

Multi-sector Initial Rapid Assessment (MIRA) Form – version 3.0

INTRODUCTION & GUIDANCE PER SECTION		ED Education (to be checked with education staff if possible)	
<p>"Good morning/afternoon,</p> <p>My name is _____ and I am leading an assessment team composed of _____. We are collecting information here in _____ to better understand the situation after the (disaster/event). We would like a focus group discussion with community leaders, including women, health workers and teachers, if possible. All information shared will be anonymized. We will only record the name(s) and contact information of a primary contact, with their consent.</p> <p>Please answer all the questions to the best of your knowledge or ability. There are no wrong answers to the questions that will be asked. There is no direct benefit to the group in participating in this assessment and your participation is voluntary. You may refuse to answer any question and you can ask any question to the team as well"</p>		ED1 & ED2	Provide number of schools functional, partially functional, non-functional, completely, or partially damaged or occupied
		ED5	<i>Education supplies:</i> textbooks, stationery, recreation materials, etc. <i>School supplies:</i> furniture, blackboards, etc.
General Guidance		NU Nutrition	
<ul style="list-style-type: none"> Data collection to be organized with a group of individuals serving as key informants (KIs). These KIs should understand the situation/needs of the community well, such as community leaders, ensuring women participation. If possible, ensure health worker/s and teacher/s participation in the FG or interview them as key informants. Similarly, additional Focus Groups (FG) are to be organized only with women and girls and facilitated by female assessment team members. If time permits, conduct 2 FGs separately (1 with women; 1 with girls). Be thorough – ask every question and repeat as needed. Ensure as much as possible to gather disaggregated gender and age data. For questions with multiple possible answers, avoid reading the options until the respondents have answered. For questions that ask for a proportion of the population, probe and encourage a response where appropriate. If respondents are still not sure, you can leave it blank. In case of finding separated or unaccompanied children, rapidly alert MRCS and UNICEF. Always have on hand the different referral hotlines for referring GBV, CP and PSEA incidents to share with individuals disclosing or reporting. Before deployment read and understand the 'do's and don'ts' when these types of disclosures are encountered. 		NU3	Problems associated with nutrition of children under 2 and pregnant and lactating women in emergency situations: <ul style="list-style-type: none"> - Any factor that disrupts mothers from breastfeeding their children at any stage (under 6 months – EBF, from 6 – 23 months), including violation of the code of marketing of breastmilk substitutes. - Lack of access to appropriate complementary foods and preparing them in a hygienic or timely manner - Inadequacy of WASH facilities - Women being disproportionately affected by inadequate rations - Lack of options available to non-breastfed infants
		PR Protection	
		During questions around safety and security, particularly with women and girls, let participants know that they should not list the name of possible survivors, as it may affect their safety and compromise their confidentiality. Data collectors should also ensure they do not collect any identifying information.	
		PR1 & PR2	If relevant to context
		PR 5	Explosive Ordnance (EO) includes all munitions that contain explosives, nuclear fusion, or fission materials, and biological or chemical agents. In Myanmar, the most common EO are landmines, artillery, rockets, mortars, airdropped bombs, grenades, small arms ammunition, and improvised explosive devices (IEDs). EO come in a variety of shapes and sizes. They may be manufactured or improvised and are usually made of metal, plastic and/or wood.
		PR14, PR15 & PR 16	DO NOT READ OUT. Prompt if necessary (mark multiple responses)
		PR14 & PR 15	In its most extreme forms, the worst forms of child labor involve children being enslaved, separated from their families, exposed to serious hazards and illnesses and/or left to fend for themselves on the streets of large cities - all of this often at a very early age.
BF BASIC INFORMATION		SH: Sanitation and Hygiene	
BF1	Register name and gender of each assessment team member	SH3	Hygiene items include: hand/body soap, laundry soap, sanitary pads, buckets, and Jerri cans.
