specify); 5_None; 6_Don't know / Won't answer	HH
102	4. Awareness of COVID-19-related humanitarian services?	Information need	Information on COVID-19 needed by HH	Specify if other	Fill		(type of COVID-19-related information needed)	HH
103	4. Awareness of COVID-19-related humanitarian services?	Source of information	HH primary source of information regarding COVID-19	What has been your HH's primary source of information regarding the coronavirus disease?	Choose one		1_Television; 2_Posters; 3_Online news media; 4_Government SMS; 5_Social media messaging (telegram, whatsapp, Messenger); 6_Social media sites (Facebook, Twitter); 7_Radio; 8_Other (specify); 9_None; 10_Don't know / Won't answer	HH
104	4. Awareness of COVID-19-related humanitarian services?	Source of information	HH primary source of information regarding COVID-19	Specify if other	Fill		(primary source of information)	HH
105	4. Awareness of COVID-19-related humanitarian services?	Humanitarian assistance	% of HHs who have received humanitarian assistance since covid-19 crisis began	Has your HH received any humanitarian assistance since the start of COVID-19?	Choose one		1_Yes; 2_No; 3_Don't know / Won't answer	HH
106	4. Awareness of COVID-19-related humanitarian services?	Humanitarian assistance	Type of humanitarian assistance received by HH	If yes, what assistance has been received by your HH during this time?	Choose all that apply		1_Food and nutrition; 2_Fuel; 3_Winterization items; 4_Legal assistance; 5_Cash; 6_Water; 7_Shelter; 8_Education; 9_Agriculture; 10_Other non-food items; 11_Medical / health needs; 12_Funds for conducting / resuming work; 13_Employment support; 14_Psychological assistance; 15_Other (specify); 16_Won't answer	HH

107	4. Awareness of COVID-19-related humanitarian services?		Humanitarian assistance	Type of humanitarian assistance received by HH	Specify if other	Fill		(type of assistance received)	HH
108	4. Awareness of COVID-19-related humanitarian services?	16. AAP (satisfaction / feedback) (Q)	Perception of humanitarian assistance	Average satisfaction score regarding humanitarian services	If yes, To what degree are you satisfied with these services? On a scale from 0 to 10 (0: Not satisfied at all; 10: Very satisfied)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Individual
109	4. Awareness of COVID-19-related humanitarian services?		Perception of humanitarian assistance	Average usefulness score regarding humanitarian services	If yes, To what degree do you find these services useful? On a scale from 0 to 10 (0: Not useful at all; 10: Very useful)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Individual
110	4. Awareness of COVID-19-related humanitarian services?		Perception of humanitarian assistance	Average satisfaction score regarding humanitarian workers treatment	If yes, Are you satisfied with the way humanitarian workers have treated you? On a scale from 0 to 10 (0: Not satisfied at all; 10: Very satisfied)	Choose one		0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Individual
111	4. Awareness of COVID-19-related humanitarian services?		Misconduct	% of respondent who have witnessed misconduct	Have you witnessed misconduct from humanitarian workers last 6 months?	Choose one		1_Yes; 2_No; 3_Won't answer	Individual
112	4. Awareness of COVID-19-related humanitarian services?		Misconduct	Type of misconduct witnessed	Specify if yes	Fill		(type of misconduct)	Individual
113	4. Awareness of COVID-19-related humanitarian services?		Feedback	Suggestions for improvement	Do you have any suggestions on how to improve humanitarian services?	Choose one		1_Yes; 2_No	Individual
114	4. Awareness of COVID-19-related humanitarian services?		Feedback	Suggestions for improvement	Specify if yes	Fill		(suggestions)	Individual
115	4. Awareness of COVID-19-related humanitarian services?		Feedback	% of HHs who have used a feedback mechanism	Have you provided feedback on the humanitarian goods or services you received since COVID-19?	Choose one		1_Yes; 2_No; 3_Don't know / Won't answer	Individual
116	4. Awareness of COVID-19-related humanitarian services?	17. AAP (needs / preferences) (R)	HH consultations	% of HHs who were consulted about their needs before aid was distributed	Was your HH consulted about your needs and preferences before the aid was distributed?	Choose one		1_Yes; 2_No; 3_Don't know / Won't answer	HH

