Story-Cards Index



- How do you access or purchase the food you need? F2 Describe the meals you eat regularly in your
- household during the week?
- How does the food you eat make you feel?
- F4 What kind of assistance have you received when food is not available to you?
- Who is affected by the limited availability of food?
- F6 Share with us ONF recommendation for this project/programme.



- Do women and men have the same opportunity to access education?
- Do women and men here have the same opportunities to access jobs?
- Do women and men here have the same access to decision making positions?
- Who is affected by these issues in your family/community?
- G5 Share with us ONE recommendation for this project/programme.



- What tupe of health problems are most widespread here?
- H2 Do you or your family members know what to do to address these health issues?
- Who is affected by these health issues?
- Have you received assistance for your health problem(s)?
- H5 What can you do to prevent future health problem(s)?
- H6 Share with us ONE recommendation for this project/programme.



- T1 What was the best part of this training for you?
- T2 What was the most challenging aspect of this training for you?
- T3 What was the most useful part of this training for you?
- T4 How did you use the knowledge you gained for uourself and/or in uour communitu?
- T5 Did you face any challenges in applying what uou learned in the trainina?
- Share with us ONE recommendation for this project/programme.



- Do uou have anu difficulties seeina, hearina. walking, climbing steps, remembering, with self care or communicating?
- How do you cope with the difficultu(ies)?
- Do you receive assistance for your difficultu(ies)?
- D4 Is there anybody in your family/community who is affected by your difficulty(ies)?
- D5 Share with us ONE recommendation which would help you better cope with your difficulty(ies).



Inclusion

- In the second of the second to basic services?
- 12 Do you feel your children receive equal access to education?
- Do you feel you have equal access to information in the community?
- 14 Have you been consulted at the begiinning, during and towards the end of this project/programme?
- 15 Share with us ONF recommendation for this project/programme.



Water, Sanitation and Hygiene Promotion

- WS1 What is your main source of drinking water? WS2 What is the main source of water used for other purposes (cooking, washing hands)?
- WS3 Do you do anything to your water to make it safer to drink?
- WS4 Share with us how you collect and store water.
- WS5 How and when do you wash your hands?
- WS6 Can you describe to us the sanitation facilities (toilets) in your community?
- WS7 Share with us ONE recommendation for this project/programme.



- Describe a typical meal in your household?
- How does the food you eat make you feel?
- Do you feel you need other types of food to make you feel healthier?
- Do you receive additional supplements to make you feel healthier?
- How do you store your food?
- Share with us ONE recommendation for this project/programme.



Cash Assistance

- Does the cash assistance cover your priority needs?
- Did uou face any challenges when receiving your cash assistance?
- How did you use the cash assistance?
- What were the changes in your life after receiving the cash assistance?
- C5 What were the changes in your community after people began to receive cash assistance?
- C6 Share with us ONF recommendation for this project/programme.



Protection

- P1 Are you facing any threats to your physical safetu and securitu?
 - What basic services/activities are available to
 - uou to help address anu risks?
- How do you think the situation could be improved? Who else is affected by these issues?
- Share with us ONE recommendation for this project/programme.



Education

- Do you go to school?
- What do you enjoy most about school?
- What do you enjoy least about school?
- How have you used the learning from school?
- Share with us ONE recommendation for this project/programme.



Livelihoods and basic needs

- How do you earn your living?
- Does your livelihood provide you with enough money to purchase food and necessary goods for your family?
- How is your livelihood affected by the disaster(s)?
- Are you doing anything to help you cope against future disasters?
- Share with us ONE recommendation for this project/programme.



- E1 Has the environment around you changed since the disaster?
- What concerns do you have regarding these environmental changes?
- E3 Have you had to adapt your daily routine because of these environmental changes?
- E4 How have these environmental changes affected uour familu?
- F5 Share with us ONF recommendation for this project/programme.



Community Engagement

- CE1 Do you participate in decisions that influence the project/programme?
- CF2 Do you receive relevant timely and reliable information on the project/programme?
- CE3 Are you provided with a way to feedback your questions/complaints?
- Share with us ONE recommendation for this project/programme.



Population Movement

- What kind of information did you receive during uour migration journey or at the destination?
- PM2 Describe the basic services during the migration journey or at destination?
- PM3 Do you know what to do if you are separated from your family?
- PM4 Share with us ONF recommendation for this project/programme.



- Has your current home been affected by the disaster(s)?
- Do you have access to safe shelter?
- Are you receiving any shelter assistance?
- How are you protecting your home from future disaster(s)?
- Share with us ONF recommendation for this project/programme.



Disaster Risk Reduction

- DRR1 What are the disaster(s) which affect uour communitu?
- DRR2 Are you taking any steps to prepare for these disaster(s)?
- DRR3 Do you know what to do when disaster(s) arrive(s)?
- DRR4 Are you receiving any support to prepare for future disaster(s)?
- DRR5 Share with us ONF recommendation for this project/programme.

Development Assistance

DAC1 How did the project address your needs? DAC2 \triangle Who has received assistance in your community from this project/programme? DAC3 Did the assistance you receive help you cope with uour situation better? DAC4 Tell us ONE story about how this project/ programme has affected your life. DAC5 O How do you do things differently now. as a result of this project/programme?

DAC6 Share with us ONE recommendation for

this project/programme.

- How did the project/programme address uour needs?
- Any opportunities you have gained from this project/programme?
 - Describe any challenges you have faced with this project/programme.
- How do you do things differently now, as a result of this project/programme?
 - How do you see success for this project/programme in the next 3 years?
 - Share with us ONE recommendation for this project/programme.



- Storyboarding

- W1 Who is the story about?
- Where did this take place?
- When did this take place?
- What is the issue being discussed? Why is this important to you?
- W6 Share with us ONE recommendation for this project/programme.



- CC1 Opportunities exist for women, men, youth, elderly and persons with disabilities?
- CC2 Difficulties in seeing, hearing, remembering, communicating, walking, climbing steps, with self care?
- CC3 Includes communities in decision making and provides opportunities for them to feedback. Any individuals facing threats to their physical
- CC4 safetu and securitu?