BF2	Register number of males and females within the FG interviewed		
SP Site Information and Population		WS Water Supply	
SP3	Distance to closest village to be registered by miles AND/OR by time depending on respondents knowledge	WS1	<i>Sufficient daily amount of drinking water:</i> 3 liters per person per day
SP9	<ul style="list-style-type: none"> - <u>Child/adolescent at risk:</u> at risk of protection concerns including child marriage, child labor (1), recruitment and use by armed forces, survivors of violence and abuse, etc. - <u>Person with disability:</u> those with long-term impairment (physical, sensory, learning), whether permanent or not. - <u>Child headed household:</u> household headed only by a girl or a boy under the age of 18 years. - <u>Single-parent household:</u> household headed only by a single parent (male or female) with one or more children. Includes households where the second parent, if still part of the family, is not living with the household. - <u>Unaccompanied children:</u> without parents, grandparents, aunt/uncle or adult brothers/sisters. - <u>Separated children:</u> separated from both parents, or from legal/customary primary caregiver, but not necessarily from other relatives. <p>(1): <u>Child labour</u> refers to work that is mentally, physically, socially or morally dangerous and harmful to children; and interferes with their schooling: by depriving them of the opportunity to attend school; by obliging them to leave school prematurely; or by requiring them to attempt to combine school attendance with excessively long and heavy work. Child labour is work that deprives children of their childhood, their potential and their dignity, and that is harmful to physical and mental development.</p>	WS3	Distance to closest water source to be registered by miles AND/OR by time depending on respondents' knowledge.
		WS5	<i>Sufficient daily amount of water for domestic use (such as cooking, washing clothing and bathing):</i> 12 liters per person per day
		CC Communication with communities	
		CC1	Do not read out. Prompt if necessary (mark multiple responses)
		CC3	Do not read out. Mark then ask is there anything else?
		DB Direct Observation (by Assessment Team)	
		DB4	Existence of some separation where women/girls will have some privacy in order to change clothes.
		This assessment form is intended to provide all humanitarian actors with an immediate, multi-sectoral overview of conditions and needs in crisis affected areas. Information will be collected through focus group interview (ensuring women participation and if feasible, focus group discussion on specific questions only with women) and key informants (health, education) where available. Please complete one form for each camp/village/site visited. The preferred method of submission is to send forms via the Kobo App/webpage. Excel forms also can be sent to ochampyanmar@un.org or head of OCHA sub-office.	

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BF: BASIC INFORMATION	
BF1 Interviewer	
Team Leader (TL): Name & Organization	
Team Composition: Name, Gender & Organization	
Assessment Date(dd/mm/yyyy)	
Team Leader's Phone	
<input type="checkbox"/> Before you begin: Has the purpose of MIRA been explained AND consent been given by Focus Group participants?	
BF2 Focus group interviewed	
How many males and females	___ M / ___ F
Primary contact name (w consent)	
Primary contact phone for follow-up	
2 nd contact name (Optional w consent)	
2 nd contact phone (w consent)	
BF3 Geographic Information	
State	
Township	
Village Tract/Town	
Village/Ward Name	
Site Name	
Site PCode	(Only in KOBO)
Latitude (dd.ddddd)	(Only in KOBO)
Longitude (dd.ddddd)	(Only in KOBO)
SP: SITE INFORMATION AND POPULATION	
Access	
SP1 Accessible as usual?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
SP2 If not, type of disruption	
SP3 Current distance and traveling time to closest main village/town	1. ___ mile or 2. ___ minutes
SP4 Means of traveling to closest main village/town	1. <input type="checkbox"/> On foot 2. <input type="checkbox"/> Motorbike 3. <input type="checkbox"/> 4-wheeled vehicle
Population Data and Humanitarian Assistance (Estimate total number; provide sex breakdown, if known)	
SP5a Number of people at site/village	Total /M /F: ___ T / ___ M / ___ F
SP5b Number of households at site/village	___
SP6 Number of people evacuated/displaced away from assessment site/village/town	___ T / ___ M / ___ F
SP7 Total number of affected people at site/village	___ T / ___ M / ___ F
SP8 Population affected per age (Estimate total number; provide sex breakdown, if known)	
a. 0 – 5 years	___ T / ___ M / ___ F
b. 6 – 11 years	___ T / ___ M / ___ F
c. 12 – 14 years	___ T / ___ M / ___ F
d. 15 – 17 yrs	___ T / ___ M / ___ F
e. 18 – 59 yrs	___ T / ___ M / ___ F
f. 60 yrs+	___ T / ___ M / ___ F
SP9 Vulnerable Population (Estimate total number; provide sex breakdown where applicable, if known)	

a. Pregnant women	
b. Lactating women	
c. Children/ adolescents at risk	___ T / ___ M / ___ F
d. Person with disabilities	___ T / ___ M / ___ F
e. Child-headed households	___ T / ___ M / ___ F
f. Single-parent household (indicate if man or women)	___ Male-headed ___ Female-headed
g. Unaccompanied children	___ T / ___ M / ___ F
h. Separated children	___ T / ___ M / ___ F
i. Other: _____	___ T / ___ M / ___ F
SP10 Has any organization provided assistance recently in this location?	