117	4. Awareness of COVID-19-related humanitarian services?		HH needs	Type of humanitarian assistance HH needs in future	What type of humanitarian assistance may your HH need in the coming 3 months?	Choose three	Read if necessary	1_Cash; 2_Food and nutrition; 3_Water; 4_Fuel; 5_Shelter; 6_Winterization items; 7_Education; 8_Legal assistance; 9_Medical / health needs; 10_Agriculture; 11_Other NFIs; 12_Needs related to livelihoods; 13_Employment support; 14_Psychological assistance; 15_Other (specify); 16_None; 17_Don't know / Difficult to answer	HH
118	4. Awareness of COVID-19-related humanitarian services?		HH needs	Type of humanitarian assistance HH needs in future	Specify if other	Fill		(type of assistance)	HH
119	4. Awareness of COVID-19-related humanitarian services?		HH preferences	Preferred aid modality	What is / are your preferred aid modality.ies?	Choose all that apply	Read out answer options	1_Cash transfer; 2_In-kind support; 3_Voucher; 4_Micro-loan ; 5_Other loan ; 6_Other (specify); 7_Don't know / Won't answer	Individual
120	4. Awareness of COVID-19-related humanitarian services?		HH preferences	Preferred aid modality	Specify if other	Fill		(preferred aid modality)	Individual
121	4. Awareness of COVID-19-related humanitarian services?		Feedback	Type of other issues and feedback	You may want to raise any other issues that you consider important and / or that were not discussed during the survey	Choose one		1_Yes; 2_No	Individual
122	4. Awareness of COVID-19-related humanitarian services?		Feedback	Type of other issues and feedback	Specify if yes	Fill		(issues, feedbacks, AOB...)	Individual
123	4. Awareness of COVID-19-related humanitarian services?		Feedback	Type of other issues and feedback	I will now provide you with our Feedback and Complaints Response Mechanism contact numbers. Every complaint will be answered. All 3 phone numbers can be reached between 9 am and 4 pm, Monday to Friday +380 73 148 38 54 +380 66 265 60 11 +380 68 948 07 26 You may also find on Donbas SOS website these numbers as well as an email address to contact	Read text	Provide respondents with F-CRM contact details	-	
124		18. Closure (S)	Contact		May we take your phone number in case we need to conduct any follow-up calls with you if some of the information is not clear?	Choose one		1_Yes; 2_No	Individual
125			Contact		What is your preferred phone number?	Fill if accept		(phone number)	Individual

126				Thank you very much once again for your time, we are now finishing the interview	<i>Please note down any relevant observations you made during the interview</i>		(observations, notes)	
127		Enumerator perseverance	Average number of calls before reaching respondent	How many calls were needed to reach this respondent?	Fill	Only for enumerator	(number of calls)	Enumerator
128		Enumerator satisfaction	Average quality of contact with respondent	How would you rate the quality of the interaction with the respondent? On a scale from 0 to 10 (0: Poor quality; 10: Excellent quality)	Choose one	Only for enumerator	0; 1; 2; 3; 4; 5; 6; 7; 8; 9; 10; Don't know	Enumerator

6. Monitoring & Evaluation Plan

IMPACT Objective	External M&E Indicator	Internal M&E Indicator	Focal point	Tool	Will indicator be tracked?
Humanitarian stakeholders are accessing IMPACT products	Number of humanitarian organisations accessing IMPACT services/products Number of individuals accessing IMPACT services/products	# of downloads of x product from Resource Center	Country request to HQ	User_log	<input type="checkbox"/> Yes
		# of downloads of x product from Relief Web	Country request to HQ		<input type="checkbox"/> Yes
		# of downloads of x product from Country level platforms	Country team		<input type="checkbox"/> Yes
		# of page clicks on x product from REACH global newsletter	Country request to HQ		<input type="checkbox"/> Yes
		# of page clicks on products (factsheets / situation overviews) from Resource Center, Relief Web	Country team		X Yes
		# of visits to x webmap/x dashboard	Country request to HQ		<input type="checkbox"/> Yes
IMPACT activities contribute to better program implementation and coordination of the humanitarian response	Number of humanitarian organisations utilizing IMPACT services/products	# references in HPC documents (HNO, SRP, Flash appeals, Cluster/sector strategies)	Country team	Reference_log	<i>Ukraine HNO 2020 and Ukraine HRP 2020</i>
		# references in single agency documents			<input type="checkbox"/> Yes
Humanitarian stakeholders are using IMPACT products	Humanitarian actors use IMPACT evidence/products as a basis for decision making, aid planning and delivery Number of humanitarian documents (HNO, HRP, cluster/agency strategic plans, etc.) directly informed by IMPACT products	Perceived relevance of IMPACT country-programs	Country team	Usage_Feedback and Usage_Survey template	<input type="checkbox"/> Yes
		Perceived usefulness and influence of IMPACT outputs			<input type="checkbox"/> Yes
		Recommendations to strengthen IMPACT programs			<input type="checkbox"/> Yes
		Perceived capacity of IMPACT staff			<input type="checkbox"/> Yes
		Perceived quality of outputs/programs			<input type="checkbox"/> Yes
		Recommendations to strengthen IMPACT programs			<input type="checkbox"/> Yes
Humanitarian stakeholders are engaged in IMPACT programs throughout the research cycle	Number and/or percentage of humanitarian organizations directly contributing to IMPACT programs (providing resources, participating to presentations, etc.)	# of organisations providing resources (i.e. staff, vehicles, meeting space, budget, etc.) for activity implementation	Country team	Engagement_log	X Yes (1)
		# of organisations/clusters inputting in research design and joint analysis			X Yes (1)
		# of organisations/clusters attending briefings on findings			X Yes (5)

ANNEX 1: NGCA TARGET ENTITIES (STRATA)