Type of assistance	Name of Organization
SP11 Which are the most important needs for the community?	
1. _____	
2. _____	
3. _____	
Displacement Trends	
SP12 Are there people in this village/site who were displaced from somewhere else?	<input type="checkbox"/> Yes <input type="checkbox"/> No
IF SP12 YES: Ask SP 13 through SP 18	
SP13.1 Township/Village/ Ward of origin 1	
SP13.2 Township/Village/ Ward of origin 2	
SP14 Since leaving their place of origin, is this village/site people's first displacement, second, or more?	<input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Third or more
SP15 How many days, on average, at village/site after the disaster/event?	___
SP16 Do you believe more people will arrive in the village/site in the coming days or weeks?	
Yes, most families not yet in village/site	<input type="checkbox"/>
Yes, a few families not yet in village/site	<input type="checkbox"/>
No, everybody already here	<input type="checkbox"/>
Unknown, not sure	<input type="checkbox"/>
SP17. How long do you expect most displaced families will stay in village/site?	
Less than a week	<input type="checkbox"/>
Between one week and two weeks	<input type="checkbox"/>
Between two weeks and one month	<input type="checkbox"/>
More than a month	<input type="checkbox"/>
Unknown, not sure	<input type="checkbox"/>
SP18 Do people plan to return to their place of origin if the situation allows?	
<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not sure	
ED: EDUCATION (TO BE CHECKED WITH EDUCATION STAFF IF POSSIBLE)	
ED1 How many education institutions are functional, partially functional, or not functioning in this village/site?	a. <input type="checkbox"/> Functional Num. ___ b. <input type="checkbox"/> Partially functional Num. ___ c. <input type="checkbox"/> Non-functional Num. ___

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ED2 [If ED1 is c.] If not functional, WHY?	a. Completely damaged Num. [_____] b. Partially damaged Num. [_____] c. Occupied/used for other purposes Num. [_____] d. School is closed (academic year) e. No teaching materials f. No human resources g. Other _____
ED3 Children NOT attending school due to the disaster/event:	
a. Pre-school	<input type="checkbox"/> Few <input type="checkbox"/> Most <input type="checkbox"/> All b. Primary <input type="checkbox"/> Few <input type="checkbox"/> Most <input type="checkbox"/> All c. Secondary <input type="checkbox"/> Few <input type="checkbox"/> Most <input type="checkbox"/> All
ED4 Due to the disaster/event, did any education institutions lose access to functional water points or latrines?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
[If YES],	a. [_____] # of education institutions that lost access to functional water points b. [_____] # of education institutions that lost access to functional latrines
ED5 What are the main education needs?	
<input type="checkbox"/> Education supplies <input type="checkbox"/> School supplies <input type="checkbox"/> Temporary learning spaces <input type="checkbox"/> Teachers <input type="checkbox"/> Other (specify) _____	
ED6 Are classes being held?	
1. <input type="checkbox"/> Yes: Where [_____] 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
FS: FOOD SECURITY	
FS1 Food Stocks: How many households in the village/site have food stock that will last:	
a. Less than 1 week	c. 2 to 4 weeks
b. 1 to 2 weeks	d. More than 4 weeks
FS2 Loss of Livestock (skip if irrelevant): How many households in the village/site have	
a. Less than half of their livestock	b. More than half of their livestock
c. All their livestock	
FS3 Loss of crops: How many farmers in the village have	
a. Partially lost their crops [_____] b. Totally lost their crops [_____] c. Not lost anything [_____]	
FS4 Fishing/Casual labour (skip if irrelevant): How many fisherfolks/ casual laborers in the village/site are able to fish/work?	
a. More than half [_____] b. Less than half [_____] c. None [_____]	
HE: HEALTH (TO BE CHECKED WITH HEALTH STAFF IF POSSIBLE)	
HE1 What are the top three health concerns?	
a. _____ b. _____ c. _____	
HE2 Are there any health needs (services, providers, medicine, equipment, etc.)?	
<input type="checkbox"/> Yes: _____ <input type="checkbox"/> No	
HE3 Is the health facility in this village/site damaged?	
a. <input type="checkbox"/> Totally destroyed <input type="checkbox"/> Partially damaged c. <input type="checkbox"/> Slightly damaged <input type="checkbox"/> No damaged e. <input type="checkbox"/> Not applicable/no facility	
HE4 Is functional healthcare accessible? (fixed post, private, mobile)	
a. <input type="checkbox"/> Yes b. <input type="checkbox"/> No	

HE5 [If HE4 is yes], how is the service provided?	a. <input type="checkbox"/> Mobile clinic (circle): Authorities or NGO/CSO (name): _____ b. <input type="checkbox"/> Fixed site (circle all that apply): Sub-rural health center - Rural health center - Station hospital - Township hospital - Private clinics – Traditional clinic – Home clinics
HE6 [If HE4 is yes], what is the frequency of service?	a. <input type="checkbox"/> Less than 1 x / week b. <input type="checkbox"/> More than 1 x / week
HE7: [If HE4 is yes], if needed, can patients be referred somewhere for more specialized care?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
HE8 [If HE7 is Yes]: Where is it and how long does it take?	
a. Where? [_____] b. How far is it? [_____] miles or How long does it take? [_____] minutes	
If possible, ask health volunteers, health staff or community leader the following questions as key informants:	
HE9 Has there been any disease outbreak within the last 14 days? If yes, what?	
1. <input type="checkbox"/> Yes [_____] 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
HE10 Do people with chronic diseases (such as hypertension, asthma or diabetes) receive continuous treatment?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
HE11 Do people with communicable disease (such as tuberculosis or AIDS) receive continuous treatment?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
MK: MARKETS	
MK1 Does community has access to a functioning market?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
MK3 [If MK1 is yes]: Are essential household items (NFIs, hygiene) available in enough quantity in the markets?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
MK3 [If MK1 is yes]: Is food available in enough quantity in the markets?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
MK4 [If MK1 is yes]: Are prices in the market similar to prices in other markets?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
MK5 [If MK4 is No], how have prices changed? (estimate inflation or deflation % change)	
<input type="checkbox"/> Higher prices by [_____] % <input type="checkbox"/> Lower prices by [_____] %	
MK6 Would the community prefer to receive cash or in-kind assistance?	
1. <input type="checkbox"/> Cash 2. <input type="checkbox"/> In kind	
NU: NUTRITION	
NU1 Has infant formula (dried or ready to use) or other milk products (e.g., dried whole, semi-skimmed or skimmed milk powder, ready to use milk) and/or baby bottles/teats been distributed since the disaster/event started?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
a. [If NU1 is YES], what products?	

b. [If NU1 is YES], by whom?	

c. [If NU1 is YES], was any cost paid by the beneficiary?	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
NU2 Do pregnant or lactating women have any specific needs?	

NU3 Has the community/health staff/parents identified any problems in feeding children under 2 years since the disaster/event started? (see page 1 for examples)	
1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not sure	
a. [If NU3 is YES], what problems?	

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NU4 What are the priorities expressed by parents and caregivers regarding infant and young child feeding?			
PR: PROTECTION			
PR1 Reasons people left their homes? (skip if irrelevant)			
PR2 How safe did people feel along the way to current village/site? (skip if irrelevant)		1. <input type="checkbox"/> Always safe 2. <input type="checkbox"/> Mostly safe 3. <input type="checkbox"/> Sometimes safe 4. <input type="checkbox"/> Not at all safe	
PR3 How safe do people feel in current village/site? (Please note who provided the information i.e., man, women, youth, elderly or PWD_____)		1. <input type="checkbox"/> Always safe 2. <input type="checkbox"/> Mostly safe 3. <input type="checkbox"/> Sometimes safe 4. <input type="checkbox"/> Not at all safe	
PR4 [If PR3 is 3 or 4]: Why unsafe?			
PR5 Are there unexploded ordnance such as landmines, grenades, or improvised explosive devices in or near the current village/site?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Unsure	
PR6 [If PR5 is yes]: where? (nearby farmland, forest, etc.):			
PR7 [If PR5 is yes]: Have you heard of an incident of landmines/UXOs in the village/site or surrounding areas?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
PR8 Are you fearful that you might encounter landmines/UXOs on the village/site and surrounding areas?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
PR9 Can people move freely out of and around the village/site?		1. <input type="checkbox"/> Always 2. <input type="checkbox"/> Mostly 3. <input type="checkbox"/> Sometimes 4. <input type="checkbox"/> Rarely	
PR10 [if PR9 is 2 or 3 or 4]: How many people in this village/site are affected by movement constraints?		1. <input type="checkbox"/> All 2. <input type="checkbox"/> Most 3. <input type="checkbox"/> Some 4. <input type="checkbox"/> None	
PR11 Do people have CSCs OR household lists? (Citizenship scrutiny card; the citizenship ID of Myanmar)		1. <input type="checkbox"/> All 2. <input type="checkbox"/> Most 3. <input type="checkbox"/> Some 4. <input type="checkbox"/> None	
PR12 Are any of the following services available?			
a. Child friendly spaces	<input type="checkbox"/>	e. Awareness raising program	<input type="checkbox"/>
b. Community based program	<input type="checkbox"/>	f. Services to address sexual and domestic violence of children	<input type="checkbox"/>
c. Psychosocial support for children	<input type="checkbox"/>	g. Psychosocial support for caregivers	<input type="checkbox"/>
d. Case management support for children		<input type="checkbox"/>	
PR13 What are known situations in this community where CHILDREN are at increased risk of abuse, violence or harassment?			
a. In camps/ settlements	<input type="checkbox"/>	g. At school	<input type="checkbox"/>
b. At assistance/distribution	<input type="checkbox"/>	h. At home	<input type="checkbox"/>
c. At water collection points	<input type="checkbox"/>	i. While moving in the area (e.g. firewood collection,	<input type="checkbox"/>
d. At bathing facilities	<input type="checkbox"/>	j. On the road	<input type="checkbox"/>
e. At health facilities	<input type="checkbox"/>	k. Nowhere	<input type="checkbox"/>
f. At checkpoints		<input type="checkbox"/>	l. Other_____
PR14 Are there any specific concerns for boys ?			
a. Attacks	<input type="checkbox"/>	k. Working to contribute to household income	<input type="checkbox"/>
b. Kidnapping/ abductions	<input type="checkbox"/>	l. Travelling far from home for work	<input type="checkbox"/>
c. Trafficking	<input type="checkbox"/>	m. Not being able to go back to school	<input type="checkbox"/>
d. Sexual violence	<input type="checkbox"/>	n. Not being able to return home	<input type="checkbox"/>
e. Nightmares or bad memories	<input type="checkbox"/>	o. Being separated from their friends	<input type="checkbox"/>
f. Tension within the family	<input type="checkbox"/>	p. Being separated from their family	<input type="checkbox"/>
g. Violence in the community	<input type="checkbox"/>	q. Witnessing or experiencing violence inside the home	<input type="checkbox"/>
h. Substance abuse	<input type="checkbox"/>	r. Involved in the worst forms of labor	<input type="checkbox"/>
i. Arbitrary arrest/detention	<input type="checkbox"/>	s. Recruitment into armed groups	<input type="checkbox"/>
j. Psychosocial distress	<input type="checkbox"/>	t. Other_____	<input type="checkbox"/>
PR15 Are there any specific concerns for girls ?			
a. Attacks	<input type="checkbox"/>	k. Travelling far from home for work	<input type="checkbox"/>
b. Kidnapping/ abductions	<input type="checkbox"/>	l. Not being able to go back to school	<input type="checkbox"/>
c. Trafficking	<input type="checkbox"/>	m. Being separated from their friends	<input type="checkbox"/>
d. Sexual violence	<input type="checkbox"/>	n. Being separated from their family	<input type="checkbox"/>
e. Nightmares or bad memories	<input type="checkbox"/>	o. Witnessing or experiencing violence inside the home	<input type="checkbox"/>
f. Tension within the family	<input type="checkbox"/>	p. Involved in the worst forms of labor	<input type="checkbox"/>
g. Violence in the community	<input type="checkbox"/>	q. Arbitrary arrest/detention	<input type="checkbox"/>
h. Psychosocial distress	<input type="checkbox"/>	r. Early marriage	<input type="checkbox"/>
i. Not being able to return home	<input type="checkbox"/>	s. Recruitment into armed groups	<input type="checkbox"/>
j. Working to contribute to household	<input type="checkbox"/>	t. Other_____	<input type="checkbox"/>
PR16 What are the known situations or places in this community where WOMEN AND GIRLS are at increased risk of abuse, violence or harassment?			
a. No safe place in the community	<input type="checkbox"/>	f. Risk of attack at checkpoints	<input type="checkbox"/>
b. Sexual violence/abuse	<input type="checkbox"/>	g. Being forced to have sex to pay for food or	<input type="checkbox"/>
c. Violence in the home	<input type="checkbox"/>	h. Unable to access services and resources	<input type="checkbox"/>
d. Risk of attack when going to latrines, local markets, etc.	<input type="checkbox"/>	i. Other (specify):_____	<input type="checkbox"/>
e. Risk of attack when traveling outside the community	<input type="checkbox"/>		
PR17 Are there any other specific groups at risk or in immediate need? (elderly, people with disabilities, etc.)		1. <input type="checkbox"/> Yes: _____ 2. <input type="checkbox"/> No	

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PR18 Who can you take your safety concerns to at this village/site?			
CM: Camp Coordination and Camp Management <i>(Skip to SN1 if not in an IDP site/camp)</i>			
CM1 Is there a camp management system?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not Sure	
CM2 [If SM1 is Yes], Who is managing the site?		<input type="checkbox"/> Elected person from the site <input type="checkbox"/> Humanitarian organization <input type="checkbox"/> Religious group <input type="checkbox"/> Local Authorities <input type="checkbox"/> Other (specify) _____	
CM3 [If SM1 is Yes], Does the camp management structure address the needs and listen well to the IDPs?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
CM4 What services are currently functioning in the camp?		<input type="checkbox"/> Shelter <input type="checkbox"/> Food <input type="checkbox"/> NFI <input type="checkbox"/> Water <input type="checkbox"/> Sanitation <input type="checkbox"/> Education <input type="checkbox"/> Protection <input type="checkbox"/> Livelihoods support <input type="checkbox"/> Other (specify) _____	
CM5 What services do you need in your site (not currently functioning/provided) (select up to 3)		<input type="checkbox"/> Shelter <input type="checkbox"/> Food <input type="checkbox"/> NFI <input type="checkbox"/> Water <input type="checkbox"/> Sanitation <input type="checkbox"/> Education <input type="checkbox"/> Protection <input type="checkbox"/> Livelihoods support <input type="checkbox"/> Other (specify) _____	
CM6 Any issues in the camp you would like to raise/need to be addressed (open-ended):		_____	
SN: SHELTER AND NON-FOOD ITEMS			
SN1 Number of destroyed houses in the village/site? (cannot be used)		_____	
SN2 Number of damaged houses in the village/site? (can still be used but needs to be fixed)		_____	
SN3 Number of people staying with host community		_____	
SN4 Number of people sheltered in common sites		a. Public buildings _____ b. Tents/tarpaulin _____ c. Religious buildings _____ d. Boarding schools _____	
SN4a [IF SN4 is B]: Are more than one family sharing one tent/tarp?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes: Average number of families sharing one tent/tarp?		_____	
SN4b – [IF SN4 is A or C or D] Types of shelter space			
Hall with no outer wall		<input type="checkbox"/>	Hall/room with outer walls and partitioned
Hall/room with outer wall but not partitioned		<input type="checkbox"/>	One person per room
SN5 Do shelters provide private spaces for women and girls?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
SN6 Is there enough lighting in accommodation and common areas?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No	
SN7 What is the source of electricity in the community?		1. <input type="checkbox"/> No electricity 2. <input type="checkbox"/> Common generator 3. <input type="checkbox"/> Private generators 4. <input type="checkbox"/> Solar Panels 5. <input type="checkbox"/> Other (specify): _____	
SN8 Do people need any of the following items (state number):			
Mosquito net	_____	Jerry can	_____
Fuel stick	_____	Clothes	_____
Blanket	_____	Solar Lamp	_____

Kitchen set	_____	Rain gear items	_____
Plastic bucket	_____	Other 1 (specify):	_____
Sleeping mat	_____	Other 2 (specify):	_____
Tarpaulin	_____		
SH: SANITATION AND HYGIENE			
SH1 How many affected people have access to functioning latrines?		1. <input type="checkbox"/> All 2. <input type="checkbox"/> Most 3. <input type="checkbox"/> Few 4. <input type="checkbox"/> None	
SH2 How many affected people have access to functioning handwashing?		1. <input type="checkbox"/> All 2. <input type="checkbox"/> Most 3. <input type="checkbox"/> Few 4. <input type="checkbox"/> None	
SH3 How many people need any of the following hygiene items?			
Bathing soap	<input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Few <input type="checkbox"/> None	Sanitary Pads	<input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Few <input type="checkbox"/> None
Laundry soap	<input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Few <input type="checkbox"/> None	Other hygiene items (specify) _____	<input type="checkbox"/> All <input type="checkbox"/> Most <input type="checkbox"/> Few <input type="checkbox"/> None
WS WATER SUPPLY			
WS1 Daily amount of drinking water available		a. <input type="checkbox"/> Sufficient b. <input type="checkbox"/> Not sufficient	
WS2 What is the main water source?		<input type="checkbox"/> Rainwater <input type="checkbox"/> River <input type="checkbox"/> Pond <input type="checkbox"/> Tube well <input type="checkbox"/> _____	
WS3 How far is the water source?		1. _____ miles or 2. _____ minutes	
WS4 Is the main water source flooded?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Not Sure	
WS5 Daily amount of water for domestic use (such as cooking, washing clothing and bathing)?		a. <input type="checkbox"/> Sufficient b. <input type="checkbox"/> Not sufficient	
WS6 Condition of man-made water infrastructure:		a. <input type="checkbox"/> Working b. <input type="checkbox"/> Not working c. <input type="checkbox"/> Destroyed d. <input type="checkbox"/> Did not previously exist 3. <input type="checkbox"/> Not Sure	
IF [WS6 is B or C]: How many in the site/village are in this condition?		1. <input type="checkbox"/> All 2. <input type="checkbox"/> Most 3. <input type="checkbox"/> Few 4. <input type="checkbox"/> None	
CC: COMMUNICATION WITH COMMUNITIES			
CC1 Since the disaster/event, what are community main ways of finding information here? (select all that apply)			
Television	<input type="checkbox"/>	Community/events	<input type="checkbox"/>
Radio	<input type="checkbox"/>	From friends/family	<input type="checkbox"/>
Facebook/social networks	<input type="checkbox"/>	From another person	<input type="checkbox"/>
Mobile phone call/SMS	<input type="checkbox"/>	Prefer not to answer	<input type="checkbox"/>
Posters / leaflets	<input type="checkbox"/>	Other _____	<input type="checkbox"/>
CC2 Are any of the following services functioning/accessible in the community:		1. <input type="checkbox"/> Mobile network 2. <input type="checkbox"/> Internet 3. <input type="checkbox"/> Electricity 4. <input type="checkbox"/> Other power sources	
CC3 Since the disaster/event, what does the community most need information on (NOW):			

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General news on what is happening <input type="checkbox"/>	<input type="checkbox"/>	How to get healthcare/ medical attention <input type="checkbox"/>	<input type="checkbox"/>
News on what is happening at home <input type="checkbox"/>	<input type="checkbox"/>	How to get cooking fuel/firewood) <input type="checkbox"/>	<input type="checkbox"/>
The weather <input type="checkbox"/>	<input type="checkbox"/>	How to get shelter/ accommodation or shelter materials <input type="checkbox"/>	<input type="checkbox"/>
The security situation here <input type="checkbox"/>	<input type="checkbox"/>	How to replace personal documentation (e.g. ID, birth certificate) <input type="checkbox"/>	<input type="checkbox"/>
The security situation at home <input type="checkbox"/>	<input type="checkbox"/>	How to get access to education <input type="checkbox"/>	<input type="checkbox"/>
How to get help after attack/harassment or stay safe to prevent attack/ harassment <input type="checkbox"/>	<input type="checkbox"/>	How to get transport <input type="checkbox"/>	<input type="checkbox"/>
How to access aid in general (ask what kind) <input type="checkbox"/>	<input type="checkbox"/>	How to find missing people <input type="checkbox"/>	<input type="checkbox"/>
How to get water <input type="checkbox"/>	<input type="checkbox"/>	Other (specify): <input type="checkbox"/>	<input type="checkbox"/>
How to get food <input type="checkbox"/>	<input type="checkbox"/>	_____ <input type="checkbox"/>	<input type="checkbox"/>
CC4 Does the community know where to request for assistance/ give complaints/feedback?		1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No. 3. <input type="checkbox"/> Not Sure	
DB: DIRECT OBSERVATION (BY ASSESSMENT TEAM)			
Direct Observation	Yes/No	Details	
DB1 Are there any impassable or inaccessible roads?			
DB2 Are there enough functioning latrines?			
DB3 Do functioning latrines have locks and lightings?			
DB4 Are the latrines gender segregated?			
DB5 Are latrines accessible to persons with disabilities, particularly those with physical impairments?			
DB6 Are there signs of open defecation?			
DB7 Is there a common waste dump?			
DB8 Is there stagnant water/large puddles?			
DB9 Is there sufficient safe drinking water sources?			
DB10 Is there lighting/electricity?			
DB11 Are livestock roaming freely in the affected area?			
DB12 Are there children roaming around playing/searching in debris unsupervised?			
General observations or what was seen in the affected area:			
Any additional remarks:			
KN. KEY NEEDS (BY ASSESSMENT TEAM)			
KN1 List the three most important needs for the community, based on the observations made by the assessment team	1. _____		
	2. _____		
	3. _____		
KN2: Add any additional details on needs:			
FGW: FOCUS GROUP WITH WOMEN/GIRLS (BY FEMALE ASSESSMENT TEAM MEMBERS)			
<i>Note: If time permits, split FG between women and girls (see below)</i>			

Focus Group Discussion with:	<input type="checkbox"/> Women only (see Girls only FG below) <input type="checkbox"/> Women and Girls
FGW1 What are the most significant safety and security concerns facing (women and girls) in these communities? <i>Probe: What about those with disabilities?</i>	
FGW2 Are there areas where (women and girls) do not feel safe?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGW3 What are the known situations or places in this community where (women and girls) are at increased risk of violence or harassment?	
FGW4 Are there specific services available for pregnant and breastfeeding women?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGW5 Are (women and girls) aware of where to obtain information on specific services for them?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGW6 It is easy to get/buy sanitary materials or freely receive them from NGOs/CSOs?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGW7: Have you observed any different challenges for (women and girls) with disabilities? What are they?	1. <input type="checkbox"/> Yes: _____ 2. <input type="checkbox"/> No
FGW8 What specific needs, if any, do (women and girls) have as a result of the event?	
FGG: FOCUS GROUP with GIRLS ONLY (if time permits) (BY FEMALE ASSESSMENT TEAM MEMBERS)	
FGG1 What are the most significant safety and security concerns facing girls in these communities? <i>Probe: What about girls with disabilities?</i>	
FGG2 Are there areas where girls do not feel safe?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGG3 What are the known situations or places in this community where girls are at increased risk of violence or harassment?	
FGG4 Are there specific services available for pregnant and breastfeeding women and girls?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGG5 Are girls aware of where to obtain information on specific services for them?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGG6 It is easy to get/buy sanitary materials or freely receive them from NGOs/CSOs?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
FGG7 Do you observe any different challenges for girls with disabilities? What are they?	1. <input type="checkbox"/> Yes: _____ 2. <input type="checkbox"/> No
FGG8 What specific needs, if any, do girls have as a result of the event?	